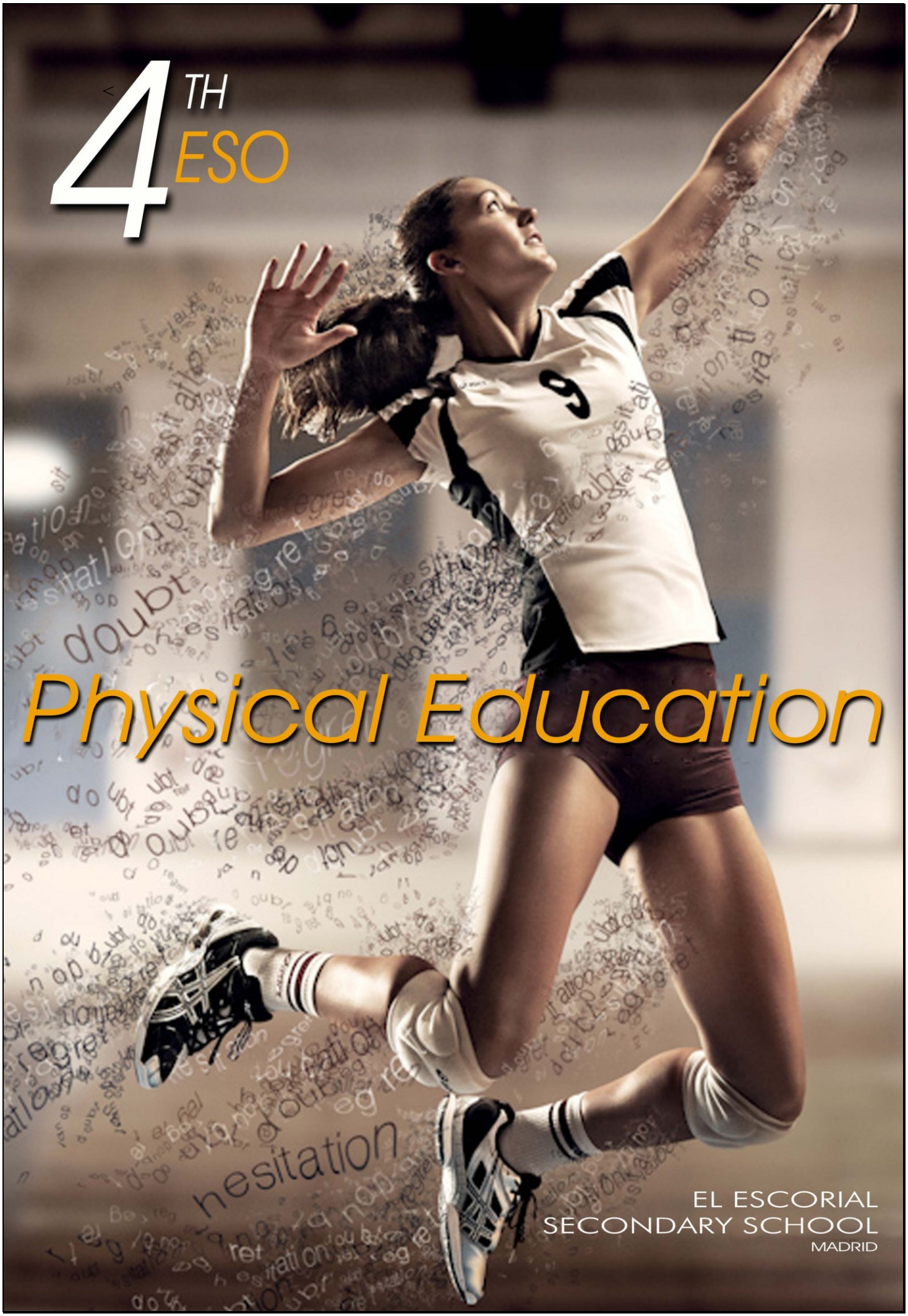
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Content









UNIT 1 THE SPECIFIC WARM UP

The specific warm up starts as a general one to gradually adapt, through specific activities (related to the subsequent main activity), all body systems to perform more intense activities, fulfilling a number of aims.

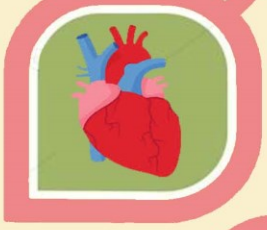
AIMS

- OUR PERFORMANCE IMPROVES. WE DO THE EXERCISES BETTER.
- WE ARE MORE FOCUSED. THE EXCERCISE WILL BE BETTER TOO.
- WE AVOID INJURIES THANKS TO A BETTER MUSCULAR COORDINATION

EFFECTS

CARDIOVASCULAR SYSTEM

The heart rate is increased and become more powerful. This leads that blood circulation is faster and O2 support is more effective.



RESPIRATORY SYSTEM

Breathing rate is increased (you breathe faster), so oxygenation is better.

LOCOMOTIVE SYSTEM

It increases muscular temperature and joints are more lubricated.

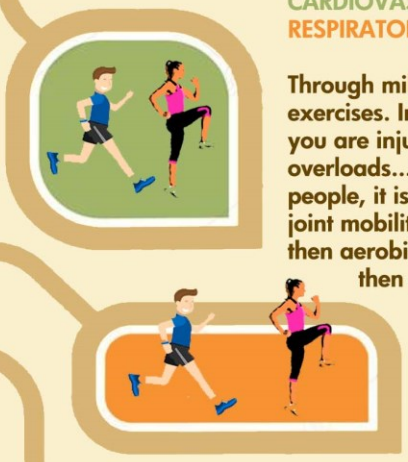
NERVOUS SYSTEM

Greater intermuscular (between muscles) and intramuscular (into the muscle itself) coordination, which prevents muscle incoordinations that lead to contractures (pulls) and muscle tears.

STRUCTURE

CARDIOVASCULAR AND RESPIRATORY SYSTEM

Through mild aerobic exercises. In cold days, if you are injured (Tendinitis, overloads...) or with elder people, it is good to do joint mobility in the beginnig, then aerobic exercises and then displacement exercises.



LOCOMOTIVE SYSTEM

Through joint mobility and muscular elasticity exercises related to those limbs that are going to work harder. For instance:
- Legs in cycling.
- Arms in handball.

NERVOUS SYSTEM

We have to do exercises more powerful gradually and technical gestures (with material) of the sport we are doing.
- Lay ups in basketball.
- Passes and shots in soccer.

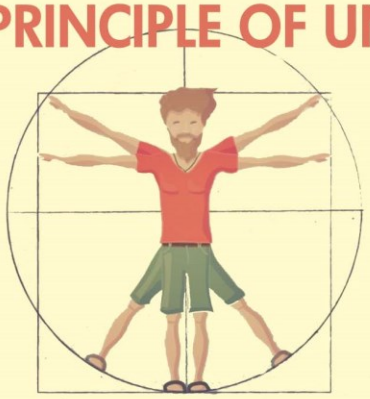
THE END

UNIT 2 TRAINING PRINCIPLES

Training is a well-planned process that use physical exercises to make morphological and functional adaptations in our body.
A good training must follow a serie of basic TRAINING PRINCIPLES.

PRINCIPLE OF UNITY	THE TWO BODY HEMISPHERES MUST BE TRAINED IN EACH WORKING SESSION AS WELL AS ALL THE BPA's IN THE ANNUAL GENERAL PLANNING.
PRINCIPLE OF INDIVIDUALIZATION	EACH TRAINING PLAN MUST BE ADAPTED TO EACH PERSON BASED ON THE FITNESS TEST CARRIED OUT AND THE AIMS WE WANT TO ACHIEVE.
PRINCIPLE OF EFFECTIVE LOAD STIMULATION	IT MUST BE WORKED BETWEEN 120/180 BPM, 75 MIN. PER WEEK OF INTENSE EXERCISE OR 150 MIN. OF MILD EXERCISE (MINIMUM).
PRINCIPLE OF CONTINUITY	IT IS RECOMMENDED TO WORK OUT FREQUENTLY AND NOT LEAVING TOO MUCH RECOVERY DAYS OR THE EFFECTS WILL BE LOST.
PRINCIPLE OF PROGRESSION	YOU MUST START FROM THE LITTLE TO THE MUCH, FROM THE EASY TO THE DIFFICULT. START PROGRESSING WITH THE V AND THEN WITH THE I.
PRINCIPLE OF ALTERNATION	IT IS RECOMMENDED TO LEAVE THE RIGHT RECOVERY PERIODS BETWEEN EXERCISES, SERIES, TRAINING SESSIONS AND PHASES OF TRAINING.
PRINCIPLE OF TRANSFER	BPS's WORKOUT MUST BE ORGANIZED IN ORDER THAT ONE HELPS THE OTHERS. IT IS CALLED POSITIVE TRANFER.

PRINCIPLE OF UNITY



THIS PRINCIPLE TELLS US THAT ALL BPA's MUST BE TRAINED TO ALLOW A COMPLETE AND BALANCED DEVELOPMENT OF THE BODY.
IN THE WORLD OF HEALTH, BPA's, WE SHOULD WORK OUT:

IF WE ONLY WORK OUT ONE OF THEM, THE FOLLOWING SETBACKS CAN HAPPEN:

- **ONLY STRENGTH:** MUSCLE AND ARTICULAR STIFFNESS.
- **ONLY FLEXIBILITY:** MUSCLE WEAKNESS AND POSSIBLE JOINT ALTERATIONS.
- **ONLY STAMINA:** MUSCLE OVERLOADS AND TENDINITIS.

PRINCIPLE OF INDIVIDUALIZATION

PEOPLE HAVE DIFFERENT GENETIC LEVELS OF FITNESS. THEREFORE, THEY WILL REACT TO THE EXERCISE IN A PARTICULAR WAY. IN ADDITION, EVERYDAY HABITS WILL INFLUENCE THOSE LEVELS, DECREASING THEM O INCREASING THEM.
EACH PERSON SHOULD MAKE AN ASSESSMENT OF THEIR FITNESS BEFORE STARTING A TRAINING PROGRAM . BESIDES, IT SHOULD BE ADAPTED IN ORDER TO NOT FLOLLOW THE TRAINING OF OTHERS.

PRINCIPLE OF EFFECTIVE LOAD STIMULATION

THE WORK OUT MUST HAVE A MINIMUM DURATION AND INTENSITY IN ORDER TO CAUSE AN ADAPTATION IN THE HUMAN BODY.
BEWARE: EXERCISES TOO MILD OR TOO STRONG NOT ONLY DO NOT CAUSE ADAPTATIONS BUT ALSO CAN LEAD TO INJURES OR A SENSE OF WASTE OF TIME.

THE ADAPTATION CAN BE:

- **FAST:** INITIAL REACTION TO THE EXERCISE SUCH AS THE INCREASE OF THE HR OR THE BF.
- **SLOW:** STABLE CHANGES IN THE ORGANISM: LOWER HR, MUSCLE HYPERTROPHY ...

THE IDEAL EFFORTS FOR HEALTHY LEVELS SHOULD BE BETWEEN:

120-180 BPM

60 MINUTES DAILY

40 MIN 4 DAYS PER WEEK (MINIMUM)

PRINCIPLE OF CONTINUITY

ALL TRAINING SHOULD BE REPEATED A CERTAIN NUMBER OF TIMES TO PRODUCE DURABLE EFFECTS ON THE ORGANISM IF WE WANT TO INCREASE OUR PERFORMANCE OR HEALTH.

WE SHOULD TRAIN **PER WEEK...**

60 minutes daily
3-4 sessions from 30' to 1 hour each

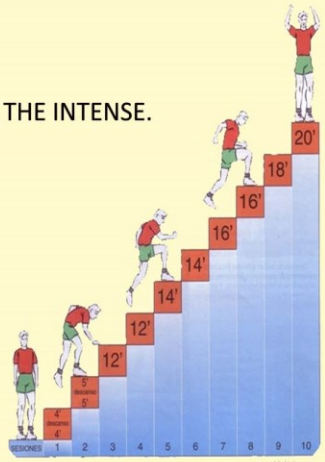
4 sessions of 1 hour to increase the level

PRINCIPLE OF PROGRESSION

YOU MUST START GRADUALLY FROM THE EASY TO THE DIFFICULT, FROM THE SMOOTH SOFT TO THE INTENSE. THERE ARE TWO IMPORTANT VARIABLES:

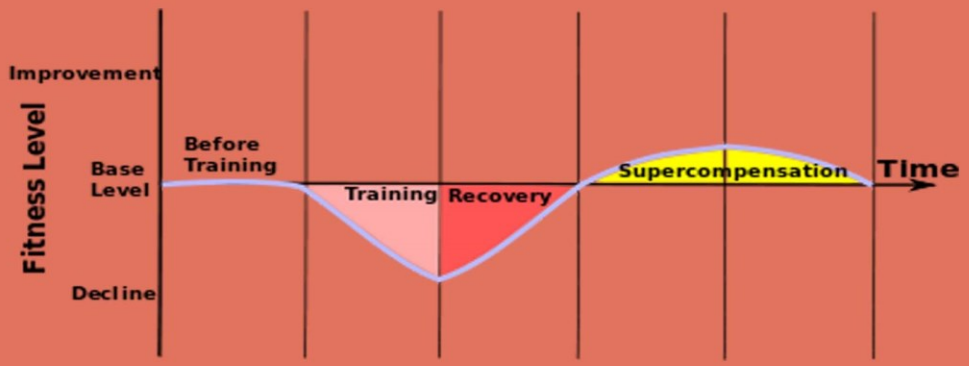
VOLUME (AMOUNT OF WORK**).**
IT IS NORMALLY MEASURED IN REPETITIONS, SERIES OR TIME. IT IS S THE FIRST ITEM YOU SHOULD INCREASE. IT CAUSES LONG-TERM ADAPTATIONS THAT REMAIN FOR A LONG TIME.

INTENSITY WHEN WE HAVE RAISED THE VOLUME, THEN WE INCREASE THE INTENSITY.
HOW? BY DECREASING THE REST OR INCREASING THE SPEED OR THE LOAD KILOS.
IT PRODUCES SHORT-TERM ADAPTATIONS THAT ARE LOST QUICKLY IF WE NOT KEEP TRAINING.



PRINCIPLE OF ALTERNATION

A WORK LOAD MUST BE FOLLOWED BY A RESTING LOAD DEPENDING ON THE TYPE OF EFFORT THAT I AM DOING. WE MUST RECOVER BETWEEN EXERCISES, SERIES AND SESSIONS. THIS IS PERFECTLY REFLECTED IN THE NEXT GRAPH.



WORK LOADS AND THEIR APPROXIMATE RECOVERY IN HEALTHY BPA's

FLEXIBILITY
IT DOES NOT NEED RECOVERY DUE TO EXERCISES DO NOT CAUSE FATIGUE.

AEROBIC STAMINA
- LOW LOADS: 24 H.
- MEDIUM LOADS: 48 H.
- HIGH AND VERY HIGH LOADS: 100 H.

ENDURANCE STRENGTH
- MEDIUM LOADS: 24 H.
- HIGH: 72 H.

PRINCIPLE OF TRANSFER

THE WORK OF BPA's SHOULD BE DONE IN THE RIGHT ORDER FOR HELPING ONE ANOTHER.

POSITIVE TRANSFERS

- STRENGTH HELPS TO IMPROVE SPEED.
- FLEXIBILITY HELPS TO IMPROVE SPEED.

