门急诊病例登记

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| --- | --- | --- | --- | --- | --- | --- |
| **序号** | **病例** | **疾病名称** | **病人姓名** | **例次** | **日期** | **指导教师签字** |
| #{case\_seq} | #{case} | #{diseaseName} | #{patientName} | #{cases} | #{date} | #{teacherSignature} |