



BODY PARTS AND ADVICES FOR EACH ILLNESS

NOMBRE DEL ALUMNO: Jennifer Carbajal Mauricio

NOMBRE DEL PROFESOR: Liliana Rubí Gutiérrez

MATERIA: Ingles

TRABAJO: actividades (Body parts and advices for each illness)

CARRERA: LEN

CUATRIMESTRE: 3er cuatrimestre

Imperatives

Get some rest. Don't stay up late.
 Drink lots of juice. Don't drink soda.
 Take one pill every evening. Don't work too hard.

GRAMMAR PLUS

Complete these sentences. Use the correct forms of the words in the box.

✓ call	stay	not go	not drink
see	take	✓ not worry	not eat

1. Call a dentist.
2. Don't worry too much.
3. Take a hot bath.
4. not go to school.
5. stay in bed.
6. see a doctor.
7. not drink coffee.
8. not eat any candy.

SPEAKING Good advice?

A Write two pieces of advice for each problem.

1. take some rest
try a cold pack
2. don't work too hard
put on some muscle cream
3. put on some eyes drops
try a warm compress
4. don't drink coffee
meditate

B GROUP WORK Act out the problems from part A. Your classmates give advice.

A: I don't feel well.
 B: What's the matter?
 A: My feet hurt.
 B: I have an idea. Take a hot bath. And don't.

INTERCHANGE 12 Problems, problems

WORKBOOK

name parts of the body. Use the words in the box.

leg, mouth, neck, nose, shoulder, stomach, teeth, toes

1. eye 2. mouth 3. neck 4. stomach 5. fingers 6. leg 7. toes

8. hair 9. ear 10. nose 11. teeth 12. shoulder 13. elbow 14. arm 15. hand 16. foot

1. I have a sore throat. Don't go to work today. Drink some chamomile tea.
 2. I have a toothache. get some aspirin
 3. I have a cough. drink some cold syrup
 4. I have a cold. take some cold pills
 5. I have a stomachache. get some antacid
 6. I have a headache. take some aspirin
 7. I have the flu. don't go outside and take some rest
 8. I have a fever. take some rest and drink chamomile tea

Health survey

A How healthy and happy are you?
 Complete the survey.

How often do you . . . ?

	Often	Sometimes	Hardly ever	Never
get a headache	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
get an earache	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
get a cold	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
get the flu	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
get a stomachache	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
stay up late	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
feel sleepy	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
get a fever	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

B Write four sentences about your health. Use the information from the survey in part A.

Examples:
 I sometimes stay up late, but I hardly ever feel sleepy.
 I hardly ever get a cold or the flu.

1. I get sick very often with a headache. weather changes affect me and I get the flu
2. eating away from home I always have a stomach ache
3. weather changes I still get a fever
- 4.