Smiley Dental Clinic

555 Central Ave. NY 444555

Date:

To Whom It May Concern

This is to clarify that Sarah Abraham (has/had) an appointment with us at 10 o’clock. Please excuse her absence at work due to the medicine that I have prescribed. They have side effects that cannot allow her to handle any duty.

I have put her on bed rest for 3 days and she may return to work on 00/00/00.

Sincerely

(Doctor’s signature)

Doctor Ray