

Your name
Your full address
Telephone number
Email address

Name of medical provider
Their full address

Date

Dear Sirs

Re: Formal Complaint

Patient's name, date of birth and NHS number (if NHS treatment)

The purpose of this letter is to make a complaint regarding [the treatment I received] at [name of medical provider] on [date(s)]. [If you are complaining on someone else's behalf, it is useful here to explain what your relationship is to the patient].

The following is a chronological account of the events of what has happened:

- [It is useful to provide some background information, setting out what happened leading up to the treatment including any relevant medical history and the reasons for the treatment].
- [Provide full details of the treatment provided and explain what has happened in as much detail as possible, including where possible precise dates].
- [If you have already taken steps in relation to the complaint, such as making an informal complaint, set these out here].

The reason(s) why I am dissatisfied with the treatment/the concerns which I have are [set out what your reasons are for making the complaint in as much detail as possible. For example, you might include the reasons why you believe the treatment/care was of a poor standard/went wrong].

As a consequence of the treatment/incident, I have suffered in the following ways:

- [Include the injuries which you have sustained as a result and any ongoing treatment which are receiving].
- [Include any financial loss which you have incurred as a result of the treatment such as time taken off work].

I am seeking [explain the outcome which you are seeking by making a complaint; for example, an apology/explanation of what happened/questions which you would like to be answered].

I would be grateful if you could investigate the concerns raised in this letter and provide a formal response.

Yours faithfully,

Enclosures [If possible, attach any documents or photos which you have to support your account]