

Requesting a Psychiatric Evaluation Appointment – Model Letter

[Insert Date]

To: [Psychiatrist's Name]

[Clinic/Hospital Name]

[Address Line 1]

[Address Line 2]

[City, State, Zip Code]

Dear [Psychiatrist's Name],

I am writing to request an appointment for a psychological evaluation for my child, [insert name here]. I have noticed he/she has been experiencing [briefly describe symptoms or concerns], and I believe that a professional evaluation would be beneficial for their mental health.

Please let me know your available dates and times for an appointment. I am flexible with my schedule and can adjust to meet your earliest availability. Please provide me with some dates and times you have available for testing so I can check my schedule for what will work for both of us.

Thank you for your time and consideration. I look forward to your prompt response.

Sincerely,

[Your Name]

[Your Phone Number]

[Your Email Address]

Do you want support personalizing this letter? Reach out to PPMD at ppmd.org/contact to connect with a Family Partner who can provide support and answer any questions.