NEGATIVE TRANSFERS

- SPEED AND STAMINA ARE MUTUALLY UNFAVORABLE.
- STRENGTH AND FLEXIBILITY ARE MUTUALLY UNFAVORABLE.

UNIT 3 TRAINING SYSTEMS

STAMINA TRAINING SYSTEMS

REMEMBER

There are 3 basic systems

- CONTINUOS SYSTEMS
- FRACTIONAL SYSTEMS
- MIXED SYSTEMS

CONTINUOS SYSTEMS (NON-STOP)

Steady Running

Running gently and steady for a while.

50 75%

Fartlek

We do changes of pace faster or slower fron time to time.

60 85%

Total Training

Combination of running and other types of exercises.

60 85%

FRACTIONAL SYSTEMS (STOPS)

Interval Training

Over 10 repetitions of 10 to 30 seconds reaching 180 bpm including an incomplete recovery at 120 ppm.

75 85%

Repetitions

Certain number of repetitions at 85% 100% of MHR. The recovery is complete (beats of resting).

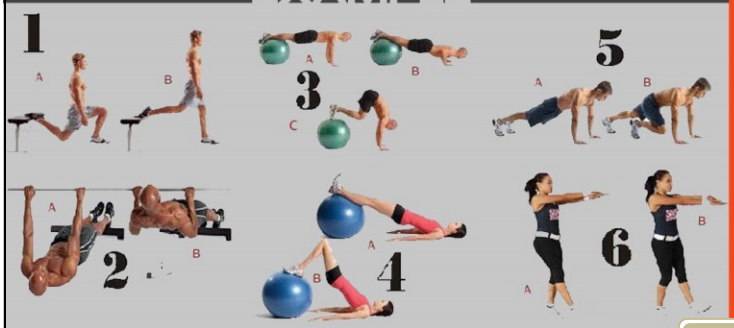
85 100%

MIXED SYSTEMS (Two or more BPA's)

Circuit Training

It consists of some stations where we do a particular exercise and then, we pass to another having resting the same amount of time that we have worked out.

EXAMPLE



Slopes

Running uphill (to improve the power) or downhill (to improve speed).

HEALTHY STAMINA ROUTINE

FEATURES

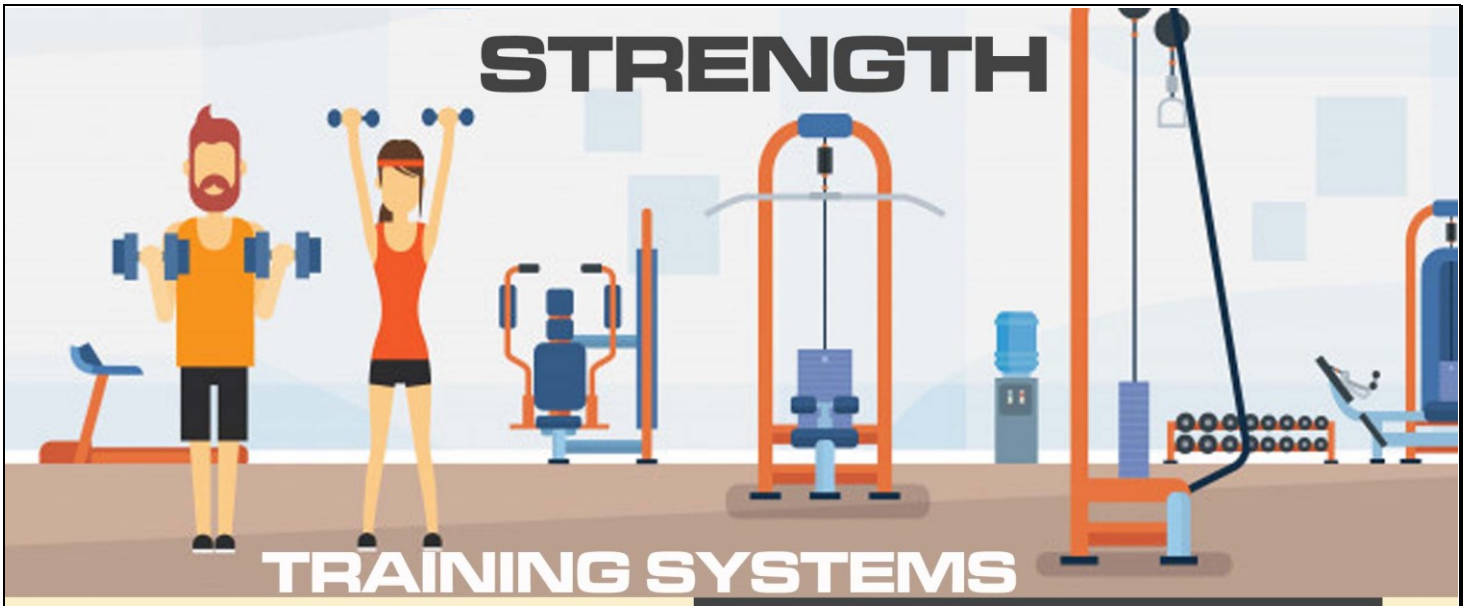
Aerobic stamina.
Between 60-80% of the MHR (120-180 bpm).
3-4 days a week, fron 30 minutes to 1 hour.
If you want to improve more and better, 250 or 300 minutes per week.
Costumize your training session and do it gradually.
At the beginning, Let a resting day between work out sessions.

EXAMPLE

Day 1 2x8' of S.R.	Day 2 2x12' of S.R.	Day 3 20' of S.R.	Day 4 Circuit Training 2x8 ex. 30"-30"	Day 5 25' of S.R.
Day 6 Circuit Training 3x8 ex. 30"-30"	Day 7 30' of S.R.	Day 8 25' Fartlek	Day 9 Total Training	Day 10 30' Fartlek
Day 11 Total training	Day 12 35' Fartlek	Day 13 HIIT	Day 14 Circuit Training 3x8 ex. 30"-20"	Day 15 HIIT

WEEKLY PLANNING

MONDAY	WEDNESDAY	FRIDAY
2x8 min of S.R. Flexibility (5') CORE (strength postural muscles). 5'	2x12 min of S.R. Flexibility (5') CORE (5')	20 min of S.R. Flexibility (5') CORE (5')
MONDAY	**WEDNESDAY**	**FRIDAY**
10 min S.R Flexibility: 5' Circuit Training: 2x8 ex 30"-30" and 3'	25 min of S.R. Flexibility (5') CORE (5')	10 min S.R Flexibility: 5' Circuit Training: 3x8 30"-30" and 3'



STRENGTH

TRAINING SYSTEMS

Healthy strength routines should be based on **STRENGTH ENDURANCE**

FEATURES

Work out between 60-80% of the MHR.

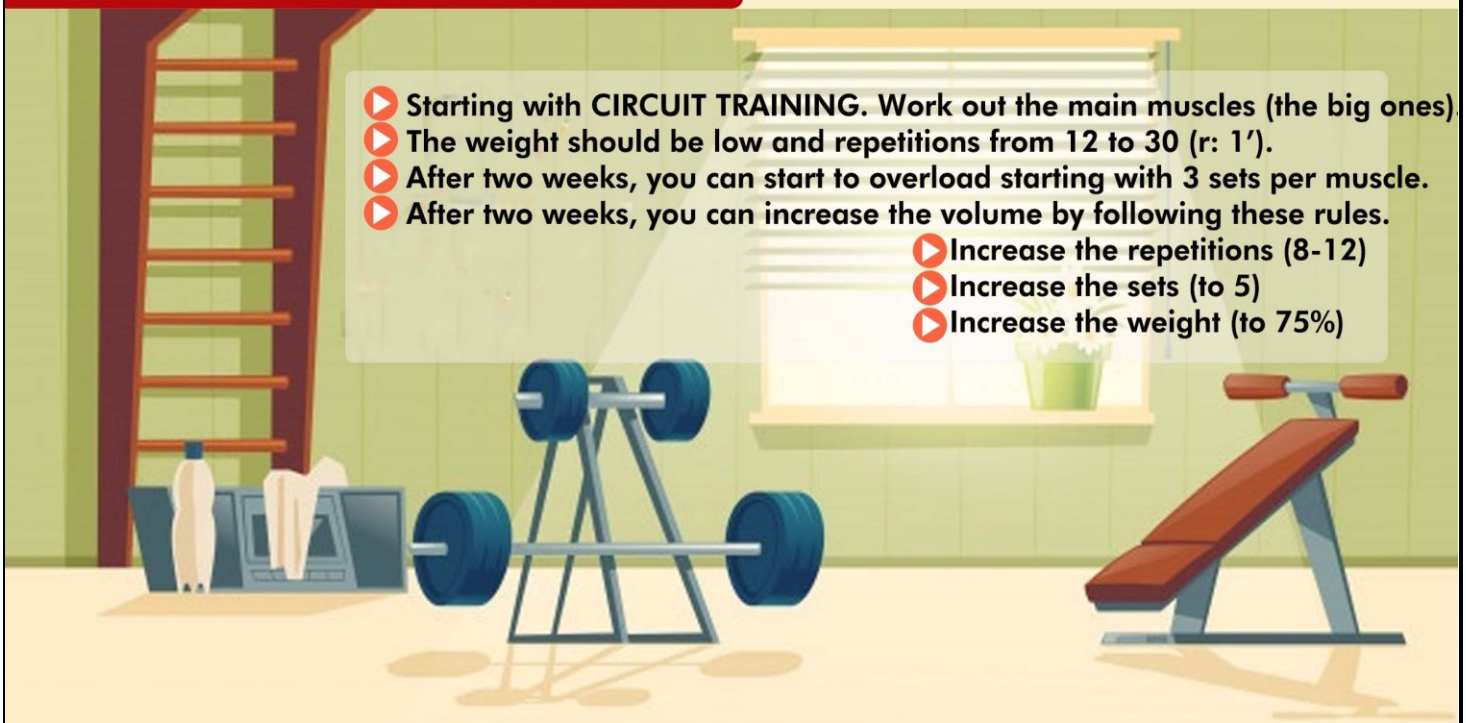
Ideally, between 120-180bpm.

Perform a general physical fitness working all the components of the BPA's.

After 2-3 weeks, go to strength endurance training through circuits, TRX and HIIT.

Combine it with stamina and flexibility work.

PROGRESSION



- **Starting with CIRCUIT TRAINING. Work out the main muscles (the big ones).**
- **The weight should be low and repetitions from 12 to 30 (r: 1').**
- **After two weeks, you can start to overload starting with 3 sets per muscle.**
- **After two weeks, you can increase the volume by following these rules.**
  - **Increase the repetitions (8-12)**
  - **Increase the sets (to 5)**
  - **Increase the weight (to 75%)**

- **Do not work out maximum strength until you are 18 in order to avoid injuries.**
- **Work out with mild weights and feeling your breathing accelerated.**
- **Lift almost-axhausting loads. The last repetition's speed must be slower than the rest.**

FLEXIBILITY
TRAINING SYSTEMS

HOW TO WORK IT OUT

- Exercises will be as varied as possible.
- Flexibility should be exercised every day during warm ups, in exclusive sessions and at the end of each session.
- Being a low intense activity, there will be no recovery pauses.
- The exercises will be mantained 20 seconds (at least). Try to avoid hiperextensions and wide rotations.
- If we feel severe pain, leave the exercise immediately.
- Combine flexibility and strength exercises for a more harmonious development.

MAIN DEVELOPMENT SYSTEMS

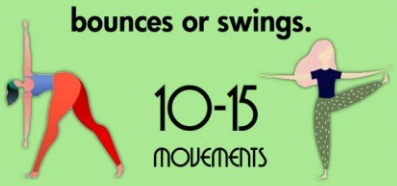
ACTIVES

are those where you are the one who performs the action.

They are divided into:

DYNAMIC METHOD

There is movement such as bounces or swings.



10-15 MOVEMENTS

STATIC METHOD

There is no movement at all.

3-5 EXERCISES AND/OR REPETITIONS PER MUSCLE GROUP

PASSIVES

are those where the movement is produced by an external force (usually, another person).

They are divided into:

DYNAMIC METHOD

I am moved by an external force and there is movement.

STATIC METHOD

I am moved by an external force but there is NO movement.

NPF

NEUROMUSCULAR PROPIOCEPTIVE FACILITATION

Where you first stretch gently, (10 seconds) then you contract the muscle (10 seconds) to relax and stretch again a little harder and longer (20-30 seconds).

- **If you are very rigid, do not start with dynamics methods.**
- **If you are very relaxed (too flexible), work out dynamics methods and F.N.P.**
- **Try them all. However, statics methods are more recommended.**
- **To improve muscular elasticity, statics methods and F.N.P. are the best.**

RECOMENDATIONS TO AVOID SOME PROBLEMS

Head

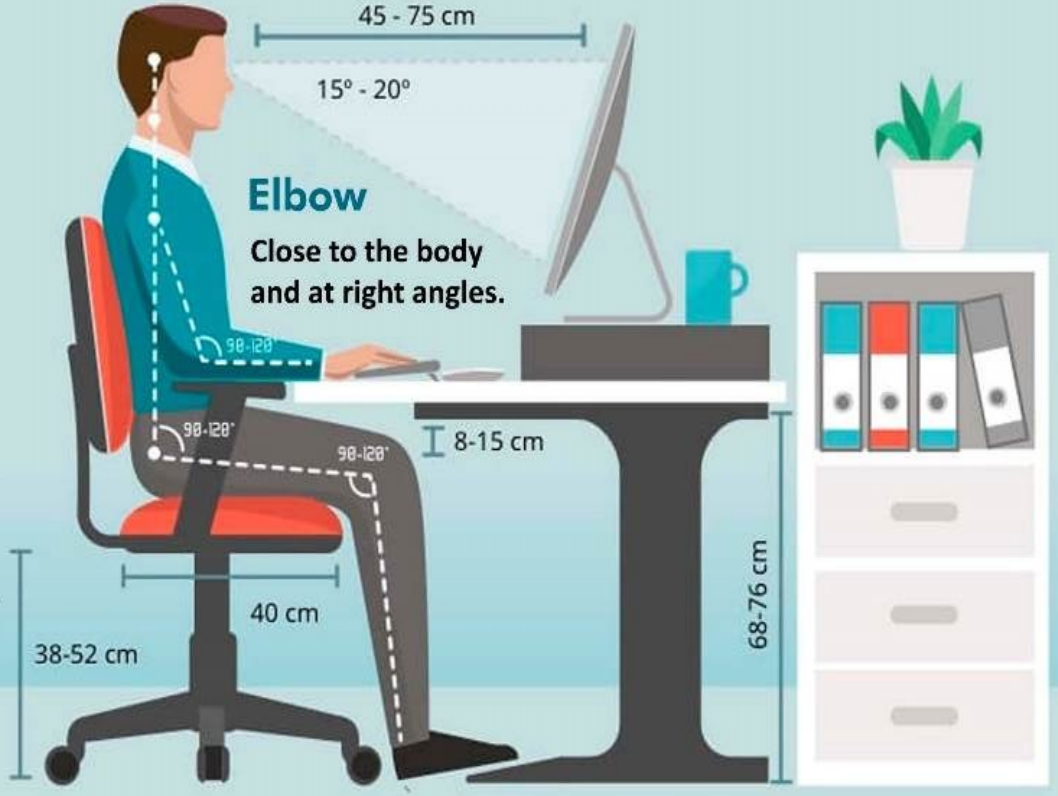
Keep your head and neck straight, your head back and your chin tucked in.

