

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

# Medications

1. SOSLIMNTUA \_\_\_\_\_
2. ECVODLALRI \_\_\_\_\_
3. FTNEIMAODI \_\_\_\_\_
4. EEDILMIGRIP \_\_\_\_\_
5. IREDEROSNIP \_\_\_\_\_
6. AERONDMIOA \_\_\_\_\_
7. NLOSRLIPI \_\_\_\_\_
8. IOEDMSRTE \_\_\_\_\_
9. TAINPBGANE \_\_\_\_\_
10. TTATSIAVORAN \_\_\_\_\_
11. EIMEODFSRU \_\_\_\_\_
12. NLOIRLLUPAO \_\_\_\_\_

## Word Bank

Glimepiride  
Torsemide  
Lisinopril

Risperidone  
Tamsulosin  
Atorvastatin

Amiodarone  
Gabapentin  
Furosemide

Carvedilol  
Famotidine  
Allopurinol