















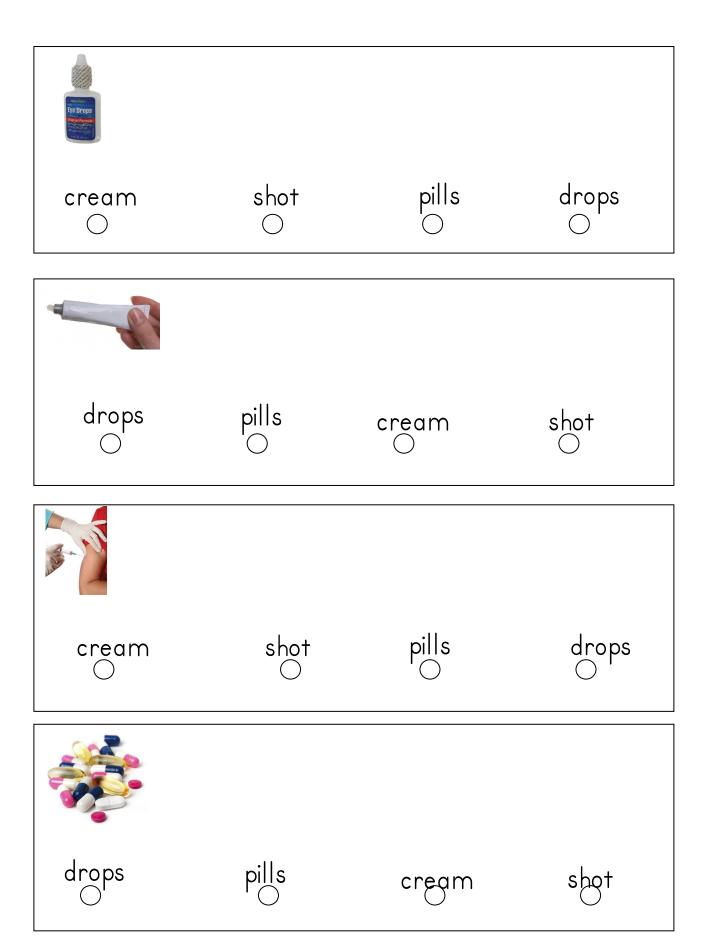
Klas 2013

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Medical faces Spe Drops Organia Formula Wassesser Organia Formula Organia Formula Organia Formula Wassesser Organia Formula Wassesser					Î	TO ALL TATO OF	0intment	
		- 5 m						
Klas 2013	aspirin	Shot	O O O O O O	Cream	Ointment	Pills	Dand aid	Cough syrup

Klas 2013

Hmong American Partnership

Vocabulary Matching



A SPIRIN - Pan August - Odmor pro			
ointment	cough	band aid	aspirin
Dintment			
band aid	aspirin	cough	ointment
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ointment	cough	band aid	aspirin
band aid	aspirin	cough	ointment

Spelling Words	Сору	Write
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din		
kin		
kit		
kid		

Spelling Words	Сору	Write
in		
din		
kin		
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kid		

Name:

Name:

Circle

- I. in kin din
- 2. kid kin kit
- 3. din dit dik

I. in kin din

- 2. kid kin kit
- 3. din dit dik

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- **|.**
- 2. _
- 3. _

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Name:

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Write.

- l. _ _
- 2. _ _ _
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- 4. _ _ _
- 5. _ _ _



1. What is this?

- A. aspirin
- B. band aid
- C ointment
- D. cough medicine



2. What is this?

- (A) shot
- (B) cough medicine
- C) pills
- D eye drops



3. What is this?

- A. cream
- B. band aid
- (C) ointment
- D. aspirin

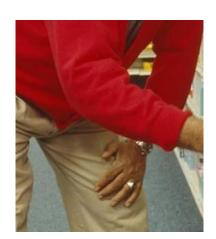


4. What is this?

- (A) eye drops
- B) cough medicine
- C) shot
- (D) ointment



Buying Medicine



My leg hurts.



I don't need cream.



I don't need cough syrup.



I don't need band aids.



I don't need eye drops.



My leg hurts.



I don't need ointment.



I need aspirin.



What do I need?



١.



2.



3.



4.



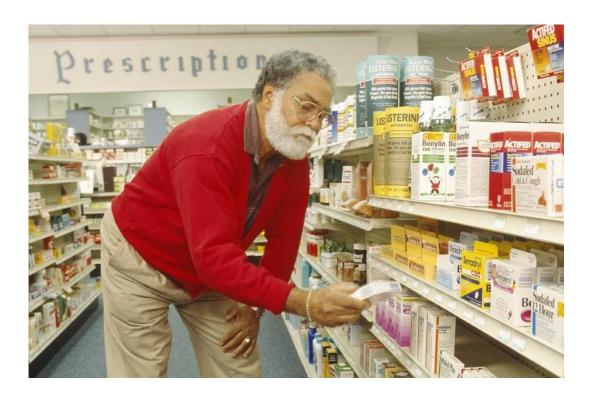
5.



