

Name: _____ Date: _____ Period: _____

Understanding the Patient's Rights

A A F N V H V D Z A H C A I S M R L E V T
S G S T B N V C I O H N G Y R H V G E I H C S
D C T Z G I G S T N E D I S E R D H L F A Z R
M S V R F S F Z H V A G A C I T D B R B O E
H B V I V Y D D E U L N U R S I N G E G H F R
E E R N D A H Y S A Y T I L I C A F L Z B S U
Y N B H I S H U U P U V M G G P O H A S T Z P S
M O I G U G U L P D R O S G H A O H O F N V G N
U I P Z M R H R P B I H P U R U E T I H F M S I
U T D Y Y L L T A B Y P O S V A N O R T A Z H
I A I B M R N S N S M I H L E D N R M P C T O
I P I N N D V M T C H B T I I P O G D F T E H
I I S S A O V G C S B E H T I B A I A A L S
D C P R E U I A S G C A U Y B N T N D A N B
H I U H N Z T T F M A P R C O L P A I N E F Z G
O T L S M H Y C C R U C T S C I Z R G F O R
P R V G I M P E E N N M A F L Z L A A A O S I
R A M S R S F Y A T R Z E I O I T O R R Y T
G P P Z T N N B Z A Y O F G G E C I M E D G B
S P F L H D M U F O V R V H N S N O N V A T N
C C R O N E A E B T Z H P D T Z O N I O B L Z
C L M V U H A L N Z H V M E V R C B C L D N
T E G F Y D E E P F V I H E S I M E R U F E B H
S G R R N N E U Z G V Z L P R P R S S U F R

RECONCILIATION
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RESIDENTS
COVERAGE
RIGHTS
CLIENT
CARE

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PROTECTION
INSURERS
NURSING
PATIENT
SPOUSE

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HEALTHCARE
INSURANCE
FACILITY
OMNIBUS
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