

Request a quote

Please complete and submit the form to order-ftd.team@siemens-healthineers.com

Contact name *

Name of laboratory/company *

Country where the service is needed *

Are you an existing customer? *

Yes

No

If yes, please enter your client number

Are you a distributor? *

Yes

No

Kit name *

Kit catalogue number *

Quantity

Kit size *

32 reaction size

64 reaction size

Kit purpose *

Research purposes

Patient diagnosis

If you require the kits for research purposes, can you provide proof of external funding by an organization other than the one to which you belong? *

- Yes
- No
- I do not require the kits for research purposes

If you require the kit for research purposes, do you agree to share the research data and cite FTD in any future publication? *

- Yes
- No
- I do not require the kits for research purposes

Which thermocycler do you use?

E-mail address *

Contact number

Additional comments

By submitting this form I understand Fast Track Diagnostics will protect my data as outlined in the [privacy policy](#) *