**附件2：**

**消杀防疫登记表（供参考）**

**填报部门： 部门负责人：**

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| --- | --- | --- | --- | --- | --- |
| **日期** | **消杀区域** | **消杀药品** | **消杀时间记录** | **操作人** | **监督人** |
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