To be printed on local hospital headed paper

Title First name Surname
Address line 1
Address line 2
County
Postcode

<insert date>

Dear *<insert patient's title(s) and surname(s)>*

Re: The EXAKT Study

I am *<insert name and job title>* who *<personalise this section and add whether you looked after the patient and/or discussed the study with them in hospital or via telephone, if applicable>*, in *<insert hospital name and randomisation month>*.

We are contacting to you to ask for your permission to use information about your hospital stay in the EXAKT study. EXAKT is a research study looking at how skin tone affects the accuracy of pulse oximeters. All information will be used to help improve the care of future patients.

Enclosed is an information sheet which describes the research and also a consent form.

We would be grateful if you would complete the consent form to confirm whether or not you wish for your information to be used in the EXAKT study and return it to us in the stamped addressed envelope provided.

If we do not hear back from you within four weeks, then we will use the information in the study, but you are free to let us know otherwise at any point.

If you would like to talk to someone about EXAKT then please call *<insert name>* on *<insert phone number and time available>* or email <insert email of person>.

Thank you for taking the time to consider this request.

Yours sincerely
<insert signature>

<insert full name>
<insert job title>

Encs: Patient Information Sheet
Postal Consent Form