



CDM01 – CBM Medical Request Form

Please populate and send this completed form via e-mail to enquiries@cbmwales.co.uk

or by post to: **UW Centre for Advanced Batch Manufacturing Limited (CBM), Unit GF6, Ethos Building, King's Road, Swansea, SA1 8AS.**

CONTACT DETAILS	
Name:	
Organisation:	
Organisation Address:	
E-mail address:	
Phone Number:	

REQUEST	
Products required:	<input type="checkbox"/> Anatomical model <input type="checkbox"/> Surgical Guide <input type="checkbox"/> Surgical Implant <input type="checkbox"/> Custom Medical Innovation (<i>Please specify</i>): <input type="checkbox"/> Other (<i>Please specify</i>):
Anatomical Region of Interest:	
Intended use environment:	<input type="checkbox"/> Theatre <input type="checkbox"/> Lab <input type="checkbox"/> Teaching aid <input type="checkbox"/> Display <input type="checkbox"/> Other (<i>please specify</i>):
Date required (<i>On or before</i>):	DD/MMM/YYYY
Delivery Address (<i>if different from above</i>):	
Request details:	

Thank you for your enquiry. We will be in touch via e-mail or telephone to confirm receipt of your request and to arrange details. We will provide a **secure email address** for you to send electronic patient data (DICOM data, .STL files or encrypted data), please email the password separately to the same email address.

IMPORTANT: CBM intends to use the patient DICOM data provided by the prescriber for processing of the anatomical area of interest to develop custom made devices based on the case specification. By filling in this request form, you as prescriber confirm you have obtained patient consent and both parties are willing to progress with the processing of this data.

CBM_ (UW Centre for Advanced Batch Manufacture Limited)
Unit GF6, Ethos Building, Kings Road, Swansea, UK, SA1 8AS

T: +44 (0)1792 341 774 **E:** enquiries@cbmwales.co.uk **W:** www.cbmwales.co.uk

