Dear patient,

This is an important statement about your appointment, please read all documents fully.

We enclose an appointment to attend the [name of Department] at Salisbury District Hospital for [a test]. We want to reassure you that we are working hard to minimise the risk of you contracting COVID 19 virus by attending the hospital. Please do not attend your appointment if you have symptoms which could be caused by the virus or have been in contact with anyone who has the virus in the last 2 weeks.

The [doctor] who performs your [test or name of procedure] will be wearing a face mask, apron and gloves. Depending on the test we may also ask you to wear a mask.

We will be spacing the appointments more than usual so you should not have to wait and will be able to leave immediately after your appointment. We would ask you to arrive on time – but please do not arrive early as we want to keep the number of patients in the waiting area as small as possible to allow social distancing. If you attend with a relative please ask them to wait in the carpark unless you need help to walk to the [name of department].

Please access the [name of department] from the hospital’s main corridor; other access routes have been closed. On arriving at the [name of department] you will be greeted and screened for symptoms of COVID-19 including your temperature by a member of the outpatient nursing team.

We have a backlog of patients waiting for tests so please help us by ringing 01722 336262 extension [xxxx] to cancel if you cannot attend.

[Name of consultant]

[name of department]

Salisbury NHS Foundation Trust