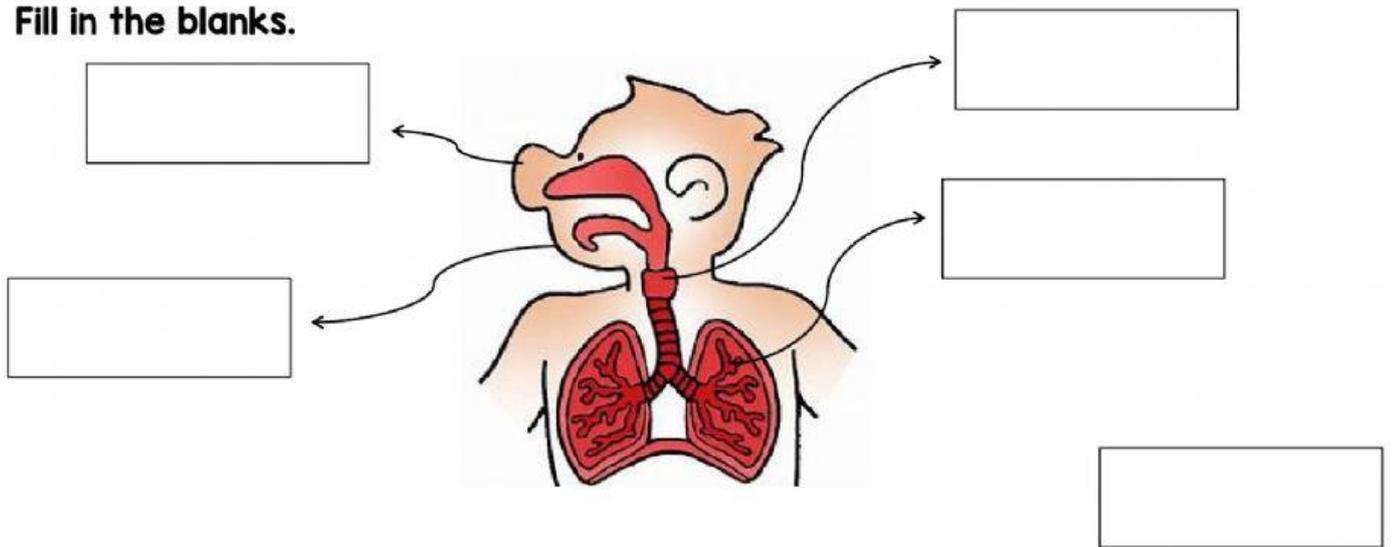


Fill in the blanks.



Nose

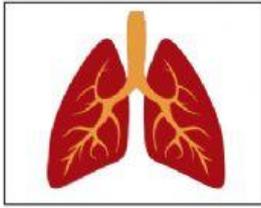
Lungs

Mouth

Trachea

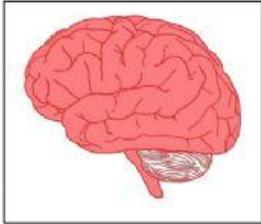
Diaphragm

Tick at the right answer.



Lungs

Mouth



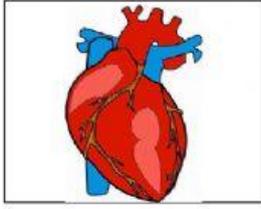
Brain

Nose



Stomach

Ear

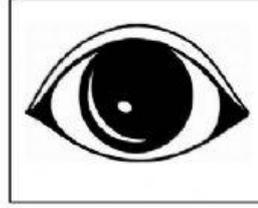
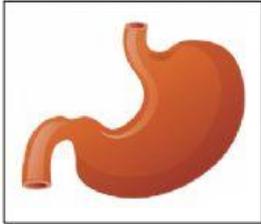


Mouth

Heart

Stomach

Nose



Eye

Ear