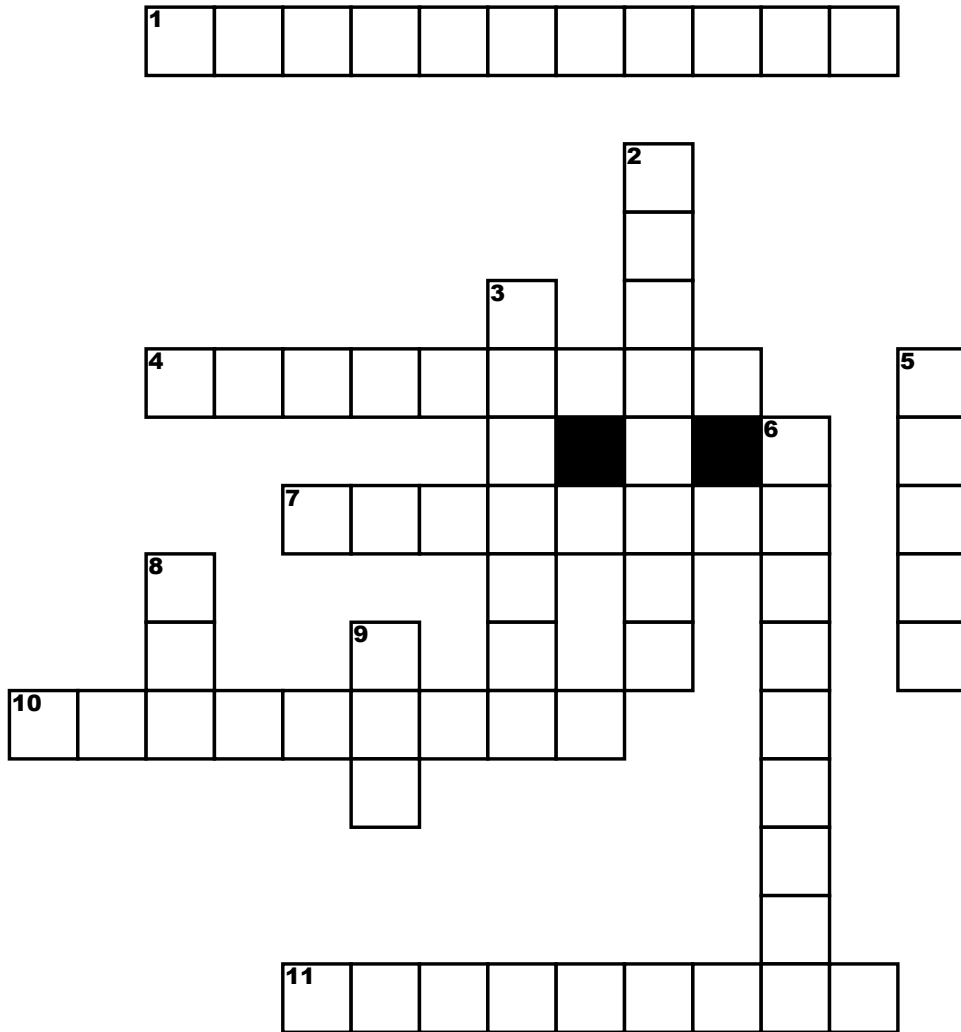


Name: \_\_\_\_\_

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

# Hospice



## **Across**

- 1. Mourning the loss of a loved one**
- 4. The likely course of a disease or ailment**
- 7. Member of the clergy**
- 10. A person who provides day to day care for the terminally ill**
- 11. Freely offer to do something**

## **Down**

- 2. Federal health insurance program for people who are 65 years or older**
- 3. Providing care for the terminally ill**
- 5. A person trained to care for the sick**
- 6. When a cure is impossible**
- 8. do not resuscitate**
- 9. Hospice patients have been given a diagnosis of \_\_\_\_\_ months or less.**

## **Word Bank**

- |                  |                  |                    |                  |
|------------------|------------------|--------------------|------------------|
| <b>SIX</b>       | <b>INCURABLE</b> | <b>NURSE</b>       | <b>CHAPLAIN</b>  |
| <b>DNR</b>       | <b>HOSPICE</b>   | <b>MEDICARE</b>    | <b>CAREGIVER</b> |
| <b>VOLUNTEER</b> | <b>PROGNOSIS</b> | <b>BEREAVEMENT</b> |                  |