Sample Transfer of Medical Care Letter

(For Pediatric to Adult Care)

You can share this letter with your primary XLH doctor as an example of information that can be provided to your new doctor during the transition of care.

January 12, 2020

Dr. John Smith
123 Main Street
Anytown, New York 01234

Dear Dr. Smith,

Jane Davis is a 21-year-old patient of our pediatric practice who will be transferring to your care. The expected date of transfer to your practice is February 20, 2020.

Jane's primary condition is **X-linked hypophosphatemia (XLH)** – a rare, hereditary, progressive, and lifelong condition characterized by chronic hypophosphatemia due to increased fibroblast growth factor (FGF23) activity. Increased FGF23 and resultant phosphate-wasting may lead to musculoskeletal defects, muscular dysfunction, and dental abscesses.[1,2] Adults with XLH can experience pain, restrictions in range of motion, arthritis, fractures, hearing loss, tinnitus, and gait disturbances, which may limit or restrict physical mobility.[3] The XLH Network (xlhnetwork.org) is the advocacy organization for this community and has additional information and resources on the condition.

Jane's secondary conditions are: pain, bowing of her legs, enthesopathy, history of fractures, and dental abscesses. Please find attached a list of current medications and specialists involved in her care. I am also attaching a medical history form from my records and her current treatment plan.

I have cared for Jane since age three and am familiar with her condition and medical history. I would be happy to provide any assistance to you during the transition to adult care. Please do not hesitate to contact me by phone or email if you would like to talk or if you have questions.

Thank you very much for your willingness to assume the care of this patient. We will follow up to confirm that your office has received this information.

Sincerely,

Dr. Mary Jones
(555) 123-4567
mjones@mail.com

REFERENCES
1. Carpenter TO, Imel EA, Holm IA, Jan de Beur SM, Insogna KL. A clinician's guide to X-linked hypophosphatemia. J Bone Miner Res. 2011;26(7):1381-1388.
2. Ruppe MD. X-linked hypophosphatemia. In: Adam MP, Ardinger HH, Pagon RA, et al, eds. GeneReviews® [Internet]. Seattle (WA): University of Washington, Seattle; 1993-2017. https://www.ncbi.nlm.nih.gov/books/NBK83985/. Accessed December 9, 2019.
3. Skrinar A, Dvorak-Ewell, M, Evins, A, et al. The lifelong impact of X-linked hypophosphatemia: Results from a burden of disease survey. J Endocr Soc. 2019;3(7):1321–1334.