



Foetal Transducer Repair Form

FTR No.

Please ensure Sections 1 & 2 are fully completed & enclose with the foetal transducer(s) you send to us for repair. Failure to complete accurately & to provide an official Purchase Order No. may delay the repair service.

1 Customer/Hospital Contact & Order Details

Contact Name		Customer Order No.	
Position		Date	/ /
Hospital/Trust			
Department			
Return Address			
	Postcode		
Email		Telephone	Ext.

2 Items for Repair – please ✓ the appropriate brand/transducer type, enter the respective Serial No. & any known fault

Item	✓ Brand		✓ Type		Serial No.	Known Fault
	GE/Corometrics	HP/Philips	Ultrasound	Toco		
1						
2						
3						
4						
5						

Signature of release:

I hereby verify that the above information is correct and I am sending these items to Walters Medical for repair. I also verify that the products in question have been decontaminated.

Signature _____ Print Name _____ 



3 Walters Medical use only – Enter FTR No. in box above

[illegible]

WMF.011.FTRF v8.26

Please complete and return form and transducer(s) to:
Walters Medical Ltd, 30 Campus 5, Third Avenue, Letchworth Garden City, Hertfordshire, SG6 2JF
Tel: 0845 6800 377 Email: repairs@waltersmedical.co.uk Web: www.waltersmedical.co.uk