

Instruction: This is a model letter. Adapt to fit your facts and circumstances.

Return address:  
Name  
Address Line 1  
Address Line 2  
City, State Zip Code

Date

Name  
Company  
Address Line  
City, State Zip Code

Re: Medical Consent Letter with Enclosed Form

Dear :

Enclosed you will find the medical consent form for {operation/procedure/test}. I have agreed to the terms of the consent. Please contact me if you have any questions regarding this form.

Sincerely,

N A M E

Enclosure