[date]

Mr/Ms [requestor’s name]

[Their role]

Office of the Health and Disability Commissioner

Dear Mr [surname]

**Re: [Patient name]**

**Ref: C20HDC…**

I write in response to your letter dated xxx. Mr L has raised concerns about the care I provided him regarding XXX. I am sorry that…

I graduated [please add credentials including year and university]. [please add role and how long you have been the patient’s doctor]

Background

[add any relevant background information]

Consultations

On [date] I first saw [patient name] with XXX. [please briefly describe the subjective (presentation)]

On examination (if relevant)…

My assessment ….

Plan…

Please chronologically detail each of the episodes of care in a similar format being aware that another clinician will be reading it

Specific Questions

Answer each specific question if not answered in the chronology

Changes Made

Please add any actions you have taken eg reading, CME, speaking to colleagues, other specialists. Then add anything you would do differently as result of this case, if anything.

Add final acknowledgement

Sincerely