Your Name

Your Name
phone number
email

Re: Referral for [Client name], [Date of birth]

Dear [Clinician Name] or Plutonic,

I am referring [Client name], a [brief descriptor, e.g., "25-year-old, queer-identified female", with she/her pronouns] who has been under my care for [duration] for [reason for referral, e.g., "anxiety and depression"]. The client seeks [specific need, e.g., "Process unresolved trauma"].

[Provide a concise summary of the client's relevant history, including presenting symptoms, treatment received, and notable findings.]

The purpose of this referral is to [specific goals, e.g., "address unresolved trauma using EMDR" or "evaluate for medication management"].

[Include any additional relevant details and emphasize your availability for collaboration.]

Please let me know if you need more information. You can reach me by phone at [phone number] or [email address]. As a warm hand-off, I am happy to discuss the client in more detail.

Thank you for your time and expertise in assisting [Client name].

Sincerely,
[Your full name]
[Your credentials]