# 研究人员列表

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| \***姓名** | \***科室/公司名称** | **职称** | **项目中职务** | **手机号** | **工作邮箱** | **备注** |
|  |  |  | \*PI |  |  |  |
|  |  |  | \*Sub-I |  |  |  |
|  |  |  | \*研究医生 |  |  |  |
|  |  |  | \*研究护士 |  |  |  |
|  |  |  | CRC |  |  |  |
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注：标记\*的为必填。