

# Concern Regarding Vision Therapy Progress

Date: [Insert Date]

To: [Therapist's Name]  
[Clinic/Practice Name]  
[Clinic Address]  
[City, State, Zip Code]

Dear [Therapist's Name],

I hope this message finds you well. I am writing to express some concerns regarding the progress my child, [Child's Name], has been making in vision therapy. Over the past [duration], I have noticed [specific observations or behaviors that have raised concerns].

While I understand that progress can vary from person to person, I am eager to ensure that my child is on the right track and receiving the necessary support. I would appreciate your insights on the following:

- [Concern 1]
- [Concern 2]
- [Concern 3]

Could we schedule a time to discuss my concerns in detail? I believe a conversation would greatly help in understanding the therapy's effectiveness and any adjustments that may be needed.

Thank you for your attention to this matter. I look forward to your response.

Sincerely,  
[Your Name]  
[Your Contact Information]  
[Your Address]