Shoulders

Shoulders should be relaxed and aligned.

Back

Straight and close to the chair. Use an adjustable chair with lumbar support.



Elbow

Close to the body and at right angles.

Eyes

Separation of 45 to 75 cm from the screen and 1/3 from the top of the monitor.

Mouse and keyboard

At the same height as the elbows and wrists, slightly bent.

Feet

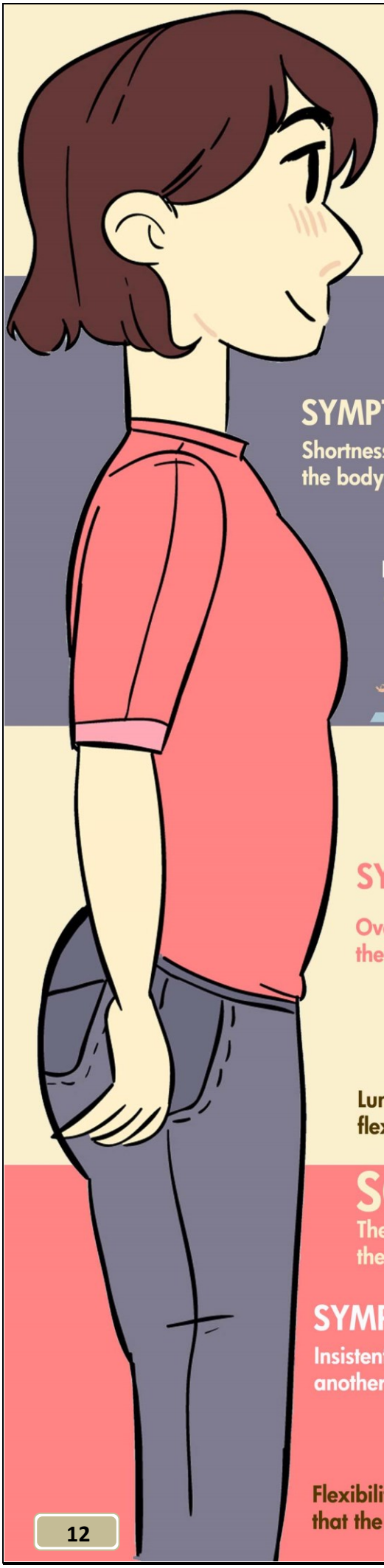
En un reposapiés con inclinación ajustable y superficie antideslizante.

11

COMPENSATION EXERCISES







Imagine that you look at yourself in a mirror.
The correct order to detect good and bad postures and alterations is:

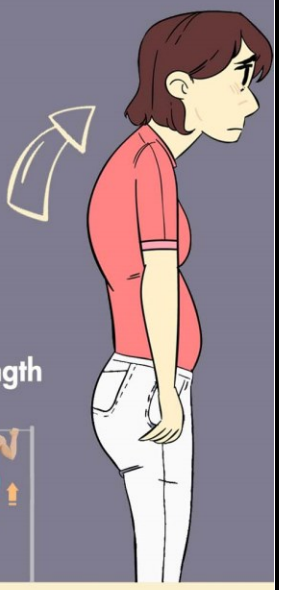
- Awareness of the position (Observe the body and identify the alteration).
- Check with your doctor.
- Special exercises of flexibility and strength in the affected area.

SPINE

IF WE START OBSERVING IN DESCENDING ORDER (FROM TOP TO TOE), WE HAVE

KYPHOSIS

It is the 'hump'. It appears in some people and is common in the elderly.



SYMPTOMS

Shortness of breath and limited flexibility from the rear of the body, suffering from back pain and back spasms.

TREATMENT

Breathing exercises.

Dorsal y lumbar strength.

Shoulder strength and bar

HYPERLORDOSIS

The lumbar spine goes forward. It is also called 'chicken butt'. It is very common in gymnasts and dancers.

SYMPTOMS

Overloads in the lumbar area. In daily activities and exercise, they can suffer low back pain and sciatica.

TREATMENT

Lumbar flexibility.

Abs strength with no legs movement.

SCOLIOSIS

The spine is diverted to the side side. In most cases, the cause is unknown.

SYMPTOMS

Insistent nuisance on one side of the back rather than in another. It may appear a small hump to the side that spine goes.

TREATMENT

Flexibility to the side that the spine is diverted.

Strength with the opposite side.

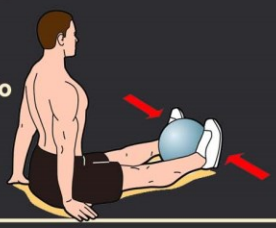
KNEE

GENU VARUM

There usually is a separation between the knees of 4 fingers. Typical walk of bowed legs.

SYMPTOMS Tendency to sprains in the ankle due to overloads on the calves.

TREATMENT Adductor strength.



GENU VALGUM

Knees in 'X' position.

SYMPTOMS

Pain on the inner side of the knee.
Risk of sprains knee are higher.

TREATMENT Adductor flexibility and gluteus strength (sometimes).

GENU RECURVATUM

When knee goes backwards due to laxity joint.

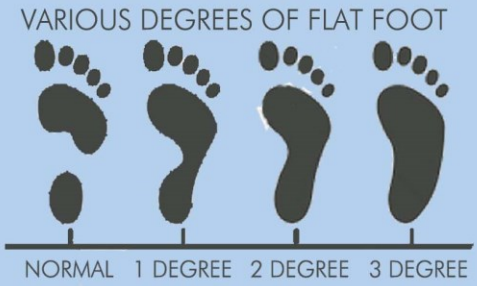
SYMPTOMS At exercising, you can feel overloads on the quads and hamstring cramps may occur.

TREATMENT Hamstring strength.
Quadriceps flexibility.

FOOT

FLAT FOOT

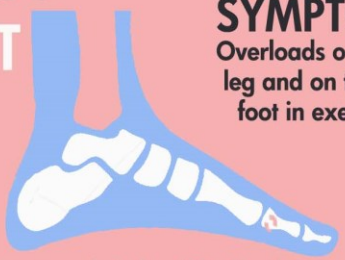
Plant bow is nonexistent.



SYMPTOMS
Pain occurs in fast runs and jumps.

TREATMENT
ORTHOPEDIC: Special insoles.
SURGICAL: Operation to give shape to the foot.

CAVUS FOOT



SYMPTOMS
Overloads occur on the outside of the leg and on the ground and instep of the foot in exercise.

TREATMENT
ORTHOPEDIC: Special insoles.
SURGICAL: Operation to give shape to the foot.

Plant bow is too high. Only the anterior and posterior part of the foot rest.

CLUBFOOT

The foot rests entirely with the external area.

SYMPTOMS
Deformation joint and risk of sprains and full and partial tear of ligaments.

TREATMENT
PHYSIOTHERAPY: Only in infants and in the first months of life.

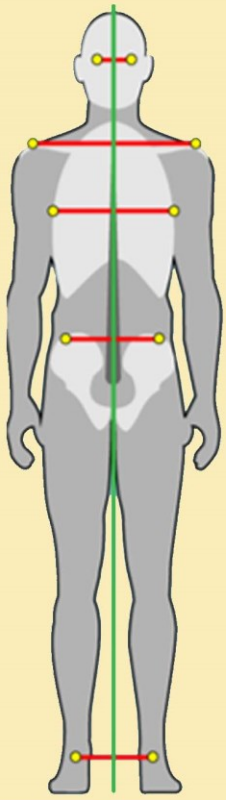
GYPSUM

STATIC POSTURAL ASSESSMENT

Last year, you studied the main spine, knee and foott alterations, which they were:

SPINE	KNEE	FOOT
Kyphosis	Genu varum	Clubfoot
Hyperlordosis	Genu recurvatum	Cavus Foot
Scoliosis	Genu valgum	Flat Foot

Now, we will study the body of our classmates in order to identify some of these alterations. GO FOR IT!



STATIC POSTURAL ASSESSMENT (SIMPLIFIED)

HEAD			SHOULDERS		
GOES AHEAD (ANTEPULSION)	YES	NO	INTERNAL ROTATION	YES	NO
GOES BACK (RETROPULSION)	YES	NO	EXTERNAL ROTATION	YES	NO
INCLINATION (ONE SIDE)	YES	NO	LINE UP	YES	NO
SPINE			**RECOMMENDATIONS AND TREATMENT**		
KYPHOSIS	YES	NO			
HYPERLORDOSIS	YES	NO			
SCOLIOSIS	YES	NO			

HEAD

Antepulsion: Head goes ahead regarding the spine line.
Retropulsion: Head goes back regarding the spine line.

HIP			KNEES		
EIAS INCLINED	YES	NO	GENU VARUM	YES	NO
EIPS INCLINED	YES	NO	GENU VALGUM	YES	NO
ANTE o RETROPULSION	YES	NO	G. RECURVATUM	YES	NO
FEET			**RECOMMENDATIONS AND TREATMENT**		
SUPINATION	YES	NO			
PRONATION	YES	NO			
VALGUM O VARUM	YES	NO			

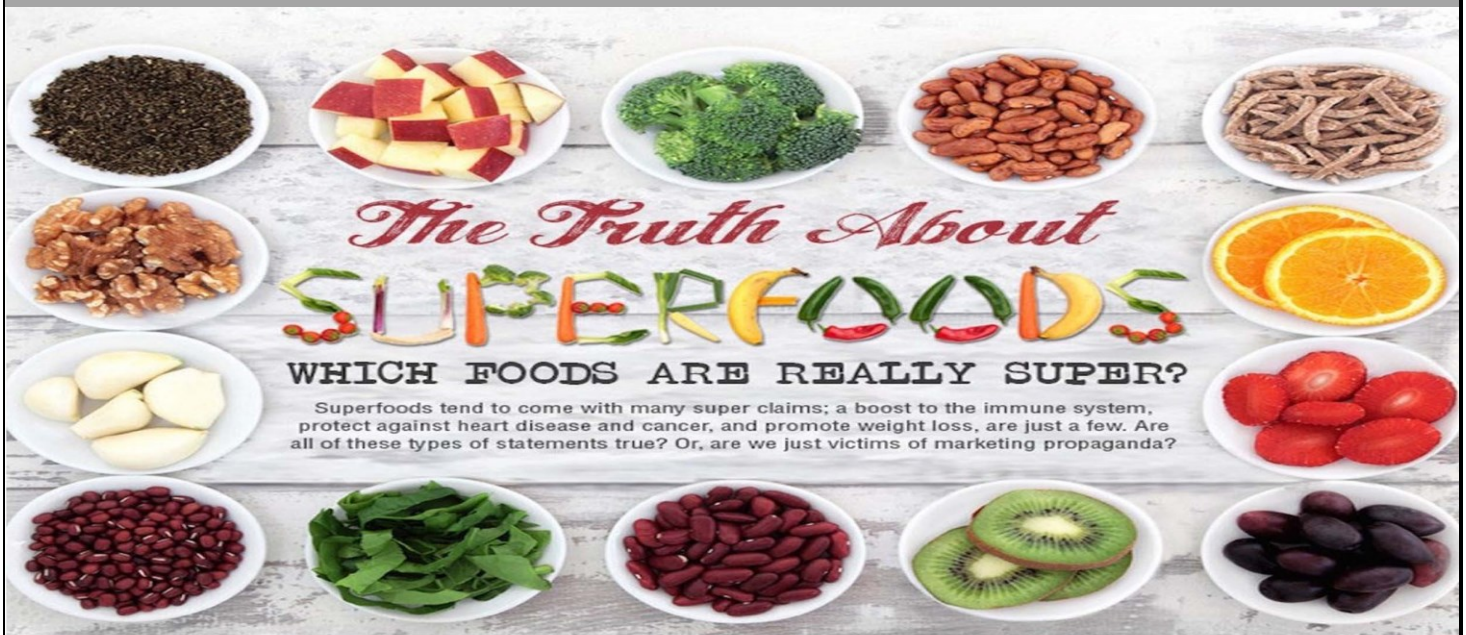
HIP

ASIS: Anterior Superior Iliac Spine (Espina Ilíaca Antero Superior).
PSIS: Posterior Superior Iliac Spine (Espina ilíaca Postero Superior).
Mark with both tuhmbs the two spines at the same time to check inclination.

KNEES

Genu varum: Check if you can put four finger between the knees.
Genu valgo: Check if you can put four fingers between feet.

UNIT 5. Food and Body Image



The Truth About SUPERFOODS

WHICH FOODS ARE REALLY SUPER?

Superfoods tend to come with many super claims; a boost to the immune system, protect against heart disease and cancer, and promote weight loss, are just a few. Are all of these types of statements true? Or, are we just victims of marketing propaganda?

Superfood Myths Busted

Goji Berries

The Claim

Goji berries have been a traditional part of Chinese medicine for centuries. Available in dried fruit or juice form, these shrivelled, red berries are alleged to boost the immune system and brain activity, protect against heart disease and cancer and improve life expectancy.

The Reality

The BDA argues that you would need to drink 13 servings of goji berry juice to get as many antioxidants as you'd find in one red apple.

The Claim

The South American supergrain contains up to 18 per cent more protein than any other grain, and amino acids to build muscle and body tissue. Naturally gluten-free, it's low GI.

The Reality

Despite the protein, quinoa contains potentially gut-irritating saponins and lectins. Some report gas and bloating after eating it, which might be because of its very high fibre content.

Quinoa

Coconut Water

The Claim

Coconut water has become one of the fastest-growing soft drinks in Europe. It is said to be high in potassium and magnesium. These minerals are depleted after exercise, so coconut water is often sold as a post-workout drink.

The Reality

While coconut water is relatively low in calories (around 20kcal per 100ml), most of these come from naturally occurring sugar. One 330ml serving contains three teaspoons of sugar, half your recommended daily allowance.

