

Name: _____ Date: _____

Stroke

1. EICCHSIM _____
2. IAT _____
3. EGERNETM _____
4. CCANST _____
5. AASPHAI _____
6. RRTEYA _____
7. YEESHNNRTIOP _____
8. BUSRHOMT _____
9. ATP _____
10. PHCEES _____