

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]
[Employer's Name]
[Company Name]
[Company Address]
[City, State, Zip Code]

Dear [Employer's Name],

I am writing to inform you that I have been diagnosed with Lyme disease as of [Date of Diagnosis]. As this condition may affect my work capacity, I wanted to ensure that you are aware of my situation.

According to my healthcare provider, this condition may cause [briefly explain potential symptoms that could affect work]. I am committed to managing my health and working with my medical team to ensure the least disruption to my work responsibilities.

I may require some adjustments to my schedule or workload during my treatment and recovery. I would appreciate the opportunity to discuss this further and explore any accommodations that may be necessary.

Thank you for your understanding and support during this time. I look forward to continuing to contribute to the team while managing my health.

Sincerely,

[Your Name]
[Your Job Title]