

Sample Letter from Health Care Provider to Property Manager

[DATE]

[PROPERTY MANAGER'S ADDRESS
CITY, STATE ZIP]

Dear [PROPERTY MANAGER'S NAME],

This letter concerns one of my patients, [PATIENT NAME], who has come to my office complaining of [INSERT SYMPTOMS/ILLNESSES] from exposure to secondhand smoke coming into [his/her] apartment unit. For my patient's health to improve, I am prescribing a smoke-free living environment for [him/her].

To fulfill my prescription, I respectfully request that you consider adopting a smoke-free policy for the entire building in which my patient lives.

As a health care provider, I am very concerned about the harmful health effects experienced by those who are exposed to secondhand smoke. Prohibiting smoking in your buildings and on your property eliminates everyone's exposure to cancer-causing secondhand smoke.

The U.S. Surgeon General's Office has concluded that there is no safe level of human exposure to secondhand smoke. If you smell smoke, you are breathing in harmful chemicals, whether this occurs indoors or outdoors.

For the health and safety of [PATIENT NAME] and the other tenants in your building, please consider adopting a smoke-free policy. For more information and free help in creating a smoke-free policy, please consider contacting Iowa's Smoke-Free Homes project. Call 1-800-798-0203 or visit www.Smoke-FreeHomes.Iowa.gov.

Sincerely,

[PROVIDER NAME]
[PROVIDER CLINIC NAME]