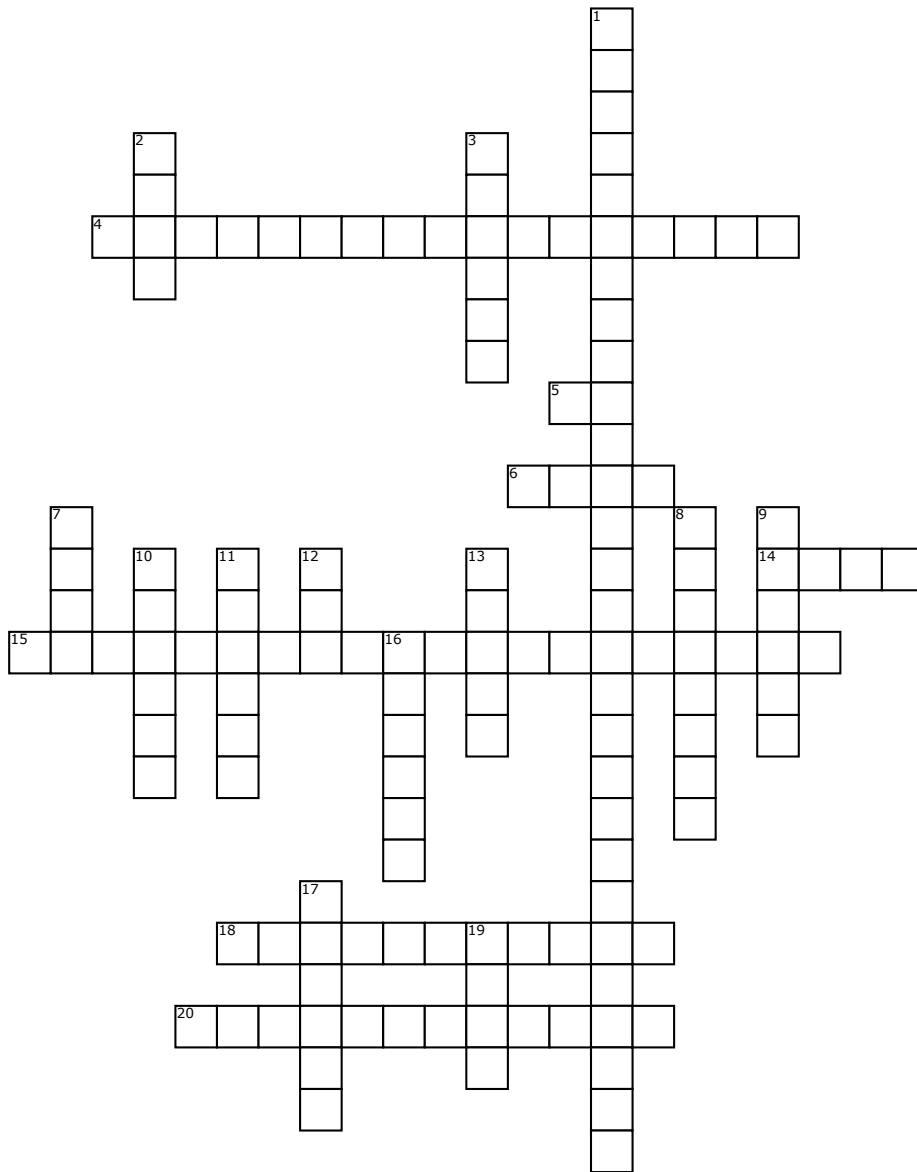


Name: _____ Date: _____

CARDIOVASCULAR SYSTEM



Across

- 4.** EKG
5. STRUCTURE,
TISSUE, THING
6. PULMON/O
14. WITHIN
15. MI
18. ELECTR/O
20. WW.
-AC,-AL,-AR,ARY,EAL

Down

- 1.** CPR
2. SEMI-
3. ARTI/O
7. STUDY OF
8. SYSTEM
9. -GRAM
10. TO HOLD BACK,
BACK
11. HEART

- 12.** ABOVE, UPON,
ON
13. MOON
16. SPECIALIST
17. PARTITION
(DIVIDE)
19. INFLAMMATION