



Name: \_\_\_\_\_ Date: \_\_\_\_\_



# Health Problems Worksheet



## Part 1: Choose the correct answer

Circle the correct word.

1. I feel pain in my head. I have a:

- a)  headache    b)  earache    c)  stomachache

2. My ear hurts a lot. I have an:

- a)  sore throat    b)  earache    c)  headache

3. I ate too much food. Now my stomach hurts. I have a:

- a)  stomachache    b)  headache    c)  sore throat

4. I can't swallow well, and my throat hurts. I have a:

- a)  earache    b)  sore throat    c)  headache



5. I listened to loud music and now my ear hurts. I have an:



- a)  stomachache    b)  earache    c)  sore throdt

6. I feel pain in my head after studying all day. I have a:

- a)  sore throat    b)  headache    c)  stomachache

### Bonus Activity!

 Draw a  next to the easiest problem to fix.

 Draw a  next to the one that feels the worst.

