|  |  |  |
| --- | --- | --- |
|  | [GP Surgery][First address line] [Second address line] [Town/city] [County Postcode] | T [000 000 0000]F [000 000 0000] |
| [Date] |  |
|  |  |

Dear [Name]

### Your annual flu vaccination is now due

Your GP recommends that you have the flu jab. It is the best protection against an unpredictable virus which can cause serious illness and death. The vaccination is **free**. Last year, most people offered the vaccine chose to be immunised.

Our records show you have or have had a neurological (brain) condition. Flu can make these conditions worse as a result of fever and difficulty breathing which are common symptoms of flu. It can also lead to problems with other organs. The risk of death from flu is 40 times higher in those with neurological disease.

**Please phone [insert practice phone number] to book an appointment for your flu vaccination by [insert date eg: 2 weeks after likely date of receipt of letter] – you can record the details overleaf**

For more information visit: [www.nhs.uk/flujab](http://www.nhs.uk/flujab)

Yours sincerely,

[GP name]

[Position/title]

**-------------------------------------------------------------✂------------------------------------------------**

Please record the date and time of your vaccination appointment here and put it in an obvious place in your home.

Vaccination appointment: **on: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ at \_\_\_\_\_\_\_\_\_am/pm**

 **Date Time**