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| **成都中医药大学附属医院/临床医学院**  **评价表** | | |
| 科室：${deptName} | | 考核名称：${courseName} |
| 考核时间：${classTime} | | 考核地点：${classPlace} |
| 总体评价 | 评语：  ${comment} | |
| 需要补充的意见和建议：  ${proposal} | | |
| 督导人：${visitorName} | | |
| 督导时间：${ddsj} | | |
| 照片：   |  |  |  | | --- | --- | --- | | ${imgUrl1^html} | ${imgUrl2^html} | ${imgUrl3^html} | | ${imgUrl4^html} | ${imgUrl5^html} | ${imgUrl6^html} | | ${imgUrl7^html} | ${imgUrl8^html} | ${imgUrl9^html} | | | |