（３）避難所栄養指導計画・報告

**避難所栄養指導計画・報告**

　　　　年　　　　月　　　　日　（　　　　）

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| 巡回  日時 | 避難所名 | 対象者 氏名 | 年齢 | 性別 | 主な疾患 | 栄養指導実施有無 | 指導状況 | 担当者 | 特記事項 |
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