Date

Name

Address

City, State ZIP

Dear Dr. \_\_\_\_\_ and team (customize),

I’d like to take this opportunity to thank you for allowing us to care for your patients, and to let you know about some exciting developments at (practice name).

After many years and a highly distinguished career, (doctor name) has announced his retirement as of \_\_\_\_\_. He is currently completing a few cases and will remain available as valued counsel as the practice moves forward. In the same spirit with which he approached his work in the field, (doctor name) has helped me to transition into my role as primary provider and has trusted me with the support and care of the dentists and patients we serve in the (city) area.

(practice name) will focus on expanded (dental specialty) care. We will support the treatment pIans and other specialty care you prescribe for mutual patients. While we will no longer provide restorative procedures in house, I enjoy collaborating with colleagues on restorative and inter-disciplinary cases to meet all patients’ needs. At our facility, we will concentrate on periodontal maintenance, advanced gum disease, dental implants and IV conscious sedation to ensure our patients are treated conveniently, comfortably and successfully. In addition, we offer Botox injections to effectively relieve TMJ syndrome, migraine headaches and a wide range of facial pain symptoms, as well as laser assisted procedures to minimize treatment, improve outcomes and reduce recovery times associated with periodontal surgery. (will need customizing)

At our office you will see many of the same faces working with the same practices and insurances to provide many of the same procedures for our mutual patients. We welcome any well wishes you would like to extend to (doctor name) and any questions you may have for me. We are all here to ensure you know that supporting your practice and your patients’ health is our highest priority, and we look forward to continuing to work with you.

Sincerely,

(doctor name)

(practice name)