







Primary Care Clinical Trials Unit,
Nuffield Department of Primary Care Health Sciences,
University of Oxford,
Radcliffe Observatory Quarter,
Woodstock Road,
Oxford,
OX2 6GG

XXX insert date

Dear XX,

Thank you for letting us know that you would like to withdraw from taking the trial medication/need to return some of the trial medication (Delete as appropriate). Enclosed is a pre-paid Royal Mail return envelope for you to send the unused medicine back to us. Please take this to a Post Office and obtain proof of postage for the tracking information, you will not need to pay for this. If you are isolating this can be taken by someone else on your behalf or can wait until your isolation period ends.

Thank you for taking part in the PRINCIPLE study, if you have any questions please do not hesitate to get in touch.

Kind Regards,

**INSERT FIRST NAME** 

**INSERT NAME** 

**INSERT ROLE** 

On behalf of the PRINCIPLE Trial