附件2

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| **安徽医科大学临床医学专业（本科）水平测试考官汇总表** | | | | | | | |
| **单位** | **姓 名** | **年龄** | **最后学历（位）** | **职 称** | **专业** | **现任职务** | **联系电话** |
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