

Product Security Issue Report Form

*Indicates required field

First Name*

Last Name*

Email Address*

Phone Number*

Organization/Institution*

Version number of the potential affected product*

What is the potential vulnerability you wish to report?*

(Please include technical details and if possible, include a proof of concept.)

How can an attacker exploit this potential vulnerability?

(Explain conditions necessary to exploit.)

What can an attacker gain by exploiting this vulnerability? What is the impact? Can an attacker gain additional privileges?

Did you utilize any specific tools or techniques?

If confirmed, would you be interested in a coordinated public disclosure with Seno Medical?

Additional Comments:

