

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]
[Recipient's Name]
[Recipient's Title]
[Facility/Practice Name]
[Facility Address]
[City, State, Zip Code]

Dear [Recipient's Name],

I hope this letter finds you well. I am writing to formally request a physical therapy evaluation for [Patient's Name], who is experiencing [brief description of the condition or symptoms].

After an initial assessment, I believe that a thorough evaluation by a licensed physical therapist is crucial for developing an appropriate treatment plan that addresses [Patient's Name]'s specific needs.

Please let me know the available dates for the evaluation and any necessary paperwork that should be completed beforehand.

Thank you for your attention to this matter. I look forward to your prompt response.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]

[Your Title/Relationship to Patient]