

[Doctor's Name/Medical Practice Name]
[Clinic Address]
[City, State, Zip Code]
[Phone Number]

Date: [Date]

RE: Paternity Leave Support for [Father's Name]

To Whom It May Concern,

I am the pediatrician for [Infant's Name], born on [Infant's Date of Birth]. I am writing to formally support the request for paternity leave for the father, [Father's Name].

Medical evidence suggests that the presence of a father during the neonatal period is crucial for the health and development of the infant. Paternity leave facilitates:

- Assistance with the infant's medical follow-up appointments and vaccinations.
- Support for the mother's physical recovery and mental well-being.
- Establishment of a secure bond and consistent caregiving routine.
- Monitoring of the infant's growth and nutritional needs.

I recommend that [Father's Name] be granted leave from [Start Date] to [End Date] to assist in the care of his newborn child during this critical stage of development.

Should you require any further information, please feel free to contact my office.

Sincerely,

[Doctor's Signature]

[Doctor's Printed Name]
[Medical License Number]