Online Registration Baden for Patients

Security notice

All the information is transmitted via an encrypted SSL connection. Please complete all fields containing an asterisk *.

Patient data
First name *
Last name *
Date of birth
tt.mm.jjjj
Street
Postcode *
Town *
Tel. (private) *
Tel. (work)
Tel. (mobile)
Email:

Specialists		
☐ Dr. Dr. med. Thomas Bottler		
$\ \square$ Dr. med. Dr. med. dent. M. Baltensperger (tumour consultation)		
Only applies in case of emergency. Otherwise, the appointment will be based on availability.		
December for Devictor live		
Reason for Registration		
Patient records upload (X-rays, Pictures)		
You may upload up to 10 documents (max. 15MB each).		
♣ CHOOSE DOCUMENT	no document chosen (max. data 15MB)	
♣ CHOOSE DOCUMENT	no document chosen (max. data 15MB)	
1 CHOOSE DOCUMENT	no document chosen (max. data 15MB)	
♣ CHOOSE DOCUMENT	no document chosen (max. data 15MB)	
1 CHOOSE DOCUMENT	no document chosen (max. data 15MB)	
♣ CHOOSE DOCUMENT	no document chosen (max. data 15MB)	
♣ CHOOSE DOCUMENT	no document chosen (max. data 15MB)	
♣ CHOOSE DOCUMENT	no document chosen (max. data 15MB)	
♣ CHOOSE DOCUMENT	no document chosen (max. data 15MB)	
♣ CHOOSE DOCUMENT	no document chosen (max. data 15MB)	