**广东省材料研究学会团体标准征求意见表**

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| **标准项目名称** | | 《外科植入物 全髋关节假体 增材制造钛合金股骨柄假体》 | | | | | |
| **意见提出人** | |  | | | **所在单位** |  | |
| **联系电话** | |  | | | **E-mail** |  | |
| **意见** | | | | | | | |
| **序号** | **页次** | | **标准章条编号** | **意见内容** | | | **理由和依据** |
| 1 |  | |  |  | | |  |
| 2 |  | |  |  | | |  |
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| **建议** | | | | | | | |
| 1.  2.  3. | | | | | | | |

注：表格不够填加可加附页。

意见提出人（签名）：

日 期：