

**Sample Letter for**

**NOTICE TO RECIPIENT OF DRUG AND/OR ALCOHOL ABUSE TREATMENT INFORMATION**

Use Facility Letter Head  
(See Directive #0008, "Use of Department Stationery & Business Cards")

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**NOTICE TO RECIPIENT OF DRUG AND/OR ALCOHOL ABUSE TREATMENT INFORMATION**

Date

Dear

The attached records include drug and alcohol abuse information pertaining to:

\_\_\_\_\_ Dept I.D. No. \_\_\_\_\_

This information has been disclosed to you from records whose confidentiality is protected by Federal Law. Further disclosure of this information without the specific written consent of the person to whom it pertains is prohibited. A general authorization for the release of medical or other information is NOT sufficient for this purpose.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name (Type or Print)

\_\_\_\_\_  
Title