

## Appendix B | Patient Notification Templates (with coverage)

Dear Patient,

I wish to inform you that I will *[on leave/away from my clinic]* from *[start date]* to *[end date, if known]*

During my absence, I am pleased to share that Dr. *[Name]* has kindly agreed to provide care in my place. Dr. *[Name]* is a compassionate and skilled physician who will begin seeing patients on *[start date]*.

If you currently have an appointment booked, *[provide information for patients who currently have appointments – will these be with the new physician or will this need to be rebooked]*

To schedule an appointment with Dr. *[Name]*, please contact *[clinic contact details]*.

Thank you for your understanding, and I look forward to seeing you upon my return.

Sincerely,

*[Your name]*

## Appendix B | Patient Notification Templates (no coverage)

Dear *[Patient]*,

I want to inform you that I will be *[on leave/away from my clinic]* from *[start date]* to *[end date, if known]*.

During my absence, please access alternative health-care services:

- **Health811** (Ontario Telehealth) for medical advice: Dial 811 or visit <https://health811.ontario.ca>
- **Walk-in clinics** for non-urgent concerns
- **Urgent care centers** for conditions that require prompt attention but are not life-threatening
- **Emergency services** (Call 911 or visit the nearest hospital) for serious or life-threatening situations

*[please add any information related to obtaining care in your absence, such as test results, prescription renewals or specific services in your community],*

Thank you for your understanding, and I look forward to seeing you upon my return.

Sincerely,

*[Your name]*