附件

**新型冠状病毒检测标本送检表**

送样单位（盖章）： 送样日期： 年 月 日 送样人：

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| 标本  编号 | 标本类型 | 姓名 | 性别 | 年龄 | 发病日期 | 就诊日期 | 采样日期 | 样本来源是否为聚集性病例§ | 检测日期 | 实时荧光RT-PCR | | 基因序列同源性\* | | 备注 |
| 试剂厂家 | 靶基因 | 一代 | 深度测序 |
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基因序列同源性\*非必选项，注明完成具体靶基因序列/全基因组序列，及其与新型冠状病毒的同源性。样本来源是否为聚集性病例§填是或否。