Post-Injury Employee Notification Letter

| Employee Name: Employee Address: |
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| Dear |
| This letter is to formally notify you regarding the injury you reported on at . |
| Please be advised of the following steps: |
| Submit all relevant documentation related to the injury. Follow physician's recommendations and treatment plans. Maintain regular communication with your supervisor regarding your recovery status. Notify Human Resources of any work restrictions or accommodations needed. |
| If you have any questions or need further assistance during your recovery, please contact. |
| Sincerely, |
| Title: Department: |