

GP Letter and Subject Verification

Dear Dr

Re: The UK study to identify the inherited cause of high blood pressure

I am writing to ask for your help with our investigation into the inherited cause of high blood pressure. With ethical approval we have been searching for families with two healthy affected/unaffected parents and a child with high blood pressure. The following patient in your practice is a member of a family we are studying and has consented to help.

Name:

Address:

I wondered since this patient has given their consent and we believe them to be hypertensive, whether you or your practice nurse could help us by completing the attached form and sending it back to us in the enclosed pre-paid envelope.

If this subject takes part in the study, we will be able to provide you with the following results: 24 hour Ambulatory blood pressure, 24 hour urine, blood haematology/biochemistry, electrocardiogram and height/weight results. We will not be offering any advice or alter any treatment as a consequence of results we receive. We will provide you with the results and leave any treatment modifications to you. All information the patient and you supply will remain confidential.

The patient is aware that we have contacted you and are waiting to hear from you. We very much hope you will assist us with this study by completing the enclosed questionnaire. Should you wish to know more about the study, please do not hesitate in calling one of the research nurses working in your area - they are; Jane Pheby, Jo Kent, Janine Pembroke and Sandy Colville-Stewart on 0207 882 3421 (3425/3424).

With thanks for your help.

Yours sincerely,

Jo Kent, Jane Pheby, Janine Pembroke & Sandy Colville-Stewart

GP, Pre-diagnosis blood pressure readings

Date of Birth - -

Patient Name
Address
.....
.....
.....

Postcode

Has this subject been diagnosed as suffering from Essential Hypertension Yes No

If No, do they suffer from a condition which would give rise to High Blood Pressure readings Yes No

At what age was this subject diagnosed as having Essential Hypertension Years

How was the subjects blood pressure recorded 1. Single reading

2. Three seperate readings

Blood pressure on diagnosis 1. Date / BP

2. Date / BP

3. Date / BP

If no pre-diagnosis blood pressure readings are available, what are the subjects highest BP readings on treatment

Is there any reason why this subject should not donate a blood sample for this study Yes No

If YES, why not?
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Thank you for returning this form, all results obtained as part of the study will be forwarded to you shortly

