**Form 3 [Typical no derogatory information]**

*OFFICIAL DEPARTMENT LETTERHEAD*

CONFIDENTIAL & PRIVILEGED COMMUNICATION

[Insert Date]

 RE: [Insert name of resident/fellow]

**Dates of Training**: from [Insert date] until [Insert date], for a total of [Insert 1-72] months of training in the [Insert name of program] [residency/fellowship] training program.

1. This, and all other communications with the State Board of Medical Examiners (“Medical Board”) is a protected communication between Quality Improvement Committees as contemplated under the Tennessee Patient Protection and Quality Improvement Act, Tenn. Code Anno § 63-1-150 and § 68-11-272 (as amended 2014) (PPQIA). Under the PPQIA, healthcare providers who act as a Quality Improvement Committee (QIC), when providing information to other QIC’s, are conferred immunity and a presumption of good faith, and the communication is confidential, privileged, and protected from direct or in-direct means of discovery, subpoena, or admission into evidence. The statute recognizes that a QIC includes state or local health professional associations, such as the State Medical Board. Accordingly, this submission is sent relying upon the confidentiality, privileges and immunity conferred under the PPQIA and any analogous statute or rule in your state, as well as the Health Care Quality Improvement Act, 42 U.S.C. Section 11101, *et seq*.,

2. I have no derogatory information to report. As a matter of College policy, we provide this letter in lieu of responding to any form requests for detailed evaluations of our past residents. Further, I cannot comment or respond to questions seeking my personal opinion or an opinion of the College regarding reliability or character, evaluations of abilities and skills, or unethical activity or professional liability issues.

 Sincerely,

[Insert name of program director], Program Director, Associate/Assistant Professor

Department of [Insert specialty name]

University of Tennessee Health Science Center