

«Pat\_Title» «Pat\_FirstName» «Pat\_LastName»  
«Pat\_AddressLine1»  
«Pat\_AddressLine2»  
«Pat\_Town»  
«Pat\_County»  
«Pat\_Postcode»

Date

Dear «Pat\_Title» «Pat\_LastName»,

**Patient ID: «ID\_Number»**

**Appointment Date:  
«Date\_of\_Attendance»**

Height: «Height»m

Weight: «Weight»kg

Body Mass Index: «BMI»kg/m<sup>2</sup>

Waist Circumference: «Pat\_Height»cm

Blood pressure:

«Systolic»/«Diastolic»mmHg

Cholesterol (body fats): «TC»mmol/L

Fasting Glucose: «M\_0\_Glu»mmol/L

120 Minute Glucose: «M\_120\_Glu»mmol/L

**Normal Values**

Body Mass Index: Below 25kg/m<sup>2</sup>  
Below 23kg/m<sup>2</sup> if South Asian  
Blood Pressure: Below 140/85mm/Hg  
Cholesterol: Below 4mmol/L\*  
Fasting Glucose: Below 6mmol/L  
120 Minute Glucose: Below 7.8mmol/L

I would like to thank you for taking part in the Lets Prevent study.

I would like to advise you that your glucose tolerance test out of the normal value range (as indicated above) and suggests that you may have diabetes. In order that we can confirm this diagnosis we need to repeat the glucose tolerance test.

Therefore please can you telephone the Let's Prevent team on [REDACTED] and make a further appointment for a re-screen.

Yours sincerely

**Dr**

**Research Registrar, Diabetes & Endocrinology**

*\*\*the optimal cholesterol level is below 4mmol/L, NICE guidelines indicate below <5mmol/L.*