

Name: _____

Date: _____

WELLBEING PWW1

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

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MENTAL HEALTH
PROCEDURES
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PHYSICAL
ASTHMA
FATS