## **Medtronic**

Medical Surgical
Acute Care and Monitoring
6135 Gunbarrel Ave.
Boulder, CO 80301
www.medtronic.com

## **Customer Confirmation Form**

**Urgent: Medical Device Correction** 

## Covidien Nellcor™ Bedside SpO<sub>2</sub> Patient Monitoring System

## <u>For completion by Medtronic Customers Only - Please complete all fields below and return this form immediately even if you no longer have inventory.</u>

Pass on this notice to any organization or individual where the product has been transferred or distributed.

By signing this form, I confirm that I have read the Urgent: Medical Device Correction Notification Letter, dated June 23, 2025, from Medtronic regarding Covidien *Nellcor™ Bedside SpO2 Patient Monitoring System* and have taken appropriate action including contacting home use patients as required.

Please complete all fields and sign the form as indicated below a	and email to rs.gmbmitgfca@medtronic.com.	
Customer Facility Name:		
Customer Number:		
Facility Contact Name and Title:		
Customer Signature:	Date:	
For questions, please contact your Medtronic Representative or Note: The Address may continue to receive reminders of this no	•	