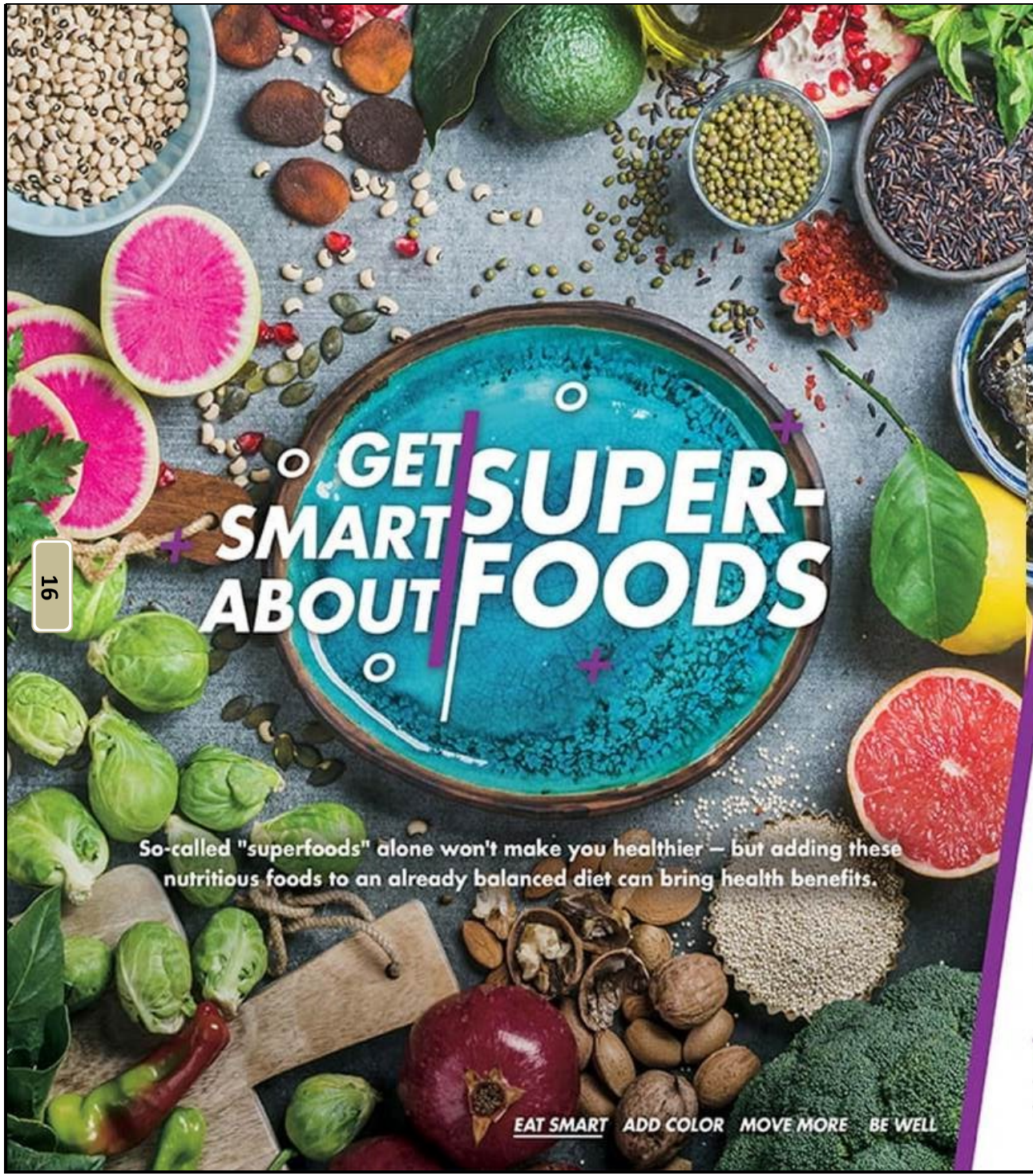
The Claim

With double the antioxidants of blueberries, along with protein, fibre, essential fats, vitamins and minerals, they are also touted as a weight-loss aid.

The Reality

The supposed weight-loss effect is unproven, and few scientific studies have tested the benefit of acai in promoting weight loss.

Acai Berry



SUPERFOODS are only marketing. They are not more healthier than the regular ones, so do not let be cheated by advertising and do not spend money unneceserally.

However, these foods are not bad. As the rest of it, have some benefits for health.

Beans & Legumes

- Economical, plant-based source of protein
- Provide fiber, magnesium and phytonutrients

Berries

- High level of flavonoids
- Can lower risk of heart attack in women

Dark Leafy Greens

- Packed with nutrients, fiber and antioxidants
- Low in calories and carbohydrates

Nuts & Seeds

- Provide protein, fiber and unsaturated fats
- Best options are unsalted

Oats

- Whole-grain source of dietary fiber
- Can lower risk of heart disease, stroke and diabetes

Pumpkin

- Provides fiber, potassium and vitamin A
- Canned is a convenient, nutrient-loaded choice

Salmon

- Healthy protein
- Provides Omega-3 Fatty Acids

Skinless Poultry

- Usually leaner than beef
- Tastes great grilled, roasted or baked

Yogurt

- Provides calcium, protein & vitamin D
- Best options are low-fat or fat-free

Menstruation and Diet

PHASE 4

PREMENSTRUAL PHASE

HORMONES.
High levels of progesterone.

TRAINING
Avoid stress and exhaustion. Light cardio, pilates, yoga...

DIET
COMPLEX CH: whole grains, (bread, pasta, rice), fruits, legumes...
HEALTHY FATS: AOVE, blue fish, nuts and seeds....
POTASIUM: fruits (banana), tubers (potato, sweet potato) and vegetables (espinachs, carrots, garlic, beens)...
SALT: avoid it because of fluid retention. There is plenty in sausage and processed ultraprocessed food.

SWEETS: The desire to eat sweets (chocolate, ice cream...) increases more by effect of calming anxiety, not because the body needs them.

PHASE 1

MENSTRUATION

HORMONES.
Estrogen and progesterone levels drop.

TRAINING
Gentle flexibility exercises. From third day, we can increase the intensity with light cardio and strength endurance.

DIET
IRON: red meats, seafood, eggs, legumes and green leafy vegetables...
VITAMIN C: fruits and vegetables...
MAGNESIUM: whole grains, nuts...
OMEGA 3: fish, nuts...

PHASE 3

OVULATION

HORMONES. (ALL ARE INCREASED, ESPECIALLY ESTROGENS).
Only time where testosterone is produced in quantity.

TRAINING
Maximum strength*. Where more muscle is gained.

DIET
Decrease CH and **choose healthy fats:** AOVE, fish, seeds and nuts.

*Risk of injuries is increased for relaxin.

PHASE 2

FOLLICULAR PHASE

HORMONES.
Estrogen is increased

TRAINING
Intense exercises increasing training load and intensity in all BPA's.

DIET
COMPLEX CH: whole grains (bread, pasta, rice), potato, fruits..
MAGNESIUM: legumes, nuts...

BODY IMAGE

Your body image is the way you **think** and **feel** about your body. It can be **positive** or **negative**.

Most young women and girls are worried about their body – in fact it's their number one concern.

Of Australian high school girls:

76% wish they were thinner

50% have tried to lose weight

16% are happy with their body weight

Poor body image can be associated with depression, anxiety, alcohol and other drug abuse and eating disorders.

Some warning signs that you or someone you know might have body image issues:

- Distorted eating habits
- Obsession with weight and exercise
- Being continually self-critical
- Constantly comparing body size

Guys have body image issues too. One third of males want to be thinner and one third want to be bulkier.

More than **1 in 5** young men say body image is their number one concern

Tips for better body image:

- Focus on yourself as a person, not just how you look
- Aim to get healthier rather than lose weight
- Focus on the things you like about your body
- Stop being critical about others' appearance
- Remember, real bodies aren't perfect, and perfect bodies are almost always airbrushed.

UNIT 6. Prevention and First Aid

WAYS TO AVOID SPORTS INJURIES

Stay hydrated

Eat a well-balanced diet

Wear appropriate activewear, including shoes, helmets, etc.

Build up your exercise level gradually and know your body's limits

Strive for a total body workout of cardiovascular, strength-training and flexibility exercises

Be sure to follow an appropriate warm-up and cool-down regimen, including flexibility exercises

Learn to do your sport right. Use proper form to reduce your risk of injuries

Report and injury immediately so it can be properly treated

COMMON INJURIES IN YOUR SPORT

BASKETBALL
- Ankle sprains
- Knee injuries

GYMNASTICS
- Achilles tendinitis
- ACL sprains
- Shoulder injuries
- Wrist sprains

FOOTBALL
- Ankle sprains
- Concussions
- Knee injuries
- Shoulder injuries

BASEBALL AND SOFTBALL
- Pitcher's elbow
- Rotator cuff injuries
- Hamstring strain

LACROSSE
- Ankle sprains
- Knee sprains
- Muscle strains in hamstrings, groin and quadriceps
- Shin splints

RUNNING
- Ankle sprains
- Runner's knee
- Shin splints

SOCCER
- Achilles tendinitis
- Knee sprains
- Concussions
- Muscle strains in hamstrings and groin

SWIMMING
- Rotator cuff injuries
- Biceps tendinitis
- Knee sprain or strain

VOLLEYBALL
- Ankle sprains
- Finger fractures, dislocations, sprains and strains
- Patellar tendinitis
- Rotator cuff tendinitis

TENNIS
- Rotator cuff injuries
- Elbow tendinitis
- Calf strains

The PEACE and LOVE approach to injury recovery

Recently, the acronym for injury management has evolved significantly. The PEACE and LOVE approach covers the gaps left by previous approaches and outlines how to optimize your recovery immediately after injury, as well as how you can manage your injury in the long term.

If you continue to experience discomfort after your injury, speak to a health professional.

Following an injury, allow 1-3 days of PEACE

P 

Protection
Protect your injury by avoiding movements that cause a prolonged increase in pain.

E 

Elevation
Elevate the injured area higher than your heart to help reduce swelling.

A 

Avoid anti-inflammatories (including ice)
Although ice is effective at decreasing pain, anti-inflammatories can disrupt the tissue healing process in the early stages.

C 

Compression
Compress the area with an elastic bandage to help control swelling.

E 

Education
Seek out education and resources from a professional regarding how to approach recovery.

Beyond the first 3 days, your tissues need LOVE

L 

Load
Early movement promotes healing and is encouraged. Experiencing some pain is ok as long as your pain subsides after activity. Return to normal activity as soon as you can.

O 

Optimism
Stay positive! Studies have shown that having confidence and optimism will condition your brain for a better recovery.

V 

Vascularization (blood flow)
Start to engage in light, pain-free aerobic exercise such as walking or biking. Exercise increases blood flow which will help promote tissue healing.

E 

Exercise
Taking an active approach to recovery will help restore mobility and strength in the injured area. Be sure to pay close attention to your pain levels.

THE ULTIMATE CPR GUIDE

EVERYTHING YOU NEED TO KNOW FOR ADULT, CHILD, INFANT CPR

5 STEPS TO PERFORMING CPR

1 ASSESS SCENE SAFETY

Check the area for any safety hazards that may be harmful to you

2 CHECK FOR RESPONSIVENESS

ARE YOU OKAY?

Tap the victim's shoulder and shout, "Are you OK?"

3 LOOK FOR NORMAL BREATHING

Look for normal chest rise and fall

4 CALL 1-1-2

- If no response, call 9-1-1 or send someone else to do so
- Make sure the victim is lying on a firm and flat surface facing upwards

5 START CPR

If not breathing and unresponsive

ADULT

STEPS FOR HOW TO PERFORM ADULT CPR (8 YRS+)

1 GIVE 30 CHEST COMPRESSIONS

- PUSH HARD
- PUSH FAST

DEPTH: 2in-2.4in
RATE: 100-120X MIN

30X

2 GIVE 2 RESCUE BREATHS

2X

- HEAD TILT CHIN LIFT
- PINCH NOSE
- GIVE 2 BREATHS

Mouth to mouth is optional, but highly recommended for Child and Infant CPR

STEPS FOR HOW TO PERFORM HANDS-ONLY CPR

1 GIVE CHEST COMPRESSIONS

- PUSH HARD
- PUSH FAST

DEPTH: 2in-2.4in
RATE: 100-120X MIN

30X

STEPS FOR HOW TO HELP A CONSCIOUS CHOKING ADULT

1 GIVE CONTINUOUS ABDOMINAL THRUSTS

- Place a fist with the thumb side against the middle of the adult's abdomen, just above the navel
- Cover your first with your other hand

2 CONTINUE ABDOMINAL THRUSTS UNTIL:

- The object is forced out
- The adult/child can cough forcefully or breathe
- The adult/child becomes unconscious. Call 9-1-1 if not done already

If victim becomes unconscious, perform CPR. Start 30 to 2

CHILD

STEPS FOR HOW TO PERFORM CHILD CPR (1YR - 8 YRS)

1 GIVE 30 CHEST COMPRESSIONS

Use 1 or 2 hands depending on the size of the child

- PUSH HARD
- PUSH FAST

DEPTH: 2in
RATE: 100-120X MIN

2 GIVE 2 RESCUE BREATHS

- HEAD TILT CHIN LIFT
- PINCH NOSE
- GIVE 2 BREATHS

2X

STEPS FOR HOW TO HELP A CONSCIOUS CHOKING CHILD

1 GIVE CONTINUOUS ABDOMINAL THRUSTS

- Place a fist with the thumb side against the middle of the child's abdomen, just above the navel
- Cover your first with your other hand

2 CONTINUE ABDOMINAL THRUSTS UNTIL:

- The object is forced out
- The adult/child can cough forcefully or breathe
- The adult/child becomes unconscious. Call 9-1-1 if not done already

If child becomes unconscious, perform CPR. Start 30 to 2

INFANT

STEPS FOR HOW TO PERFORM INFANT CPR (0 - 1YR)

1 GIVE 30 CHEST COMPRESSIONS

- Use 2 fingers
- Push hard, push fast

DEPTH: 1.5in
RATE: 100-120X MIN

30X

2 GIVE 2 RESCUE BREATHS

Make sure the head is tilted back and the chin is lifted into a neutral, or sniffing, position

- Cover the infant's mouth and nose with your mouth to form a complete seal
- You should see the infant's chest rise with each breath

2X

A BABY'S LUNGS ARE MUCH SMALLER THAN AN ADULT'S, SO IT TAKES MUCH LESS THAN A FULL BREATH TO FILL THEM

STEPS FOR HOW TO HELP A CONSCIOUS CHOKING INFANT

1 GIVE 5 BACK BLOWS

Place the infant in one hand with their face facing down

5X BACK SLAPS

2 GIVE 5 CHEST THRUSTS

1.5in
5X

BE SURE TO SUPPORT THE INFANT'S HEAD AND NECK WITH ONE HAND AND ARM, AND KEEP THE HEAD LOWER THAN THE CHEST

*** CONTINUE SETS OF 5 BACK BLOWS AND 5 CHEST THRUSTS UNTIL:**

- The object is forced out
- The infant can cough, cry or breathe
- The infant becomes unconscious. Call 9-1-1, if not done already

If infant becomes unconscious, perform CPR. Start 30 to 2

* CONTINUE COMPRESSION OR 30 COMPRESSIONS AND 2 BREATHS UNTIL:

- The victim begins to breathe
- An AED is ready to use
- A trained rescuer arrives
- You are too exhausted to continue

How To Use An AED (Automated External Defibrillators)

An AED may resuscitate anyone in cardiac arrest. An AED can do this by delivering chocks to the heart to restores noraml rhythm.

An AED will not shock without detecting an abnormal rhythm.

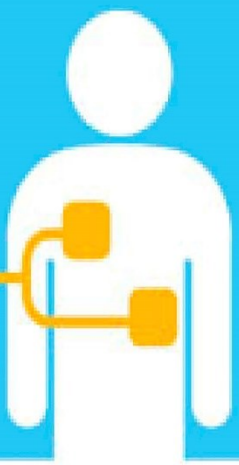
1 Check the response.
Shake the shoulders.
Ask them "Are you ok?"

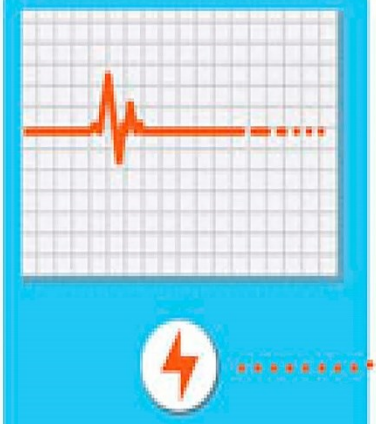
2 Call 112 immediatly

3 Locate the AED.
Look for the sign below.
Take the AED to the victim.

4 Turn on the device.
Follow the audio prompts.

5 Expose the chest.
Place the pads on the upper right chest and lower left chest.





6 The AED will check the heart rhythm.
The AED will tell you if shock is advised.

7 If AED says "shock advised", DELIVER SHOCK.

8 Start PCR.

9 Continue PCR until an ambulance arrives.

6000 In the U.S. -6000 children 18 years and younger died of sudden death.

5 MIN An AED is most effective if used within 5 minutes after collapse.

Learn more

Save more

What are the warning signs of a Stroke?

