

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

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

# How are you feeling today?

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

confident surprised cheerful creative excited  
jealous nervous patient worried afraid  
angry happy silly tired upset  
kind sad shy