

SAMPLE PHYSICIAN LETTER

(Date)

To: Whom It May Concern

Re: (Patient's Name)

I, (Professional's Name) am a (doctor/health care professional, etc.) with (name of facility). I have treated (patient name) since (date) for a (type of) condition.

(Patient's name) has a disabling condition which is exacerbated by their exposure to secondhand smoke.

Symptoms including (list symptoms) substantially limit him/her in one or more major activities of his/her life. Some of these major activities include (sleeping, eating, working and breathing).

Secondhand tobacco smoke – the smoke that comes from a lighted tobacco product or from a person who is smoking tobacco – contains more than 4,000 chemicals. Of these chemicals, 11 are known cancer-causing poisons and 250 are known toxins. The 2006 U.S. Surgeon General's Report, The Health Consequences of Involuntary Exposure to Tobacco Smoke, concluded that there is no risk-free level of secondhand tobacco smoke, and the only way to protect people from the dangers of secondhand tobacco smoke is to eliminate the smoke exposure.

A minimum of 38,000 and up to 65,000 deaths occur each year in the U.S. as a result of diseases caused by exposure to secondhand tobacco smoke. Thousands of other people in the U.S. suffer from conditions caused by or made worse by secondhand tobacco smoke. As many as 175 Montanans die annually from exposure to secondhand tobacco smoke. Secondhand tobacco smoke seeps through light fixtures, electrical outlets, ventilation systems, doorways and open windows.

If my patient is not protected from secondhand smoke, his/her symptoms will not abate and may worsen.

Sincerely,

(Physician's Name)