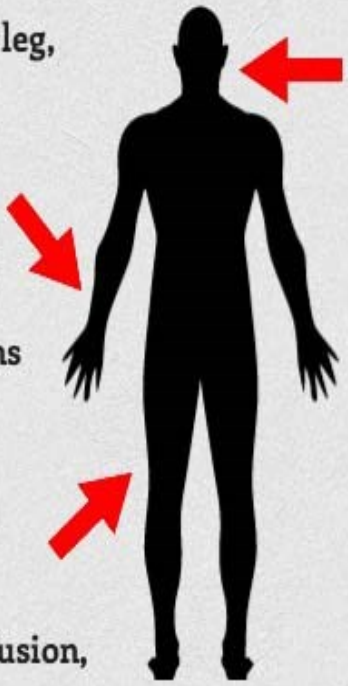
Weakness
Sudden loss of strength or sudden numbness in face, arm, or leg, even if temporary

Headache
Severe and unusual headache

Dizziness
Sudden loss of balance, especially with any of the above signs

Vision problems
Sudden trouble with vision, even if temporary

Trouble speaking
Sudden difficulty speaking or understanding or sudden confusion, even if temporary



If you are having these symptoms or are in doubt,

call 112

Do not drive yourself to the hospital.

When you arrive by ambulance, the hospital will be contacted and a team with a neurologist will be waiting, with the equipment ready to begin treatment immediately.

When it comes to treating a stroke,

time is brain

UNIT 7 DOPING

EFFECTS ON THE BODY

MIND & BODY

Did you know...

It is believed that many chariot racers in Ancient Rome fed their horses alcoholic substances to make them run faster and that gladiators took hallucinogens and stimulants such as strychnine (made from certain tree seeds) to stay alert and improve the intensity of their fights.

Artificial advantage

Seven-time Tour-de-France winner and Olympic medallist Lance Armstrong has admitted to using performance enhancing drugs throughout his career, and he alluded to the fact that drug use is fairly wide- spread in cycling. He has since been stripped of his titles.

Doping statistics

In July, 2012, the World Anti-Doping Agency (WADA) released statistics on the number of samples tested in each sport for every year between 2003 and 2010, as well as the number of tests that indicate the use of a prohibited substance.

Averaged across all eight years:

- The worst offender, in terms of results indicating prohibited substance use, was cycling at 3.71%
- Boxers had the second highest rate at 3.05%
- Badminton had the lowest rate of usage-indication findings per sample, at 0.87%
- The most tested athletes (total number of samples): Footballers (30,398) Athletics (25,013) Cycling (21,427) Aquatics (13,138)

Drugs used by athletes to:

Relax blood vessels or heart

- Alcohol
- Beta blockers
- Cannabinoids

Sports with potential benefit:

Archery, Diving, Mod. Pentathlon, Shooting

Beta blockers: *Weaken effects of stress on sympathetic nervous system*

Cannabinoids: *Pain relief properties*

Build mass and strength

- Anabolic steroids
- Human chorionic gonadotropin
- Luteinizing hormone
- Human growth hormone
- Insulin-like growth factor
- Insulin

Luteinizing hormone: *Increases testosterone production*

Sports with potential benefit:

Football, Soccer, Sprinting, Throwing, Weightlifting

Control weight

- Diuretics

Mask drug use

- Epitestosterone
- Plasma expanders
- Secretion inhibitors
- Diuretics

Epitestosterone: *Used to fool tests into picking up less testosterone*

Sports with potential benefit:

Athletics, Boxing, Equestrian, Judo, Rowing, Weightlifting

Enhance alertness

- Amphetamines
- Caffeine
- Cocaine

Sports with potential benefit:

Baseball, Basketball, Boxing, Cycling, Judo, Gymnastics

Amphetamines: *Effects include wakefulness, alertness, decreased sense of fatigue, mood elevation, increased self confidence — however they also distort reality and impair judgement*

Increase oxygen delivery in tissues

- Protein hormone
- Artificial oxygen carries
- Blood doping

Sports with potential benefit:

Helps muscles work better for longer

Cycling, Marathon, Mod. Pentathlon, Skiing, Swimming

Protein hormones: *Help reduce inflammation*

Masking pain or injury

- Protein hormones
- Narcotics
- Local anaesthetics

Sports with potential benefit:

Football, Cycling

UNIT 8 STEREOTYPES AND SPORT

The Evolution of Women's Sports

Key Moments in Women's Sports History

Female sport is the history of a fight. Throughout the centuries, women have had to fight their way against the prejudices and obstacles that a society placed on them that believed that they could not, or should not, play sports.

ANCIENT GREECE Greek women organize Hereos Games, in honor of Hera. They ran in three age categories with free hair, a robe up to the knee. They showed the right shoulder to the chest.

1900 Six women participate in these fair games in tennis and golf. There were a thousand men enrolled.

1908 Women can compete in archery, sailing and figure skating, although they were not awarded with medals.

1922 In response to that discrimination gender, a group of women athletes organize a Games Women's World Cups in 1922 and 1926. The meeting was gathering more and more participants, forcing the IOC to rectify and open the Olympic Games to female athletes.

1976 Nadia Comaneci stars a mythical olympic history moment: in Montreal 1976, she demonstrated the physical ability and technique that women could achieve by becoming the first gymnast getting a ten on a competition.

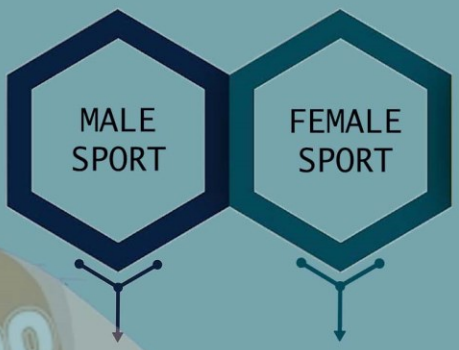
SPORT MASS MEDIA

PAY GAP

IN THE WORLD OF SHOW SPORTS, SALARIES DEPEND ON THE INCOME GENERATED BY EACH ATHLETE

UNDERSTANDING DATA

The pay gap also occurs between women's teams and/or players of the same team



Players of differente teams have differente salaries

Within the same team players don't get paid the same

To more fame and more presence in the media, the more eanings

Fame will also attract more sponsors (advertising)

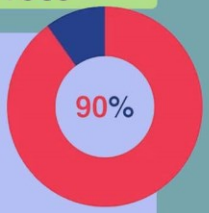
A sport will generate more money if it is more seen in that society than another that is not

Society perceives more attractive the masculine one

It is more profitable for the media because it is more seen

The media visualizes more time that sport or athlete

90% of the news and broadcasts sports emissions are from best-known male sports



UNIT 9 VOLLEYBALL

Volleyball Earls Court

men women

THE BEST OF 3 SETS (OR 5)

25 POINTS (WITH 2 POINTS LEFT)

Play: Points won for landing ball in opposing court. Each team has three touches before returning ball to opposition

Spike Attacking shot

Set ② Overhead pass

③

Dig ①

FREE ZONE

9m

Blocking: Players attempt to deflect opposition spike

Net height **2.24m** (women) **2.43m** (men)

Libero Defensive specialist

ATTACK ZONE

9m

Service Ball driven into opposing court from behind baseline

DEFENCE ZONE

SOME RULES

A team has 8 seconds to serve.

A player cannot touch the net in any way.

A player cannot touch the ball twice (or more) in a row.

A player can play the ball with any part of its body.

A ball can be played out of boundaries if it doesn't touch the ground.

Any player can touch the ball at any time.

The serve cannot be spiked or blocked. Besides, it is very difficult to do so.

The serve must pass to the opposing court straightaway.

In the serve and during the game, the ball can touch the net.

The ball cannot touch the ceiling, the pole (postes) or the rods (varillas).

When a team recovers the possesion of the ball, is has to do a clockwise rotation.

A match is played 6/6 (players).

Skills

There are 5 main skills in volleyball:
Digging, Setting, Spiking, Serving and Blocking.

THE DIG

- Face incoming ball
- Knees bent with the weight on the balls of your feet
- Keep your arms/elbows straight
- Wrist together to create a flat platform for the ball to bounce off
- Angle your arms towards the target
- Keep the ball in front of you
- The ball should bounce off your forearms

*Sarah Choat has a flat platform for the ball to bounce off and angles her arms toward the target

THE SET

- Have your hands up early with fingers spread in the shape of a ball
- Keep your hands symmetrical
- Track the ball until you are underneath it
- Ensure the ball lands in your hands above your forehead (you should be able to see the ball through the diamond shaped window made by your thumbs and forefingers)
- Push the ball out in the direction you wish keeping your hands symmetrical

*Harrison Peacock is always under the ball with his hands above his head

THE SPIKE & THE SERVE

- Always keep the ball in front of you
- Have both hands up in the air
- Draw your hitting hand back like a bow and arrow
- Swing at the ball with a extended arm
- Have spread fingers hitting the ball with the palm of your hand
- Follow through the ball with a firm wrist

*Becchara Palmer sets her arms up in a bow and arrow

THE BLOCK

- Watch the spiker and resist the urge to look at the ball
- Line up in front of the spiker as they run in
- Jump straight up with two feet
- Spread your fingers and hands to make them as big as possible
- Reach over the net as far as possible
- Don't touch the ball until after the spiker

*Isaac Kapa keeps his hands over the net and covers the ball

UNIT 10 CLIMBING

It was born as an activity derived from mountaineering. In 2020 it becomes an Olympic discipline (Olympic Climbing).

CLIMBING EQUIPMENT

CLIMBING SHOES
With reinforced tip

HARNESS

HELMET

BELAY DEVICE

ROPE

QUICKDRAW

CHALK BAG

CARABINER

HOW TO STAR

CLIMBING STYLES

SPORT CLIMBING

Climbing is done with harness and rope, but the pieces protectors are embedded on the wall. It is fast, safe and cheap.

FREESTYLE

It is done without rope and without protections. In the case of falling, death is inevitable. It is only suitable for very specialized people.

BOULDERING AND BUILDING

Bouldering is done in low walls, usually on crossings (horizontal lines) and does not require protection. The building is done outdoors (walls or chimneys) and the protection depends on the height to be carried out.

ICE CLIMBING

It is done in icy formations like waterfalls and glaciers. Special gear is needed as ice axes (peaks) and crampons.

TYPES OF GRIP

POSITIVES

Secure grips with yolks and much of the fingers.

JUG

POCKET

UNDERCLING

SIDEPULL

FLATS

Less secure grips. The surface is flat and does not allow to do so much pressure.

PINCH

CRIMPER OR EDGE

NEGATIVES

Very unstable grips.

SLOPER

5

TRADITIONAL CLIMBING

It is the best known. It is done with all equipment and the person is clinging to the rock by a rope through the harness, where the carabiner is inserted and the belay device.

6

CLIMBING WALL

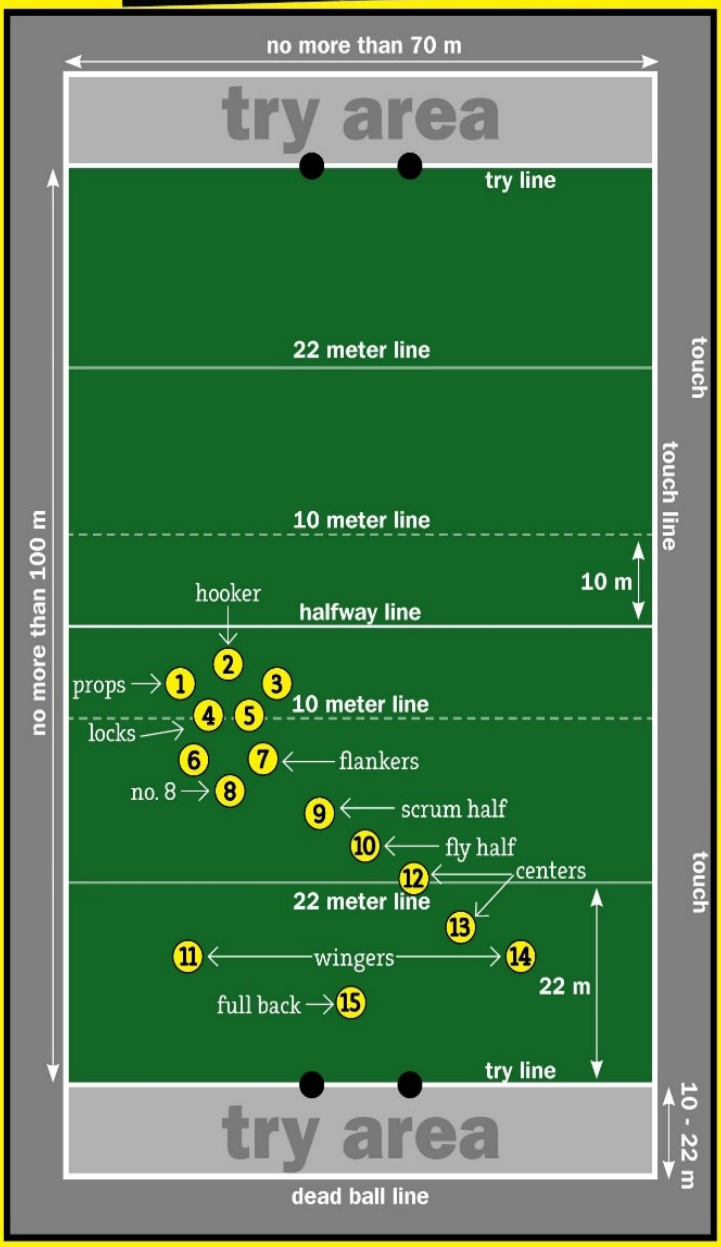
It is done indoors, where the weather does not prevent its realization. It is usually done on plywood surfaces or concrete, which are covered with ledges of varying difficulty. In this variety, lines (vertical) are made or you can also do bouldering or climbing en block, where lines are horizontal (crossing) without elements of protection, as we have seen before.

UNIT 11 RUGBY

RUGBY 101

It is said that **RUGBY** was born in 1823 in the town of Rugby, England, when **William Webb Ellis**, while playing a game of association football, picked the ball up and ran with it toward the opposition's goal line. **Rugby Union** is a full contact team sport traditionally played with 15 players on each side.

PITCH & POSITIONS



SCRUM = 8 Forwards per team
- formed after an infraction
- #9 sends ball in
- using feet only, players try to send the ball toward back to begin play

40 / 40

OBJECT OF THE GAME

1. **PASS THE BALL BACK & FORTH** while running toward the opposition's try line.

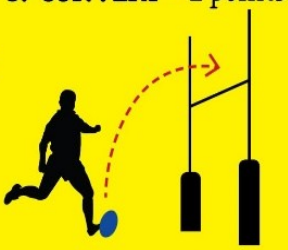
2. **SCORE A TRY** = 5 points

or

a **DROP GOAL** = 3 points

Ball must be grounded.

