

Letter Head

Name

Title

Organization

Street Address

City, State Zip Code

[date]

Dear [Name]:

This letter is in support of the program degree proposal for the [program name] at [College or University], [School or Department]. The Division of [e.g., Pulmonary, Allergy, Critical Care and Sleep Medicine] has multiple and frequent interactions with Registered Respiratory Therapists who are critical to patient care. A program that would allow additional training and expertise would be of great benefit to patient care.

Managing patient care by directing other clinical providers using protocols represents the evolution of advanced practice in respiratory therapy. An advanced practice respiratory therapist could improve the delivery of safe, efficient, and evidence-based cardiopulmonary care by acting as a liaison between medical practitioners and clinical staff.

The role of the advanced practice respiratory therapist in [health system name] will function to serve as advanced practice providers in [list areas of need]. We anticipate a projected need of [number] advanced practice respiratory therapist(s) over 12 months and [number] over the next 5 years.

The [division] at [health system] endorses the [program name] at [college/university]. We feel that it will be a highly beneficial and sought out program. Thank you.

Sincerely,

[Name, credentials]

Title