

Dear \_\_\_\_\_,

I trust this letter finds you well. I am writing to inform you that

\_\_\_\_\_ has been under my care for medical reasons. After a thorough examination, my professional recommendation is that \_\_\_\_\_ be placed under work restrictions.

|                      | <b>Employee Details:</b> |
|----------------------|--------------------------|
| Name:                |                          |
| Date of Birth:       |                          |
| Position/Department: |                          |
| Medical Condition:   |                          |

|                          | <b>Work Restriction Details:</b> |
|--------------------------|----------------------------------|
| Work Hours:              |                                  |
| Physical Limitations:    |                                  |
| Workspace Modifications: |                                  |
| Task Restrictions:       |                                  |

**Duration of Work Restriction:**

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**Follow-up Appointments:**

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**Communication and Confidentiality:**

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Thank you for your understanding and cooperation.

Sincerely,