

# Request for Referral for Substance Abuse Counseling

Date: [Insert Date]

To: [Recipient's Name]

[Recipient's Title]

[Organization/Facility Name]

[Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I hope this message finds you well. I am writing to formally request a referral for mental health services, specifically for substance abuse counseling, for [Patient's Full Name], who is currently under my care.

[Patient's Full Name] has been experiencing challenges related to substance use, and I believe that professional counseling will be beneficial for their recovery process. Based on our discussions and assessments, I am confident that [he/she/they] would greatly benefit from the expertise offered at your facility.

Please find attached the necessary documentation, including relevant medical history and current evaluations that support this referral.

Thank you for your attention to this matter. I look forward to your prompt response and to partnering together in providing the best support for [Patient's Full Name].

Sincerely,

[Your Full Name]

[Your Title]

[Your Organization]

[Your Contact Information]