3. **CONVERT** = 2 points



THINGS YOU NEED TO KNOW

PENALTY KICK - 3 points

OFFSIDE - No player may be in front of his team's ball carrier or the last team mate to play the ball. SANCTION = Penalty kick

KNOCK ON - When a player drops the ball forward as in toward opposing team's try line. RESULT = Scrum | Turnover
SANCTION for intentional Knock On = Penalty kick

TOUCH - When ball is kicked into touch (inside 22 meter line) RESULT = Line Out

LINE OUT - Throw in that happens after ball is kicked to touch. Opposing team may not have more members than team throwing in.

RUCK - A "pile up" formed if the ball is on the ground with 1 or more players from each side around it. Using only their feet, players must move the ball toward their team's hindmost foot where it is picked up to begin play.

MAUL - Ball carrier is upright being held by 1 or more opponents.

4TH ESO WORKBOOK

Physical Education Department
IES El Escorial

TASK 1 TRAINING PRINCIPLES

NAME AND SURNAME CLASS GROUP

QUESTIONS

WATCH THE NEXT TRAINING PLANNING AND WRITE WHICH TRAINING PRINCIPLES ARE NOT ACOMPLISHED, WHY AND WHAT THE SOLUTIONS WOULD BE.

MONDAY

1	2	3	4	5	6	7	8
10' S.R. 30% MHR	2X15 REPS	2X10/10 REPS (10 LEFT AND THEN 10 RIGHT)	2X20 REPS WITH NO STOPS	2X15 REPS (LEGS SLIGHTLY BEND)	2X12 REPS	2X15 REPS	2X10 REPS

TUESDAY

1	2	3	4	5	6	7	8
5' S.R. 30% MHR	2X10 REPS	2X8/8 REPS (10 LEFT AND THEN 10 RIGHT)	2X15 REPS WITH NO STOPS	2X12 REPS (LEGS SLIGHTLY BEND)	2X12 REPS	2X12 REPS	2X8 REPS

RECOVERY: 30 SECONDS BETWEEN SETS AND REPETITIONS

MISTAKES
Trainging principles not acomplished and why.

SOLUTIONS
How to correct the previous mistakes.

TASK 2 STAMINA TRAINING SYSTEMS

NAME AND SURNAME | CLASS GROUP

QUESTIONS

1.- TAKING INTO ACCOUNT THE PRINCIPLE OF PROGRESSION, TRY TO EVOLVE THIS TRAINING.

CIRCUIT TRAINING

MONDAY

SETS: 2
REPS: DURING 30 SECONDS
REPS RECOVERY: 30 SECONDS
SETS RECOVERY: 3 MINUTES

DAY 2:

SETS:
REPS:
REPS RECOVERY:
SETS RECOVERY:

DAY 3:

SETS:
REPS:
REPS RECOVERY:
SETS RECOVERY:

2.- TRY TO ORDER THE NEXT STAMINA TRAINING SYSTEMS FROM THE EASIER TO THE MORE DIFFICULT.

1.- 1x3.000m R: 80bpm | 2.- 3x8x100m RI: 30" R2: 3' | 3.- 35' con cambios de ritmo | 4.- 15' de S.R. (mild intensity)

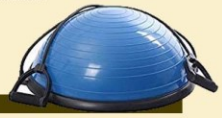
5.- 2x8' c.c. al 60-70% MHR | 6.- 2x1.500m. R: 10'. | 7.- 3x8x100m R1: 20" R2: 3'

1 (easier)	2	3	4	5	6	7 (more difficult)

3.- TAKING INTO ACCOUNT YOUR SCORE IN THE STAMINA TEST OF THE LAST JUNE, YOU HAVE TO PLAN A WEEKLY WORK OUT WHERE TE AIM IS TO RUN 45 MINUTES OF STEADY RUNNING OBSERVING THE PRINCIPLES OF INDIVIDUALIZATION, CONTINUITY, PROGRESSION AND ALTERNATION.

TASK 3 STRENGTH TRAINING SYSTEMS

NAME AND SURNAME | CLASS GROUP



QUESTIONS

1.- MAKE A PROGRESSION OF THESE EXERCISES FOLLOWING THE UNIT'S RECOMMENDATIONS.

MUSCLE:	PROGRESSION 1	PROGRESSION 3
MUSCLE MAXIMUM STRENGTH: 100 KG.		
LOAD: 3X15X35KG. R: 1'30"	PROGRESSION 2	PROGRESSION 4

MUSCLE:	PROGRESSION 1	PROGRESSION 3
MUSCLE MAXIMUM STRENGTH: 60 KG.		
LOAD: 3X10X20KG. R: 1 MIN	PROGRESSION 2	PROGRESSION 4

MUSCLE:	PROGRESSION 1	PROGRESSION 3
MUSCLE MAXIMUM STRENGTH: 50 KG.		
LOAD: 2 X 8/8 X15KG. R: 1 MIN	PROGRESSION 2	PROGRESSION 4

2.- WHAT ARE TE RECOMMEDATIONS TO WORK OUT WITHOUT WEIGHT IN STRENGTH ENDURANCE TRAINING? (2 POINTS).

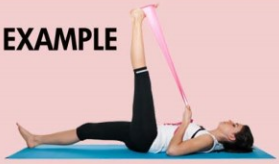
TASK 4 FLEXIBILITY TRAINING SYSTEMS

NAME AND SURNAME CLASS GROUP

QUESTIONS

1.- DESIGN A FLEXIBILITY SESSION, WHICH YOU WILL DO IN THE FUTURE, FOR THE MAIN MUSCLES OF THE BODY. WRITE DOWN THE NAME OF THE MUSCLE THAT IS WORKED OUT AND IF IT IS ACTIVE, PASIVE AND DYNAMIC OR STATIC (BETWEEN 12 AND 16 EXCERCISES, IT IS UP TO YOU).

EXAMPLE



1 HAMTRINGS
2 PASIVE
3 STATIC

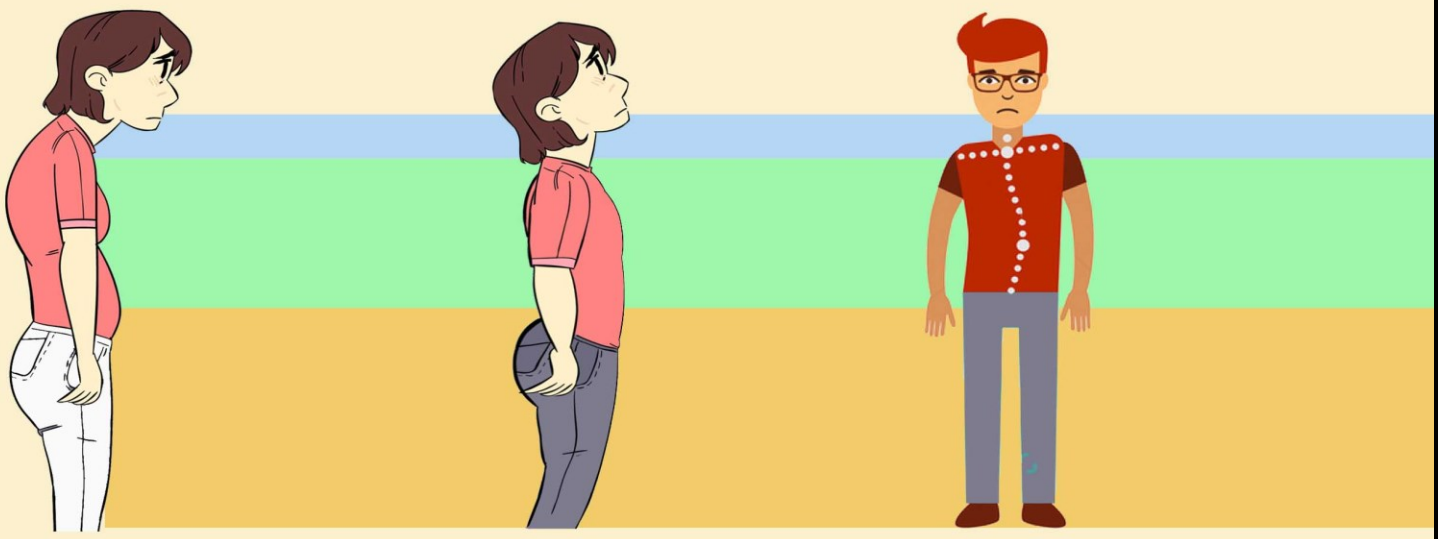
TASK 5 POSTURAL ATTITUDE

NAME AND SURNAME CLASS GROUP

QUESTIONS

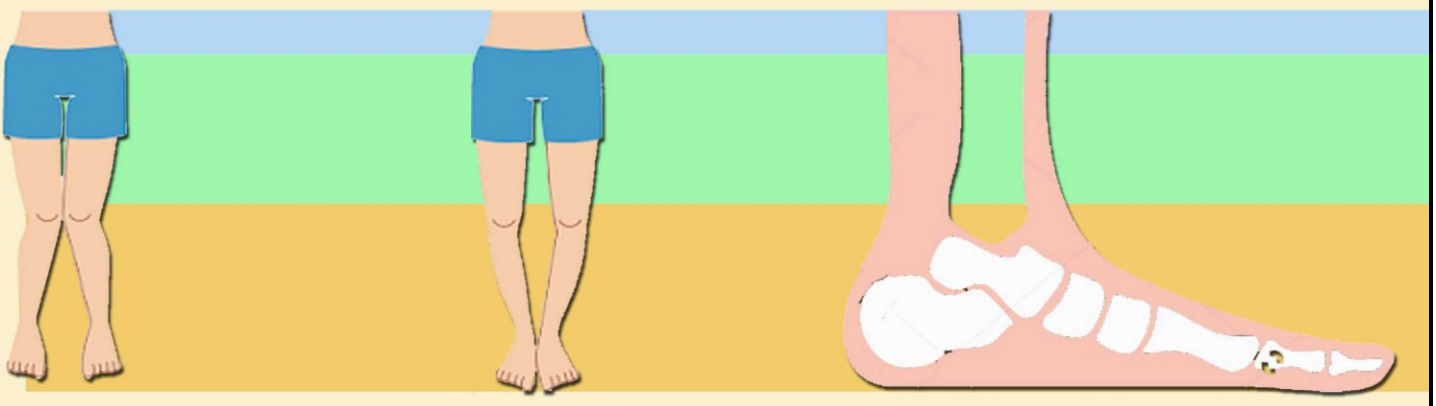
1.- WRITE WHAT IS TE NAME OF THESE POSTURAL ALTERATIONS, A COUPLE OF SYMPTOMS AND WHAT EXERCISES ARE RECOMMENDED TO COMPENSATE THEM.

NAME
SYMPTOMS
TREATMENT



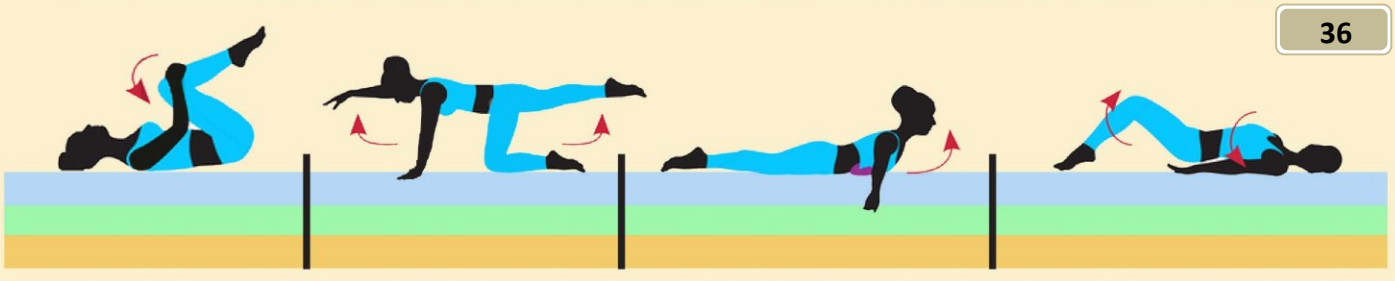
2.- WRITE THE NAME OF THESE POSTURAL ALTERATIONS, A COUPLE OF SYMPTOMS AND WHAT EXERCISES ARE RECOMMENDED TO COMPENSATE THEM.

NAME
SYMPTOMS
TREATMENT



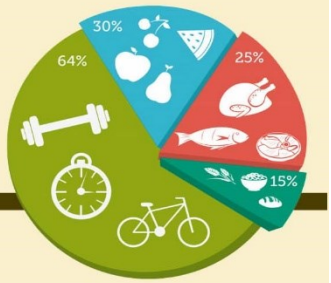
3.- WRITE IN EACH OF THE NEXT EXERCISES:

COMPONENT OF THE BPA WHICH IS DEVELOPED (FLEXIBILITY OR STRENGTH).
WHICH PART OF THE BODY IS WORKING (WHICH MUSCLE OR JOINT).
WHICH PATHOLOGY IS RECOMMENDED FOR (KYPHOSIS, HYPERLORDOSIS OR SCOLIOSIS).



TASK 6. Food and body image

NAME AND SURNAME CLASS GROUP



QUESTIONS

1.- WRITE THREE 'SUPERFOODS' AND EXPLAIN WHY THEY ARE NOT 'SUPER' (3 POINTS).

2.- SEARCH ON THE INTERNET AT LEAST SEVEN WEBSITES, TIKTOK OR YOUTUBE VIDEOS ABOUT FASHION OR PHYSICAL TRAINERS AND TELL US HOW A BODY IMAGE TEENAGER COULD BE AFFECTED BY THEM (7 POINTS. YOU HAVE TO QUOTE THE WEBSITES OR TIKTOK OR YOUTUBE VIDEOS). FINALLY, EXPLAIN IF THAT BODIES OR TIPS ARE REAL, HEALTHY (OR NOT) AND WHY.

TASK 7 FIRST AID

NAME AND SURNAME CLASS GROUP

QUESTIONS

1.- WHICH WOULD BE THE STEPS TO DO A RCP TO THIS WOMAN?

2.- WHICH WOULD BE THE PROCEDURE TO SAVE THIS WOMAN'S LIFE? DESCRIBE IT.

3.- WHAT ARE THE TIPS TO AVOID SPORT INJURIES?

3.- WHAT ARE THE WARNING SIGNS OF A STROKE?

TASK 8 DOPING

NAME AND SURNAME CLASS GROUP

QUESTIONS

1.- WHICH DRUG IS USED THE MOST FOR BUILDING MASS AND STRENGHT?

ANSWER

2.- CLASSIFY THESE SENTENCES AS T OR F.

2.1.- CANNABINOIDS ARE USED FOR RELAXING BLOOD VESSELS.

2.2.- AMPHETAMINES IMPROVE MASS BUILDING.

2.3.- PROTEIN HORMONES MASK PAIN OR AN INJURY.

2.4.- BLOOD DOPING INCRFASE OXYGEN DELIVERY.

2.5.- SWIMMERS NORMALLY USE ANABOLIC STEROIDS.

3.- WRITE FIVE SOCIAL DANGER OF DOPING.

ANSWER

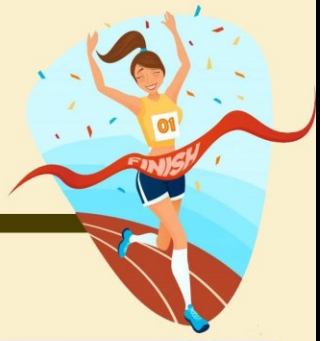
4.- WRITE FIVE HEALTH DANGERS OF DOPING.

