FNOMCeO

Prot. N°: _____

Rif. Nota:

Resp. Proced.: - Dr.ssa L. Castigliego

Resp. Istrut.:

OGGETTO:

Registro Italiano dei Medici – nuova Iniziativa.

Roma, _____

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E' necessario, pertanto, prestare la massima attenzione in caso di ricevimento di tale modulistica, evitando di sottoscriverla.

Si prega di dare massima diffusione a tutti gli iscritti.

Cordiali saluti

IL PRESIDENTE
Dott.ssa Roberta Chersevani

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