

Info/IFU Request



Please write below your complete data:

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Company _____

Postal Address _____

Telephone _____

Clinical Documents available to dental professionals only.

Commercial Documents available to Trade only.

Documents delivered in English Language if not otherwise specified.

Dentis/Surgeon

Dental Technician

Trade/Dealer

Other

Indications of Use (all categories)

Implants IFU

Prosthetics IFU

Instruments IFU

Surgical Guide

Disclaimers

CE Certificates

Retail Price List EUR

Condition of Sale

Other (please specify) _____



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