五、门诊病历

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| --- | --- | --- | --- | --- | --- | --- |
| **序号** | **病例类型** | **疾病名称** | **病历号** | **日期** | **导师姓名** | **心得体会** |
| #{seq} | #{case} | #{diseaseName} | #{caseNumber} | #{date} | #{teacherSignature} | #{summary} |