**June 20, 20XX**

**Dr. Stephen Shay**

**Cedar Springs Medical Associates**

**2650 Cedar Springs Rd.**

**Knoxville, TN 73257**

**To:**

**Ms. Tracy Jordan**

**360 West Campbell Rd.**

**Knoxville, TN 73257**

**Dear Ms. Jordan,**

It is my belief that the relationship between a physician and patient is an essential aspect of quality medical care. If trust and communication are missing, it limits my effectiveness as a physician. Unfortunately, I feel that these critical elements are missing in our doctor-patient relationship. As my primary concern is for your health and well-being, I believe it is in your best interest to seek the services of another physician. As of July 1, 20XX, I will no longer serve as your primary care physician.

As we have discussed on numerous occasions, I believe strongly that you should refrain from certain activities in order to return to full health. While I realize your leg injury was a devastating blow to your career, I sincerely believe the injury will heal if you follow medical advice. Following your surgery, I specifically recommended that you refrain from walking on the leg for a period of 1 week. I asked you to use crutches during your rehabilitation and to utilize the services offered by a rehabilitation clinic. Although rehabilitation is covered by your insurance policy, you chose to ignore my advice.

During your appointment on June 18, 20XX, you informed me that you had engaged the services of a professional trainer. This trainer has recommended prolonged and intense workouts that I strongly feel may cause irreparable damage to the muscles and joints involved in your injury. As I have communicated to you repeatedly, your injury will require time to heal and the care of a trained rehabilitation professional. It is my belief that you are relying on pain medications to engage in the activities recommended by the trainer you hired. Aside from allowing you to hurt yourself further, these medications are addictive and I will not honor future refill requests.

I encourage you to seek a new primary care physician as soon as possible. I will continue to serve as your physician until July 1, 20XX. Following this date, I will treat you on an emergency basis only through the end of July 20XX. You may contact the Knoxville Medical Association for a referral for a new physician. I will be happy to send a copy of your medical records to your new doctor provided you sign and return the medical release form included with this letter. I wish you all the best going forward.

**Sincerely,**

**Stephen Shay**

**Dr. Stephen Shay**

**Cedar Springs Medical Associates**

Encl: Medical Release Form