**受试者筛选入选表**

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| **试验名称** |  | | | **方案编号** |  | | **申办者** |  | |
| **试验中心** |  | | | **专业组** |  | | **主要研究者** |  | |
| **筛选号** | **住院号/门诊号** | **知情日期** | **筛选日期** | **性别** | **年龄** | **临床诊断及背景信息** | **是否入组** | **入组编号** | **备注** |
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