**临床试验用药品发放回收登记表((Investigational Drug Dispending&ReturningRegistration Form)**

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| 试验名称(Study Title)/方案号(Protocol No.): | | | | | | | | | | | | | | | 申办方(Sponsor): | | | | | | |
| 主要研究者(PI): | | | | 中心名称(Site Name): 南阳市第一人民医院 | | | | | | | | | | |  | | 中心编号(Site No.): | | | | |
| 受试者姓名缩写(Subject Initial): | | | | | | | | | | | | 受试者编号(Subject No.): | | | | | | | | | |
| 药品名称(Product): | | | | | | 规格: | | | |  | 批号(Batch No.): | | | | | | | | 有效期(Expiry Date): | | |
| 发放（Dispensed To Subject） | | | | | | | | |  | | | | 回收(Returned By Subject) | | | | | | | | 备注(监查、核对等) |
| 访视周期（VisitCycle） | 日期(Date) | 药物编号(Drug No.) |  | | 数量  (Quantity  dispensed) | | 管理员(Recorder's Sign) | 领药人(Received by | 日期(Date) | | | | | 回收数量(Recycling Quantity) | | 回收数量不一致说明（Inconsistent Recycling Quantity Description） | | 还药人(Returned by) | | 管理员(Recorder's Sign) |
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**临床试验用药品发放回收登记表((Investigational Drug Dispending&ReturningRegistration Form)**

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| 试验名称(Study Title)/方案号(Protocol No.): | | | | | | | | | | | | | | | 申办方(Sponsor): | | | | | | |
| 主要研究者(PI): | | | | 中心名称(Site Name): 南阳市第一人民医院 | | | | | | | | | | |  | | 中心编号(Site No.): | | | | |
| 受试者姓名缩写(Subject Initial): | | | | | | | | | | | | 受试者编号(Subject No.): | | | | | | | | | |
| 药品名称(Product): | | | | | | | 规格: | | |  | 批号(Batch No.): | | | | | | | | 有效期(Expiry Date): | | |
| 发放（Dispensed To Subject） | | | | | | | | |  | | | | 回收(Returned By Subject) | | | | | | | | 备注(监查、核对等) |
| 访视周期（VisitCycle） | 日期(Date) | 药物编号(Drug No.) |  | | 数量  (Quantity  dispensed) | 管理员(Recorder's Sign) | | 领药人(Received by | 日期(Date) | | | | | 回收数量(Recycling Quantity) | | 回收数量不一致说明（Inconsistent Recycling Quantity Description） | | 还药人(Returned by) | | 管理员(Recorder's Sign) |
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