

Sample Letter to Physician Regarding Healthcare Action Plan

(Date)

Dear Dr. _____:

The _____ school district has been asked to provide specialized health care for your patient, _____, date of birth _____.

If it is essential that this procedure be provided during school hours, we will need a written order on file in the student's health record.

Attached is a tentative health care plan for this student, including a description of a standardized procedure. Please review these materials, and the procedure guidelines, make written comments and provide the requested information to guide us in providing a safe environment. We will incorporate your comments and make adjustments in the procedure as directed by you. Services will begin when we have the necessary orders and adequately trained personnel in place.

Please feel free to contact _____, who is assuming responsibility for the management of the student's health needs in our school. She (he) can be reached at _____ (add best time to call, if this is pertinent).

Sincerely,

Administrator or School Nurse