## APPENDIX M THANK YOU LETTER FOR REFERRALS

This thank you can be conveyed either by email or regular mail.
Date
[Name of Referring Physician], M.D. Address Address
Re: Patient Name (Date of Birth)
Dear Dr. [Physician Name]:
Thank you for referring [PATIENT NAME] to me for a psychiatric evaluation. evaluated [him/her] on [DATE]. [Mr./Ms NAME] reported experiencing [INSERT CHIEF COMPLAINT]. Based on this information and my evaluation, my diagnosis is [INSERT DIAGNOSIS]. I will be seeing [Mr./Ms. NAME] [XX] times per [week/month] for [psychotherapy/medication/other INSERT TREATMENT PLAN].
I will follow up with you if there are any major changes to this treatment plan Please feel free to call me if you have any questions concerning this patient.
Sincerely,
[Your Name], M.D.