

*(To be printed on hospital headed paper)*

**GP LETTER**

**Study title:** A randomized trial for adults with newly diagnosed acute lymphoblastic leukaemia

**Short title:** UKALL14

**Version:** 1.0

**Date** 11.11.09

Trial Number: xxx

Dear Dr \_\_\_\_\_

Your patient, \_\_\_\_\_ (date of birth dd/mmm/yyyy), has newly diagnosed Acute Lymphoblastic Leukaemia (ALL) and has consented to participate in a study to find out how to best treat patients with Acute Lymphocytic Leukaemia.

Please find enclosed a copy of the patient information sheet for this trial.

You will be kept up to date with your patient's progress but if you have any concerns or questions regarding this study please contact the responsible doctor:

Dr \_\_\_\_\_ at

\_\_\_\_\_ (Hospital)

Tel: \_\_\_\_\_

Kind regards,

Name

Position