

Sample Letter to Employer From Employee With Primary Immunodeficiency

Dear _____,

I have a type of primary immunodeficiency known as _____. This condition is usually genetic, is not contagious, and does not pose any risk to my colleagues.

This deficiency affects my body's immune system and leaves it incomplete or not fully functional. I am at higher risk of serious infections, such as pneumonia, meningitis, or bronchitis, if my condition is not effectively controlled.

I need to receive appropriate treatment in a timely manner to control this condition, prevent complications, and lead a normal lifestyle. Therefore, I may occasionally need to leave work to get an infusion of replacement antibodies, which is an integral part of my regular prescribed treatment to strengthen my immune system and prevent infections. This should generally not require me to be away from work frequently for treatment.

My job is very important to me, and I will certainly make up any time that I miss to receive my treatment. I look forward to discussing a work arrangement with you that will ensure that I meet all of my responsibilities while receiving my treatments. I would like to discuss if I am eligible for the Family and Medical Leave Act (FMLA).

Please let me know if you have any questions or concerns. I appreciate your consideration in this matter and fully intend to remain a productive and valuable employee.

Sincerely,

To Whom It May Concern:

This is to confirm that _____ (name of patient) has a primary immunodeficiency (PI). PI is a condition that can result in severe or recurrent infections. Treatment may include periodic infusions of immunoglobulin (immune system booster of antibodies). Appropriate treatment of any illness (such as an infection) must be addressed immediately to prevent complications.

Physician Signature

Date