

Clinical Trial Feedback Request

Date: [Insert Date]

To: [Participant's Name]

Address: [Participant's Address]

Dear [Participant's Name],

We hope this message finds you well. As part of our ongoing commitment to improving our pharmaceutical product, [Product Name], we are reaching out to gather feedback from participants like you who took part in the recent clinical trial.

Your insights are invaluable to us, and we would greatly appreciate it if you could take a few moments to share your experiences, thoughts, and any suggestions you may have regarding the trial process, product usage, and overall satisfaction.

If you are willing to participate, please reply to this email or contact us at [Contact Information] by [Response Deadline]. We assure you that your feedback will be kept confidential and used solely for the purpose of enhancing our product.

Thank you for your time and contribution to this important research.

Sincerely,

[Your Name]

[Your Title]

[Company Name]

[Company Contact Information]