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: _____ c. _____.

   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: _____.

   c) 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 throat

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.