6.



Name:	D	ate:
	What d	o I need?
Name		You need
L Name:	D	ate:
	What do	o I need?
Name		You need



Buying Medicine



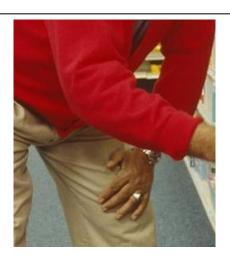














I need aspirin.
I don't need band aids.
I don't need ointment.
I don't need cough syrup.
My leg hurts.
I don't need cream.
I don't need eye drops.
My leg hurts.

I need aspirin.
I don't need band aids.
I don't need ointment.
I don't need cough syrup.
My leg hurts.
I don't need cream.
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My leg hurts.
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My leg hurts.



Buying Medicine



My leg hurts.



I don't need _____.



I don't need _____.



I don't need _____.



I don't need _____.



My leg hurts.



I don't need _____.



I need _____.

aspirin
band aids
ointment
cough syrup
cream
eye drops

aspirin
band aids
ointment
cough syrup
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aspirin
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aspirin		
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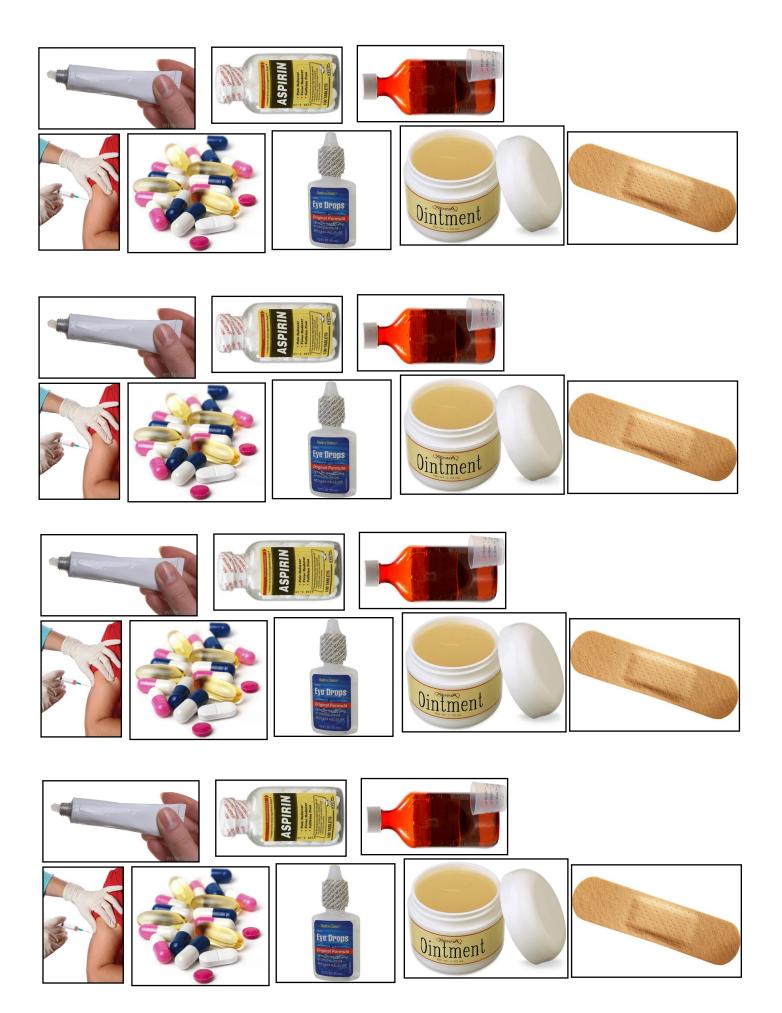
Name: _____ Date: _____

- I. My leg hurts. Yes Yes
- 2. I need cream.
- 3. I don't need aspirin.
- 4. I need aspirin.
- 5. I need band aids.
- 6. I don't need eye drops. Yes No

Name: _____ Date: _____

- I. My leg hurts. Yes Yes
- 2. I need cream. Yes No
- 3. I don't need aspirin. Yes No
- 4. I need aspirin. Yes No
- 5. I need band aids.
- 6. I don't need eye drops. Yes No

Name:		Date:	
Who?		What?	
	needs		



Name: _____

Name:

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