

This is a template and should be copied onto letter headed paper and be completed by the registered medical practitioner attending the person who is ill.

Please state your full names and qualifications as registered by the General Medical Council. This letter must be signed and dated by the doctor in medical attendance.

Dear

Re: ..... (patient name)

I am writing to confirm the following points with regards to the proposed marriage of the above name patient:

- a. I am the doctor in medical attendance on the above name patient;
- b. The above named patient is seriously ill and not expected to recover;
- c. The above named patient cannot be moved to a place registered for marriages;
- d. The above named patient understands the nature and purport of the marriage ceremony.
- e. I am registered with a licence to practice and my GMC reference number is

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Please do not hesitate to contact me if I can be of further assistance.

Yours faithfully

Signed :

Full Name:

Dated :