



Northwell Health System
North Shore University Hospital
Internal Medicine Department
300 Community Dr
Manhasset, NY 11030
(516) 562-0100

To whom it may concern,

I am writing to confirm that Patient _____ is currently under my medical care at North Shore University Hospital, and has been admitted here for the following dates _____. Due to the complexity and severity of this patient's multiple health issues, I am advising that they be excused from all work obligations and any travel for the listed time.

This exemption is necessary to ensure the patient's safety and well-being, as well as to allow them to focus on their recovery and treatment plan. I kindly request that you accommodate this request and excuse the patient from their duties.

If you have any questions or concerns regarding this matter, please do not hesitate to reach out to me or any of the medical providers at North Shore University Hospital. We are available to provide additional information and support as needed.

Sincerely,

North Shore University Hospital
300 Community Dr
Manhasset, NY 11030
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