

Hospital address

Patient name and address

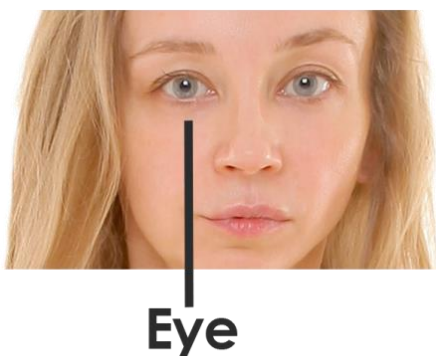
Dear (Patient name)



This letter is about your recent appointment at the eye clinic.



At your appointment, we filled in a form called a Certificate of Vision Impairment (CVI). The form is with this letter. Please keep it safe.



The form explains that you have a problem with your eyesight.



The form can help you to get the support you need.

This can be help with:



- Benefits and money
- Getting around safely
- Practical advice and support



Your local council will receive a copy of your form. They will contact you to talk about the support you need.

If you do not hear from your local council in the next 2 weeks, please contact XXX.

Yours sincerely