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| 月/日 | 家庭印 | 服用目的 | 時間 | 種類・容量 | 投薬者印 |
| ５/１ |  | 風邪で咳が出ている | 食後 | 水薬（１）粉薬（２） |  |
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投薬依頼書

　　　　　　★必ず１回分を持たせてください。