Name _____ No. _____ Field: _____



Instruction 1: complete the sentences using the words given.

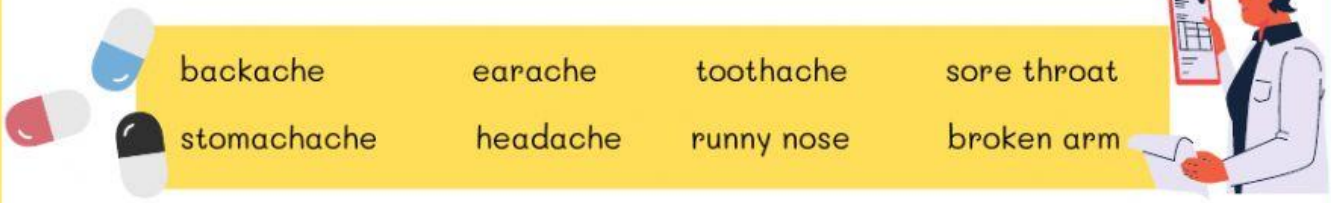
1. Cover your mouth when you _____, sneeze or yawn.
2. She was relieved from _____ after she couldn't sleep all night.
3. I get skin _____ and heart palpaitations.
4. Do you have an _____ pill? I had a lace pattern rash.
5. He suddenly felt _____ and he sat down again in his old chair.
6. Her _____ was still higher an hour later.
7. You're saying you're going to make a girl have _____ and run back and forth from the bathroom.
8. I have a _____ and runny nose.
9. _____ is the natural result of overwork.
10. Eriko worked so long and so hard, without stopping to eatm that I feared she would _____.





LIVEWORKSHEETS

Instruction 2: Match the words of symtom with the pictures and write then in the boxes.



backache	earache	toothache	sore throat
stomachache	headache	runny nose	broken arm

1  _____

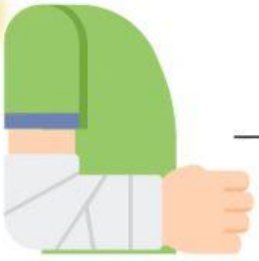
2  _____

3  _____

4  _____

5  _____

6  _____

7  _____

8  _____

LIVEWORKSHEETS

Instruction 3: Match the pictures of symptom with their treatments by writing the letters A-E in the boxes.



A) Apply twice a day in the moring and evening.



B) Take the medication 30 minutes before meals.



C) Instill 1-2 drops in the eye 3-4 times daily.



D) Going to hospital or consulting the doctors is recommended.



E) Take antipyretic 2 tables every 6 hours. If without symptoms no need to take the medicine.

LIVEWORKSHEETS