ANSWER

5.- SEARCH ON THE INTERNET THREE FAMOUS CASES OF DOPING AND WHAT WERE THEIR PUNISHMENT.

TASK 9 STEREOTYPES AND SPORT

NAME AND SURNAME | CLASS GROUP



QUESTIONS

1.- WHO WAS THIS GIRL? AND WHAT WERE HER ACHIEVEMENTS?

2.- WHAT DID A GROUP OF FEMALE ATHLETICS DO IN 1926 IN ORDER TO COMPETE IN THE OLYMPICS?

3.- WRITE THE NAME OF FIVE WOMEN WHO GET GREAT ACHIEVEMENTS IN SPORTS AND WHAT THEY ACHIEVED.

1

2

3

4

5

4.- SEARCH ON THE INTERNET THE MAIN SPORT WEBSITES (AS.COM; MARCA. COM...) AND COUNT THE PROPORTION OF PIECES OF NEWS THAT ARE RELATED TO MEN AND HOW MANY TO WOMEN. THEN, REASON WHY THAT HAPPENS (CAUSES, CONSEQUENCES) AND THINK ABOUT SOME SOLUTIONS.

EXERCISES BANK

FLEXIBILITY

CALVES

1

HAMSTRINGS

1

2

3

QUADRICEPS

1

2

ADUCTORS

1

2

3

GLUTEUS

1

2

OBLIQUES

1

2

VERTEBRAL SPINE

1

ILIAC PSOAS

1

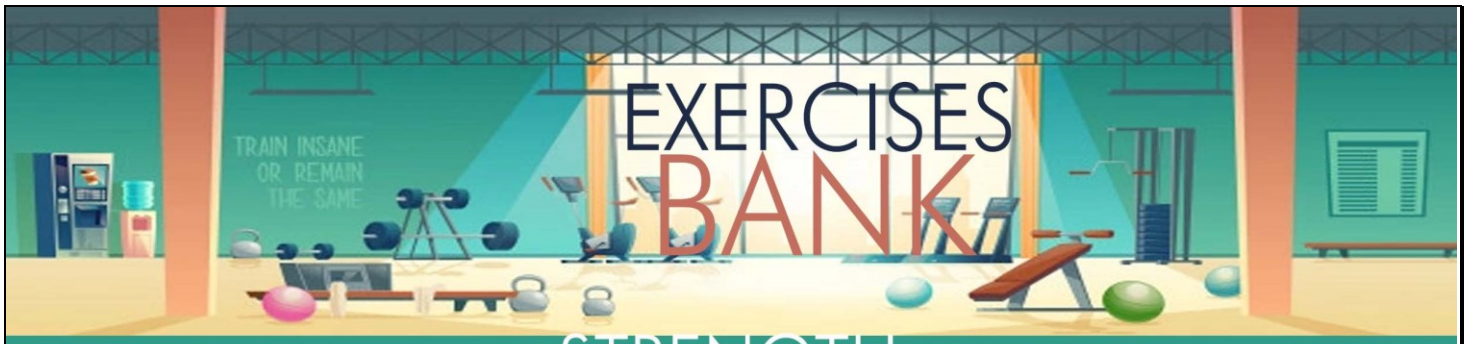
RECTUS ABDOMINUS

1

TRICEPS

1

2



EXERCISES BANK

STRENGTH

CALVES

1

2

LUMBAR

1

PELVIC WAIST

1

2

OBLIQUES

1

2

3

RECTUS ABDOMINUS

1

2

3

4

QUADRICEPS

1

2

3

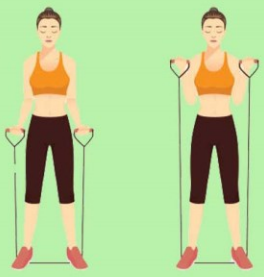
TRICEPS

1

2

BICEPS

1



EDUCACIÓN FÍSICA

PLAN DE ENTRENAMIENTO

OBJETIVO: desarrollo de la resistencia aeróbica, la flexibilidad y de la fuerza resistencia.

Instituto de Educación Secundaria ALFREDO KRAUS
Departamento de Educación Física

1 CALENTAMIENTO

8 minutos de C.C.

FLEXIBILIDAD de piernas

FLEXIBILIDAD de tronco

FLEXIBILIDAD de brazos

2 FUERZA RESISTENCIA

2.1

- 20 repeticiones
- Descanso de 20 seg.
- 20 repeticiones.

(2 series de 20 o también se expresa 2x20 rep. D: 20 seg.

2.2

- 20 repeticiones (derecha)
- 20 repeticiones (izquierda)
- 20 repeticiones (derecha)
- 20 repeticiones (izquierda)
- 20 repeticiones (derecha)
- 20 repeticiones (izquierda)

(3 series de 20 o también se expresa 3x20 rep.

2.3

Tocar el suelo y subir a 45°

- 20 repeticiones
- Descanso de 20 seg.
- 20 repeticiones
- Descanso de 20 seg.
- 20 repeticiones
- Descanso de 20 seg.

2.4

- 20 sentadillas-salto
- 12 fondos de brazos
- 20 sentadillas-salto
- 12 fondos de brazos
- 20 sentadillas-salto
- 12 fondos de brazos

- Descanso de 20 seg. entre ejercicios.

3x20s-20f. D: 20"

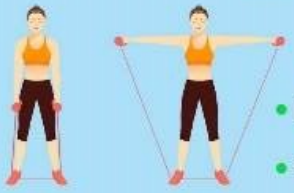
2.5

- 20 zancadas con salto
- 20 lumbares
- 20 zancadas con salto
- 20 lumbares
- 20 zancadas con salto
- 20 lumbares

- Descanso de 20 seg. entre ejercicios.

3x20z-20l. D: 20"

2.6



- 20 repeticiones
- Descanso de 20 seg.
- 20 repeticiones
- Descanso de 20 seg.
- 20 repeticiones
- Descanso de 20 seg.

2.7

- 3x12 repeticiones
- 3x8 repeticiones
- 12 repeticiones de bíceps
- Descanso de 20 seg.
- 8 repeticiones de tríceps diamante...

CONDICIÓN FÍSICA GENERAL

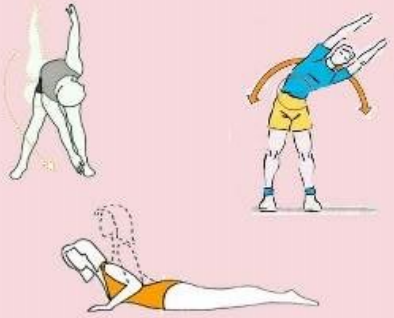
TRABAJO AUTÓNOMO

OBJETIVO: desarrollo de la flexibilidad y de la fuerza resistencia (con aumento del tono muscular).

Carrera continua (8 minutos).

1 CALENTAMIENTO

FLEXIBILIDAD de piernas



FLEXIBILIDAD de tronco

FLEXIBILIDAD de brazos

2 FUERZA RESISTENCIA

Elevar la cadera con rodillas a 90°.

2.1

- 20 repeticiones
- Descanso de 20 seg.
- 20 repeticiones.

(2 series de 20 o también se expresa 2x20 rep. D: 20"

2.2

(1 serie de 20 o también se expresa 1x20 rep. D: 20"

2.3

(1 serie de 15 o también se expresa 1x15 rep. D: 20"

2.4

- 20 sentadillas
- 8-10 fondos de brazos
- 20 sentadillas
- 8- 10 fondos de brazos
- 20 sentadillas
- 8-10 fondos de brazos

Descanso de 20 seg. entre ejercicios.

3x20s-20f. D: 20"

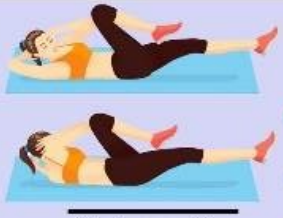
2.5

- 20 zancadas
- 15 lumbares subiendo solo tronco
- 20 zancadas
- 15 lumbares subiendo solo tronco
- 20 zancadas
- 15 lumbares subiendo solo tronco

Descanso de 20 seg. entre ejercicios.

3x20z-20l. D: 20"

2.6



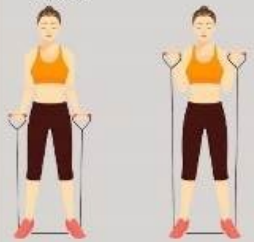
Codo a rodilla contraria

- 20 repeticiones
- Descanso de 20 seg.
- 20 repeticiones
- Descanso de 20 seg.
- 20 repeticiones
- Descanso de 20 seg.

2.7

- 3x30 repeticiones
- 3x12 repeticiones
- 30 repeticiones de gemelo
- Descanso de 20 seg.
- 12 repeticionesde de deltoides...

2.8



- 3x10 repeticiones

- 10 repeticiones de bíceps
- Descanso de 20 seg.
- 10 repeticiones de tríceps...

- 3x10 repeticiones

ENTRENAMIENTO (JUEVES)

OBJETIVO: desarrollo de la fuerza resistencia y flexibilidad con aumento del tono muscular).

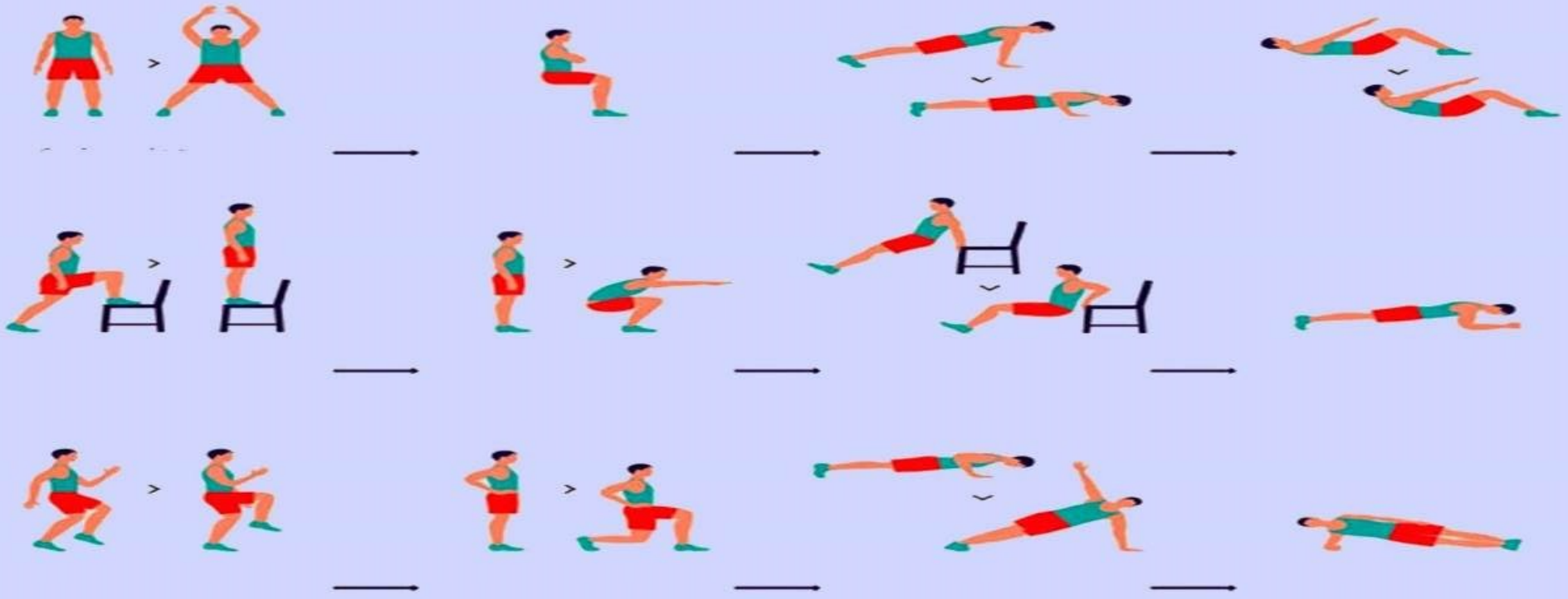
1 CARRERA CONTINUA. 8 -10 minutos

FLEXIBILIDAD de piernas

FLEXIBILIDAD de tronco

FLEXIBILIDAD de brazos

2 HIIT. Ejercicios al 90% (rápidos, pero no al máximo). 30 segundos de trabajo y 10 de descanso. Descansar 3 minutos y repetir.



CORE Complete WORKOUT

SET 1	SET 2	SET 3	SET 4
CRUNCH 	REVERSE CRUNCH 	V CRUNCH 	SIT UP 
SUPERMAN 	OBLIQUE CRUNCH 	SIDE PLANK  HOLD FOR TIME	BICYCLE KICKS 
HEEL TOUCHES 	FLUTTER KICKS 	BRIDGE 	BRIDGE AND REACH 
TOE TOUCH 	BIRD DOG 	PLANK  HOLD FOR TIME	HIP LIFT CRUNCH 
SIDE V CRUNCH 	MOUNTAIN CLIMBER 	BIRD DOG KNEE TOUCH 	RAISED LEG CRUNCH 

BEGINNER 10-15 REPS X 2 SETS

INTERMEDIATE 10-15 REPS X 3 SETS

ADVANCED 10-15 REPS X 4 SETS

RESTS BETWEEN SETS: 1 MIN MAX

www.FIGHTHROUGH.com

NORMAS E INFORMACIONES DEL DEPARTAMENTO

1. Normas de convivencia

1. Compañerismo y profesorado: respeto a los compañeros y al profesor. Se valorará positivamente el compañerismo, generosidad con los que tienen dificultades, actitudes democráticas y solidarias.
2. Material: respeto al material de educación física. El mal uso por parte del alumnado supondrá una sanción disciplinaria como la reposición de dicho material.
3. Puntualidad: el alumnado deberá asistir puntualmente a las sesiones, valorándose negativamente una impuntualidad recurrente.

2. Vestimenta

Vestimenta necesaria. La indumentaria básica y necesaria es ropa de deporte que permita realizar todas las actividades propuestas en la sesión. Concretamente:

a. Parte superior: Camiseta de manga corta, larga o sin mangas o *tops* deportivos.
b. Parte inferior: pantalón largo o corto de chándal. Mallas deportivas.
c. Calzado: zapatillas adecuadas, correctamente atadas, así como el uso de calcetines.
d. Aseo: se permitirá al alumnado traer camiseta de repuesto y elementos de aseo personal.

3. Normas de seguridad

Por seguridad, se hace imprescindible evitar:

- Llevar anillos, pendientes, cadenas y otros accesorios que puedan entorpecer la actividad física.
- Masticar chicles, caramelos o cualquier objeto susceptible de ocasionar un colapso en las vías respiratorias.
- Llevar el pelo largo y suelto, ya que dificulta la visión y la práctica deportiva.

La falta de alguno de los puntos incluidos en el punto 2 y 3 podrá implicar que el ese alumnado no participe en la sesión práctica, viéndose sustituido el trabajo práctico por uno teórico o de colaboración en el buen funcionamiento de la clase y, también, ver penalizada su nota en el apartado de actitud.

