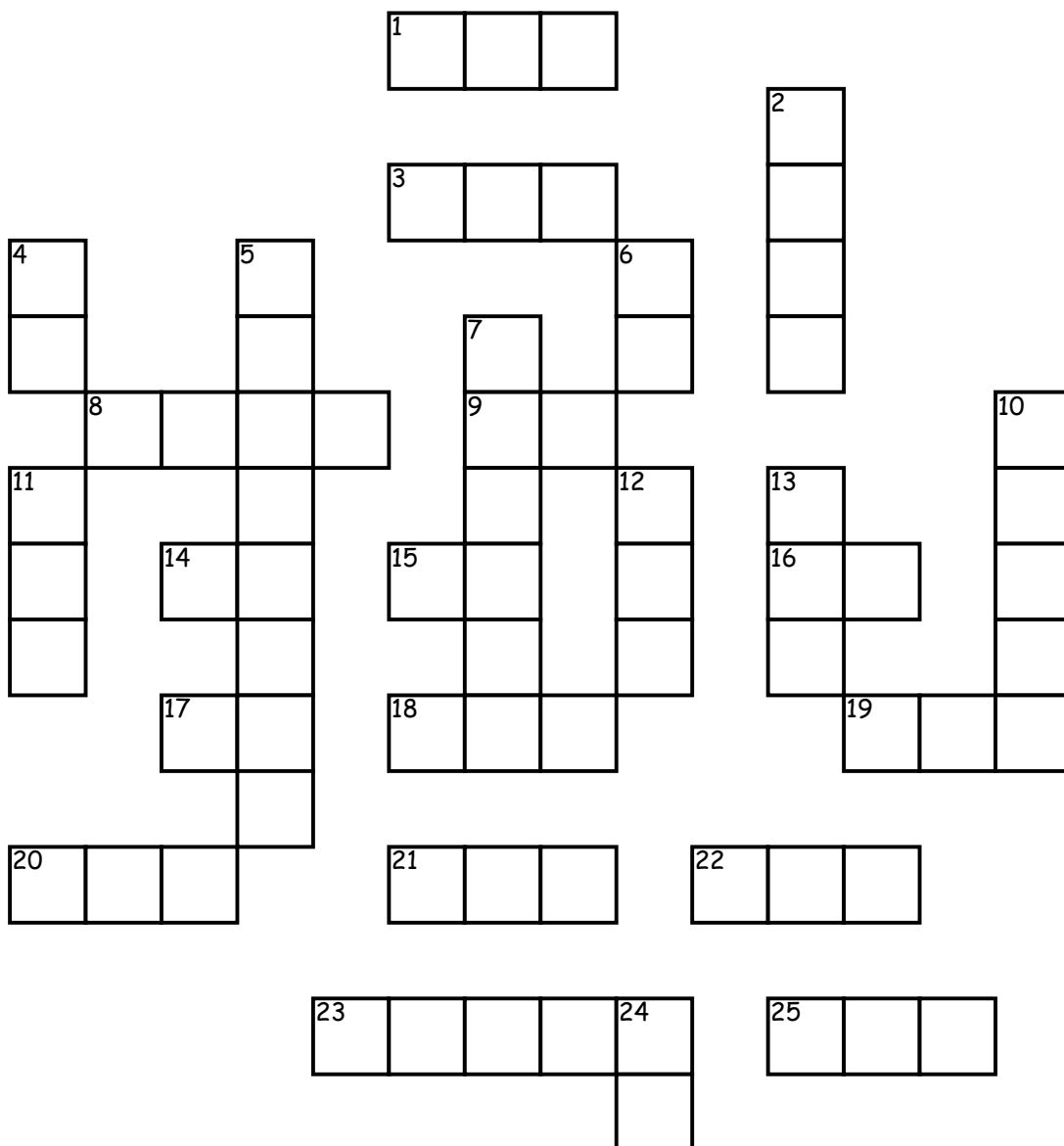


Name: \_\_\_\_\_

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

o,p



**Across**

- 1. Post mortem care
- 3. Peripheral vascular disease
- 8. Omnibus budget reconciliation act
- 9. ounce
- 14. After meals
- 15. Patient
- 16. Oxygen
- 17. Operating room
- 18. personal protective equipment

- 19. Peripheral nervous system
- 20. Percutaneous endoscopic gastronomy
- 21. As needed
- 22. Protected health information
- 23. Before surgery
- 25. past medical history

**Down**

- 2. Occupational safety and health admin

- 4. Occupational therapy
- 5. Prineal care
- 6. Physical therapy
- 7. after surgery
- 10. by mounth
- 11. Patient controlled analgesia
- 12. partial weight bearing
- 13. Out of bed
- 24. by mouth