附件

仁寿县人民医院市级继教项目

“消化道恶性肿瘤规范化治疗暨肿瘤营养治疗”

参会回执表

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| --- | --- | --- | --- |
| 姓 名 | 单 位 | 职务/职称 | 移动电话 |
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