Criterios para la repetición de una prueba por ausencia del alumno

Se le repetirá la prueba evaluable en el caso de que el motivo sea una enfermedad y el justificante presentado sea oficial. Dado que el personal médico no tiene obligación de emitir justificantes, la propia cita médica o el informe médico serán válidos. En el caso de otro tipo de justificación, viaje, evento familiar, enfermedad de un familiar... será el profesorado el que decida si puede de repetirse o no.

Si las justificaciones fueran reiteradas o el profesorado sospechara que existe mala fe o negligencia en la justificación de las ausencias, este podrá tomar la decisión de no repetir la prueba si así lo decidiera.

Criterios para la sanción por deshonestidad en pruebas

Si el profesorado sospecha que el alumnado no ha sido honesto en alguna de las pruebas, podrá optar por repetirle la prueba el día que considere oportuno con el fin de constatar la veracidad de sus respuestas, en el caso de un control, o hacérsela repetir, en el caso de un trabajo realizado en casa.

En el caso de que tenga pruebas objetivas de que la prueba no es original, podrá invalidarla sin necesidad de repetición y la nota será un 0 en el apartado teórico.

Para el presente curso, la ley estipula desarrollar la unidad de PALAS. Por consiguiente, el alumnado deberá comprar una raqueta y una pelota para el trimestre en que vaya a realizarse.

1ER TRIMESTRE
2º TRIMESTRE
3ER TRIMESTRE

EDUCACIÓN FÍSICA

RESUMEN DE LOS CONTENIDOS Y DE LOS CRITERIOS DE CALIFICACIÓN

	1º ESO	2º ESO	3º ESO	4º ESO	1º BACH
PRÁCTICA 40%	• C.F. Y SALUD (1º-3º) • *ARTZIKIROL* • GIMNASIA ARTÍSTICA I • COMBAS • EXPRESIÓN CORPORAL • BALONMANO I • UNIHOCKEY • SENDERISMO Y ORIENTACIÓN • ATLETISMO I • BÁDMINTON I	• C.F. Y SALUD (1º-3º) • GIMNASIA ARTÍSTICA II • BALONMANO II • *ACROSPORT* • PINFUVOTE • COMBAS II • ESCALADA • FÚTBOL-SALA • *GOALBALL*	• C.F. Y SALUD (1º-3º) • PICKLEBALL • ATLETISMO:VALLAS • BALONCESTO I • *KICKBALL* • DANZAS • VOLEIBOL I • ORIENTACIÓN NATURALEZA II • ULTIMATE	• C.F. Y SALUD (1º-3º) • VOLEIBOL II • INICIACIÓN AL RUGBY • RITMO Y BAILE • ESCALADA II • RUGBY • *SOFTBÉISBOL* • BALONCESTO II • PALAS PÁDEL	• C.F. Y SALUD (3 TRIM) ENTRENAMIENTO DEPORTIVO • BÁDMINTON III • HOCKEY SALA • ORIENTACIÓN II • EXPRESIÓN CORPORAL • VOLEIBOL III
TEORÍA 30% (Se deberá conseguir un 3 para poder hacer media con el resto de apartados. De no conseguirlo, la evaluación constará como INSUFICIENTE)	• EL PULSO CARDÍACO • CALENTAMIENTO GENERAL I • CUALIDADES FÍSICAS BÁSICAS • CUALIDADES MOTRICES • EJERCICIO SALUDABLE • SALUD MENTAL • ACTITUD POSTURAL • RESPIRACIÓN • NUTRICIÓN I • SENDERISMO • ORIENTACIÓN I • PRIMEROS AUXILIOS I • SEGURIDAD VIAL • DEPORTES I	• EL PULSO CARDÍACO (FCM) • CALENTAMIENTO GRAL II • CUALIDADES FÍSICAS BÁSICAS • EJERICICIO SALUDABLE II • SALUD MENTAL Y EJERCICIO • ACTITUD POSTURAL • NUTRICIÓN II • CABUYERÍA • ESCALADA • PRIMEROS AUXILIOS II • DEPORTE INCLUSIVO • ESTEREOTIPOS • DEPORTES II	• EL PULSO CARDÍACO III • CALENTAMIENTO ESPECÍFICO I • EL APARATO LOCOMOTOR • SISTEMAS DE ENTRENAMIENTO I • ACTITUD POSTURAL III • DIETA EQUILIBRADA Y ALTERACIONES • PRIMEROS AUXILIOS III • ORIENTACIÓN II • DOPAJE • MUJER Y DEPORTE • DEPORTES III	• CALENTAMIENTO ESPECÍFICO II • PRINCIPIOS DEL ENTRENAMIENTO • SISTEMAS DE ENTRENAMIENTO II • ACTITUD POSTURAL IV • EJERCICIO SALUDABLE Y DIETA EQUILIBRADA II • LESIONES DEPORTIVAS Y CÓMO ACTUAR • ESCALADA • DEPORTES IV	• FUNDAMENTOS BIOLÓGICOS • PRINCIPIOS DEL ENTRENAMIENTO • SALUD VS ALTO RENDIMIENTO • SISTEMAS DE ENTRENAMIENTO III • VALORACIÓN POSTURAL • PLANIFICACIÓN DEL ENTRENAMIENTO • RELAJACIÓN II • NUTRICIÓN Y ALTERACIONES • PRIMEROS AUXILIOS • ORIENTACIÓN III • DEPORTES
TRABAJO 30%	• PARTICIPACIÓN • COLABORACIÓN • RESPETO • CAPACIDAD DE ESFUERZO • ENTREGA DE TRABAJOS* • CUMPLIMIENTO DE NORMAS	• PARTICIPACIÓN • COLABORACIÓN • RESPETO • CAPACIDAD DE ESFUERZO • ENTREGA DE TRABAJOS* • CUMPLIMIENTO DE NORMAS	• PARTICIPACIÓN • COLABORACIÓN • RESPETO • CAPACIDAD DE ESFUERZO • ENTREGA DE TRABAJOS* • CUMPLIMIENTO DE NORMAS	• PARTICIPACIÓN • COLABORACIÓN • RESPETO • CAPACIDAD DE ESFUERZO • ENTREGA DE TRABAJOS* • CUMPLIMIENTO DE NORMAS	• PARTICIPACIÓN • COLABORACIÓN • RESPETO • CAPACIDAD DE ESFUERZO • ENTREGA DE TRABAJOS* • CUMPLIMIENTO DE NORMAS

CALIFICACIONES FINALES

Se realizará una media entre las tres evaluaciones donde el alumnado deberá conseguir un 5.00 o más para superar el curso.

Asimismo, se hará un examen de recuperación de los contenidos teóricos de la 3ª evaluación solo a aquel alumnado que, consiguiendo la nota suficiente en dicho examen, pueda conseguir un 5.00 o más en la media global de las tres evaluaciones.

Este examen **no es de todos los contenidos del curso**, por lo que en Educación Física **no habrá examen final**.

REDONDEO DE LAS CALIFICACIONES

Todas las calificaciones de 0 a 5 serán truncadas. Es decir, se redondearán hacia el punto entero inferior.

Las calificaciones de 5 a 10 serán redondeadas hacia el punto entero superior siempre y cuando se consigan 0,75 puntos decimales o más. Este criterio se aplicará a todo tipo de evaluaciones, ordinarias y extraordinarias.

Para el cálculo de medias, donde la media es entre las tres evaluaciones parciales, sí se tendrán en cuenta los decimales hasta la centésima de cada evaluación. A esa media se le aplicarán los criterios de truncamiento o redondeo descritos arriba.

ENTREGA DE TRABAJOS, FICHAS Y OTRAS ACTIVIDADES TEÓRICAS

La presentación fuera de plazo será considerada "No presentada". Por tanto, la nota será un 0.

CRITERIOS ORTOGRÁFICOS

Como acuerdo de centro, se descontarán 0.1 puntos por cada falta y 0.1 por cada cuatro tildes hasta un máximo de 2 puntos en la ESO. En Bachillerato, se descontarán 0,25 puntos por falta y otros 0.25 por cada cuatro tildes.

CONTENIDOS DEL EXAMEN DE PENDIENTES

	1º ESO	2º ESO	3º ESO	4º ESO	1º BACH
PRÁCTICA 50%	• JABALINA • BALONMANO • GIMNASIA ARTÍSTICA • BÁDMINTON • EXPRESIÓN CORPORAL • UNIHOCKEY • COMBAS	• GIMNASIA ARTÍSTICA II • FÚTBOL SALA • PINFUVOTE • ESCALADA	• VALLAS • BÁDMINTON • DANZAS • BALONCESTO	• VOLEIBOL • COREOGRAFÍA • ESCALADA • RUGBY • PALAS	• HOCKEY SALA • BÁDMINTON • VOLEIBOL • EXPRESIÓN CORPORAL • ORIENTACIÓN
TEORÍA 50% (Se deberá conseguir un 3 para hacer media con la parte práctica. De no conseguirlo, constará como INSUFICIENTE)	• EL PULSO CARDÍACO • CALENTAMIENTO GENERAL I • CUALIDADES FÍSICAS BÁSICAS • CUALIDADES MOTRICES • EJERCICIO SALUDABLE • SALUD MENTAL • ACTITUD POSTURAL • RESPIRACIÓN • NUTRICIÓN I • SENDERISMO • ORIENTACIÓN I • PRIMEROS AUXILIOS I • SEGURIDAD VIAL	• EL PULSO CARDÍACO (FCM) • CALENTAMIENTO GRAL II • CUALIDADES FÍSICAS BÁSICAS II • EJERICICIO SALUDABLE II • SALUD MENTAL Y EJERCICIO • ACTITUD POSTURAL • NUTRICIÓN II • CABUYERÍA • ESCALADA • PRIMEROS AUXILIOS II • DEPORTE INCLUSIVO • ESTEREOTIPOS	• EL PULSO CARDÍACO III • CALENTAMIENTO ESPECÍFICO I • EL APARATO LOCOMOTOR • SISTEMAS DE ENTRENAMIENTO I • ACTITUD POSTURAL III • DIETA EQUILIBRADA Y ALTERACIONES • PRIMEROS AUXILIOS III • ORIENTACIÓN II • DOPAJE • MUJER Y DEPORTE	• CALENTAMIENTO ESPECÍFICO II • PRINCIPIOS DEL ENTRENAMIENTO • SISTEMAS DE ENTRENAMIENTO II • ACTITUD POSTURAL IV • EJERCICIO SALUDABLE Y DIETA EQUILIBRADA II • LESIONES DEPORTIVAS Y CÓMO ACTUAR • ESCALADA	• FUNDAMENTOS BIOLÓGICOS PRINCIPIOS DEL ENTRENAMIENTO • SALUD VS ALTO RENDIMIENTO • SISTEMAS DE ENTRENAMIENTO III • VALORACIÓN POSTURAL • PLANIFICACIÓN DEL ENTRENAMIENTO • RELAJACIÓN II • NUTRICIÓN Y ALTERACIONES • PRIMEROS AUXILIOS • ORIENTACIÓN III • DEPORTES

CONVOCATORIA DE PENDIENTES (asignaturas suspensas de cursos anteriores)

- Si aprueba la 1ª y 2ª evaluación del curso presente de Educación Física, aprobará automáticamente los cursos suspensos inferiores. Este sistema no se aplica al alumnado matriculado en 2º de Bachillerato.
- En caso de suspender una o las dos evaluaciones del curso presente o estar matriculado en 2º de Bachillerato, deberá presentarse a un examen teórico-práctico (50–50%) en el tercer trimestre. Para superarlo, deberá conseguir un 5.00 o más de media entre ambas partes.
- Si supera el curso superior de Educación Física, superará todos los inferiores (excepto para 2º de Bachillerato).

PREPARACIÓN DE LAS PRUEBAS POR PARTE DEL ALUMNADO

EXAMEN DE PENDIENTES

APARTADO TEÓRICO: Deberá estudiarse la totalidad del libro del nivel suspenso al que se presenta. Durante las clases prácticas de su presente nivel, el alumnado podrá preguntar las posibles dudas y se solventarán. Igualmente, podrán resolver dichas dudas por cauces telemáticos.

APARTADO PRÁCTICO: El departamento elegirá un deporte del nivel y pedirá una serie de habilidades relacionadas con él. Adicionalmente, se habilitarán algunos recreos a la semana para que el alumnado que lo desee practique con el profesorado.

El alumnado de 2º de Bachillerato, como el de la ESO, podrá venir a preguntar siempre que quiera cualquier duda al departamento, así como a practicar durante los recreos todos aquellos deportes que desee mejorar de cara al examen.

REDONDEO DE LAS CALIFICACIONES

Todas las calificaciones de 0 a 5 serán truncadas. Es decir, se redondearán hacia el punto entero inferior. Las calificaciones de 5 a 10 serán redondeadas hacia el punto entero superior siempre y cuando se consigan 0,75 decimales o más.

CRITERIOS ORTOGRÁFICOS

Como acuerdo de centro, se descontarán 0.1 puntos por cada falta y 0.1 por cada cuatro tildes hasta un máximo de 2 puntos en la ESO. En Bachillerato, se descontarán 0.25 puntos por falta y otros 0.25 por cada cuatro tildes.

FICHA MÉDICA

NOMBRE Y APELLIDOS | CURSO Y GRUPO

En la siguiente ficha (de carácter confidencial y de uso exclusivo por el departamento de Educación Física), debe señalar SÍ o NO (solo si la respuesta es afirmativa debe contestar a las preguntas).
¡Gracias por su colaboración!

¿Padece su hijo/a algún tipo de enfermedad o problema CARDIOVASCULAR?

SÍ NO

En caso afirmativo, señale cuál y de qué tipo.

¿Padece su hijo/a algún tipo de ALERGIA?

SÍ NO

En caso afirmativo, señale cuál y de qué tipo.

¿Padece su hijo/a algún tipo de ASMA o problema respiratorio?

SÍ NO

En caso afirmativo, señale cuál y de qué tipo.

¿Padece su hijo/a algún tipo de lesión en los músculos, huesos o articulaciones RECIENTE?

SÍ NO

En caso afirmativo, señale cuál y de qué tipo.

¿Padece su hijo/a algún tipo de DESVIACIÓN en la COLUMNA VERTEBRAL?

SÍ NO

En caso afirmativo, señale cuál y de qué tipo.

¿Existe en la actualidad algún otro tipo de problema que haga que su hijo/a deba acceder a una adaptación curricular por parte del Departamento de Educación Física ?

SÍ NO

En caso afirmativo, lea el recuadro inferior.

En caso de respuesta afirmativa en alguna de las cuestiones enumeradas anteriormente, y con el objeto de acceder a una adaptación que permita al alumno/a cursar la asignatura en las mejores condiciones, debe presentar ante el departamento de Educación Física un certificado médico oficial en el que conste:

- Patología y/o enfermedad.
- Contraindicaciones hacia el ejercicio físico: qué tipo de ejercicios, qué deportes puede realizar, a qué intensidad...
- Duración de la patología que provoca la adaptación curricular.

En caso de no presentar dicha documentación, para evitar posibles problemas de salud y, al mismo tiempo, que el alumno pueda superar la asignatura, queda al criterio del profesor el cursar dicha adaptación. Recordamos de nuevo que la figura del alumno exento no es contemplada por la ley.

NOMBRE DEL PADRE/MADRE O TUTOR/A

DNI

EL ABAJO FIRMANTE CERTIFICA QUE TODOS LOS DATOS REFLEJADOS EN EL PRESENTE DOCUMENTO SON VERDADEROS.

EN_____A _____DE_____DE _____

FIRMA