**附件2:**

**河南省人民医院2022年麻醉科专科护士培训班学员信息统计表**

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| **序号** | **单位** | **姓名** | **性别** | **年龄** | **身份证号** | **科室** | **工作年限** | **麻醉科专科**  **工作年限** | **学历** | **职称** | **职务** | **手机号** | **邮箱** | **微信号** |
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