**Complaint About Unprofessional Behavior** 

Subject: Unprofessional Conduct by Dr. [Doctor's Name]

Dear [Department Head/Clinic Director],

I am filing this complaint regarding unprofessional and inappropriate behavior exhibited by Dr.

[Doctor's Full Name] during my appointment on [date] at [location].

During my visit, Dr. [Last Name] made several comments that were inappropriate and made me

extremely uncomfortable. Specifically, [describe the unprofessional behavior: made personal

comments unrelated to medical care, used inappropriate language, made discriminatory remarks,

discussed other patients inappropriately, appeared to be under the influence, etc.].

This behavior is unacceptable in any professional setting, particularly in healthcare where patients

are vulnerable and must trust their providers. I felt [uncomfortable, disrespected, unsafe, offended]

and cut the appointment short because the environment had become inappropriate.

As a result of this experience, I am unwilling to continue treatment with Dr. [Last Name] and request

immediate reassignment to another provider within your facility. I also believe this behavior warrants

investigation to determine whether other patients have experienced similar treatment.

I have documented this incident with [notes taken immediately after, witness present, etc.] and am

prepared to provide additional details if necessary. This type of conduct damages the

patient-provider relationship and reflects poorly on your facility.

I expect a prompt response addressing how this matter will be handled and confirmation of my

reassignment to a different doctor.

Sincerely.

[Your Full Name]

[Patient ID]

[Contact Information]

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