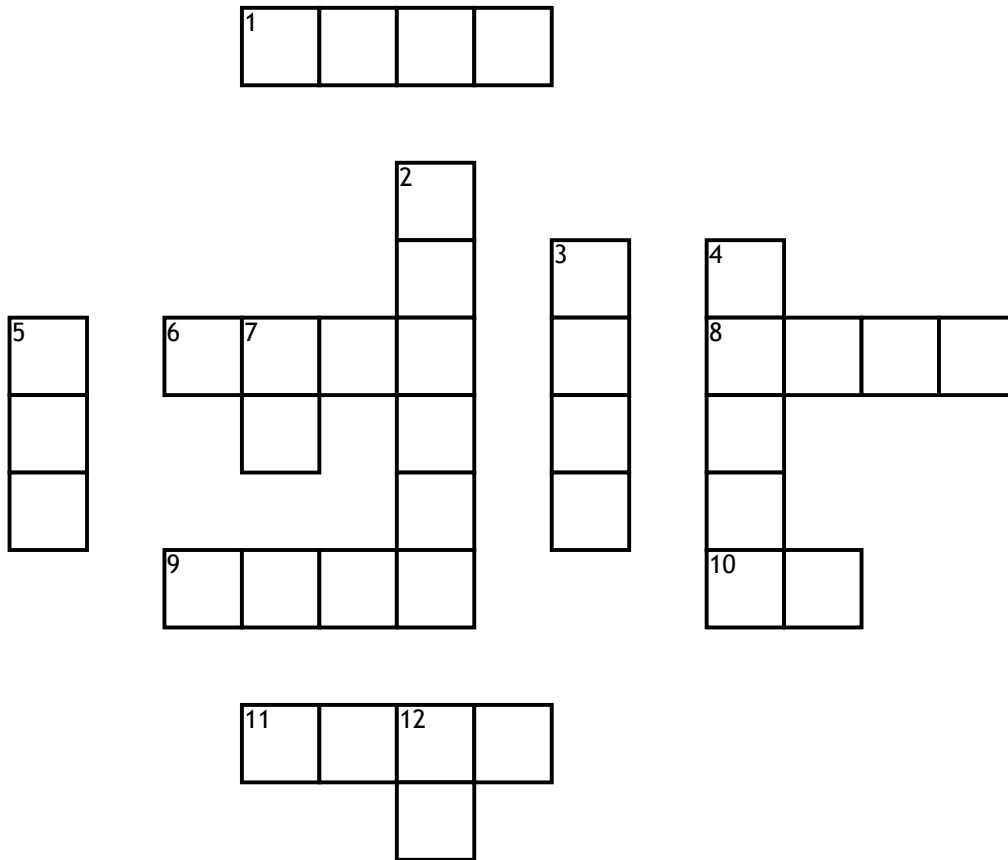


Name: \_\_\_\_\_

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

# Health



## Across

- 1. Record
- 6. Large
- 8. White
- 9. Study of
- 10. Pertaining to
- 11. Blue

## Down

- 2. Short
- 3. WW.  
Inflammation
- 4. Pain
- 5. Under
- 7. Out

12. Toward