# Letter to a worker's doctor

To: [doctor’s name]
[Doctor’s address]

From: [your name]
[Name of your organisation]
[Address of your organisation]

[Today’s date]

Dear [doctor’s name]

I am writing for information about your patient [name of worker], who lives at [address of worker].

I am [a / an] [your role] at [name of your organisation]. Your patient works as [a / an] [worker’s job title] at the organisation.

I have attached the worker’s permission for me to make this request. They [want / do not want] to see the report before you send it to me.

I would like information in order to manage [sick pay / plan work / support the worker].

I would like information about:

[List the things you’re asking about. For example:

* their absence from work, including absence dates
* their health condition, such as a broken wrist]

Their role involves:

[List any worker tasks or responsibilities the condition might affect. For example:

* standing for long periods
* heavy lifting
* working evenings
* using a keyboard
* driving]

I would like to know:

[List any other information you need. For example:

* the condition's impact on carrying out their tasks or responsibilities
* whether the worker is disabled
* reasonable adjustments that might be needed
* a likely date the worker will return to work
* if a phased return to work, change of duties or other support might help the worker]

Let me know if I need to pay a fee for this information.

If you’re unable to provide the requested information quickly, please reply to confirm you’ve received this.

Please reply [by email / by post - a stamped addressed envelope is enclosed].

Yours sincerely,

[Your name]
[Your telephone number]
[Your email address]