



Mi Universidad

Activity 2

Nombre del Alumno: Sofía Guadalupe Pérez Martínez

Nombre del tema: Body parts and advices for each illness

Parcial 2

Nombre de la Materia: ingles

Nombre del profesor: Liliana Ruby Gutiérrez Penagos

Nombre de la Licenciatura: Lic. En enfermería

Cuatrimestre: tercer cuatrimestre

9 GRAMMAR FOCUS

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 see page 141

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. | 5. <u>stay</u> _____ in bed. |
| 2. _____ Don't worry _____ too much. | 6. <u>see</u> _____ a doctor. |
| 3. <u>take</u> _____ a hot bath. | 7. <u>don't drink</u> _____ coffee. |
| 4. <u>don't go</u> _____ to school. | 8. <u>don't eat</u> _____ any candy. |

10 SPEAKING Good advice?

A Write two pieces of advice for each problem.



- | | | | |
|--------------------------------------|--|--|--|
| 1. put ice
• take anal-
gesics | 2. give
massages
• Apply hot
compresses | 3. • avoid
neating
• use glasses | 4. • don't drink
Coffe
• drink passion
flower tea |
|--------------------------------------|--|--|--|

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

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

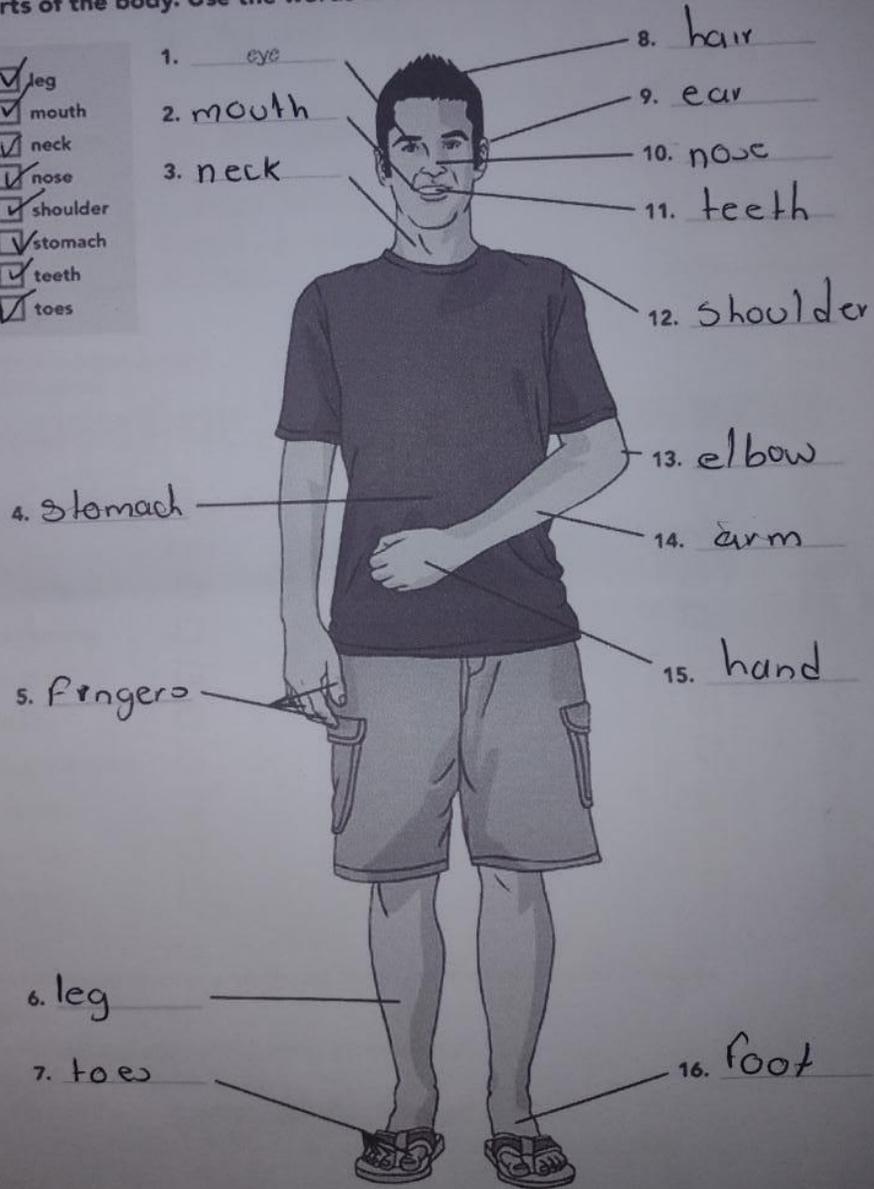
11 INTERCHANGE 12 Problems, problems

Give advice for common problems. Go to Interchange 12 on page 126.

WORKBOOK

1 Label the parts of the body. Use the words in the box.

- | | |
|---|--|
| <input checked="" type="checkbox"/> arm | <input checked="" type="checkbox"/> leg |
| <input checked="" type="checkbox"/> ear | <input checked="" type="checkbox"/> mouth |
| <input checked="" type="checkbox"/> elbow | <input checked="" type="checkbox"/> neck |
| <input checked="" type="checkbox"/> eye | <input checked="" type="checkbox"/> nose |
| <input checked="" type="checkbox"/> fingers | <input checked="" type="checkbox"/> shoulder |
| <input checked="" type="checkbox"/> foot | <input checked="" type="checkbox"/> stomach |
| <input checked="" type="checkbox"/> hair | <input checked="" type="checkbox"/> teeth |
| <input checked="" type="checkbox"/> hand | <input checked="" type="checkbox"/> toes |



7 Write two pieces of advice for each problem.

- | | |
|--------------------------|---|
| 1. I have a sore throat. | Don't go to work today. Drink some chamomile tea. |
| 2. I have a toothache. | go to the dentist |
| 3. I have a cough. | drinking some tea |
| 4. I have a cold. | go to some where quiet and rest |
| 5. I have a stomachache. | go to the bathroom |
| 6. I have a headache. | practice some yoga |
| 7. I have the flu. | stay home and rest |
| 8. I have a fever. | wear light clothing and see a lot of water |

8 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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
get an earache	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
get a cold	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
get the flu	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
get a stomachache	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
stay up late	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
feel sleepy	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
get a fever	<input 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.

- I hardly ever get an earache
- Sometimes I have a stomachache
- I hardly ever catch a cold
- Sometimes I have a headache