Name: _____ Date: _____

Cocaine

C O C A I N E C Q B X E N W I X H
J B Q L G K P E H V U G F L K E C
D P R C G C C Q I I D M F L A I B
E E D R U G O S D A N G E R M H T
P V Q B H K M O G Q G C T N T B S
R I R A R C X H I Y E A P A F C S
E T S R G A G O Z L T T E Z W E P
S C O P L R L A T T L D L C Y S K
S I A C N C R B A P G E Q P O O L
I D Q Q G C L C H Y J K G A B D H
O D Q V H K K U F W R O Q A J R I
N A S N O R T I N G E X B L L E G
X E A F X L W O S U T U B F V V H
I K G B Y N G T B D D Q Z Z S O R
O S O S U G M J E X Y A Q O B K Y
Y G R B R S L G L T R V E Q Z O E
P V S H Y L E B P I P E H B O O V

Heartattack
Overdose
Abuse
Drug
Depression
Illegal
Crack
High
Addictive
Cocaine
Death
Pipe
Snorting
Danger
Crazy