

Request for Medical Referral

Date:

Physician Name

Address

City

State

Zip

_____ sought my services on _____
Client Name

for hypnotherapy to achieve their self improvement goals. As a Hypnotherapist, I offer vocational or avocational self-improvement, or work under referral of Doctors, Dentists or Psychologists. Because one or more of their stated goals may have a physiological basis, I am referring them to you for examination and referral. (Business and Professions Code 2908)

I ask for your referral for this client, not as your endorsement of hypnosis, but rather as your confirmation that you are aware of your patient's symptoms and goals and do not feel that seeking hypnotherapy for motivation to achieve those goals would in any way interfere with any necessary medical treatment or that hypnotherapy is in any way medically contraindicated for your patient.

I welcome your recommendations and referral so that I may be of continued service to my client. Your prompt reply is greatly appreciated.

Thank you.

Sheri Arechiga Cht
Hypnotherapist Name (Print)

Sheri Arechiga
Hypnotherapist Signature

(949) 491-0888
Phone