



DNP Manuscript Defense Approval

First Name: * Ricardo

Last Name: * Paitz

*

Date: * 07/07/2022

- Choose your DNP program: *
- Adult-Gerontology Acute Care Nurse Practitioner (Doctor of Nursing Practice)
 - Family Nurse Practitioner (Doctor of Nursing Practice)
 - Post-Master's DNP (Doctor of Nursing Practice)

Manuscript Title: * Stroke Care: Achieving rec

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