

For inquiries to our company, we kindly ask that you review the information below and send us an email including the recipient, subject, and required information in the message body.

Please make sure of the following:

This site of the inquiry form is managed and operated by PDRadiopharma Inc.

As our return E-mail is created only for responding to your inquiry, please do not use the information contained for other purposes.

We may not be able to meet your request for a response by a specified date or in the case of urgent inquiries.

Please do not attach files or include URLs. Attached files will be deleted, and URLs will not be retained.

*Indicates required field

No.	Inquiry Type	To	Subject	Information to Be Included in the Message
1	Contact Us	s-prov-info-hq@pdradiopharma.com	PDRadiopharma Inc./ Confirmation of Receipt of Inquiry	▼Please input your information First name / Last name*: Company Name*: Zip / Postal Code:〒 Country / Area*: Street, City, state: Phone*: Facsimile: Comments or Questions*:
2	Contact For Healthcare Professional	s-prov-export@pdradiopharma.com	PDRadiopharma Inc./ Confirmation of Receipt of Inquiry	Street, City, state: Phone*: Facsimile: Comments or Questions*:

※Handling of personal information

Please be advised that we will use your personal information, such as your name and email address, which you may provide via this email in order to serve you by sending our response to your inquiry.If you agree, please check the box below.