Mental Health Doctors Note

[Date of Evaluation]

[Patient’s Name]

[Patient’s Date of Birth]

[Other identifying information as needed]

To Whom It May Concern,

I am writing to provide a mental health doctor's note for [Patient’s Name], who was evaluated on [Date of Evaluation]. Based on my clinical evaluation and diagnostic criteria, I have diagnosed [Patient’s Name] with [Mental Health Condition], which has resulted in [Brief description of how the mental health condition is impacting the patient].

I recommend the following treatment plan for [Patient’s Name]: [Summary of the treatment plan, including medication, therapy, or other interventions as appropriate]. In order to support [Patient’s Name]'s mental health, the following accommodations or restrictions are necessary: [List of any necessary accommodations or restrictions, such as time off work, reduced workload, or reduced academic load].

Please consider this note as documentation of [Patient’s Name]'s mental health condition and the recommended treatment plan. If you have any questions or concerns, please do not hesitate to contact me.

Sincerely,

[Healthcare Provider Name and Title]

[Healthcare Provider Contact Information]