**GP Letter Template**

 [Date]

[Dr Name]

[Dr Address]

Dear Dr [xxx],

**Re: [Study Title]**

 **[Study Identified i.e. EurdaCT No. or REC No.]**

 **[Patient Name , Address, Date of Birth]**

The above patient has kindly agreed to take part in a clinical trial entitled: [Study Title]. This is a [brief description of study e.g. randomised placebo-controlled study investigating]. The study, approved by [name of REC and/or the MHRA] is being conducted by [CI and job title].

The purpose of the study is to [details of what the patient is expected to do, any dose escalation, no. visits to clinic, etc.]

A copy of the participant information sheet is enclosed for your information. Should you have any questions regarding this study, please do not hesitate to contact me by email [email address], or telephone [number].

Yours sincerely,

[CI Name]

[CI Job Title]