

Name: _____ Date: _____

Chest Pain

1. CADRCAI SRRATE _____
2. IRNMECPSSSOO _____
3. ORNATPEI _____
4. ENREHNPIEIP _____
5. LILBFTAEORDRI _____
6. NRMTOOI _____
7. OTIANTBINU _____
8. IONTDMSAEIC _____
9. TAEOPIRRYRS RASRTE _____
10. AUTAMR DECO _____