**附件2：**

**“2023患者用药指导全国知识技能竞赛”**

**湖南省选拔赛参赛回执表**

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| **城市** | **选手姓名** | **性别** | **工作单位** | **职务** | **职称** | **联系电话** | **备注** |
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