**中医诊所体温异常顾客信息登记表**

**门店（诊所）名称：**

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| 序号 | 日期（年/月/日） | 体温℃ | 患者姓名 | 身份证号 | 家庭住址 | 联系电话 | 患者症状 | 陪同人员及电话 | 转诊情况 |
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