[DATE]

To Whom it May Concern:

Please be advised that [COMPANY] is a medical device company that employees health care workers who work in medical facilities that care for people at high risk.

[EMPLOYEE NAME], a [COMPANY] [JOB TITLE], whose identity can be confirmed by the presentation of a valid government issued identification together with this letter, is essential for [COMPANY] to fulfill its mission as a health care supplier and manufacturer of approved medical devices and health care services to hospitals and physicians.

[COMPANY] attests that the employee carrying this letter meets the criteria to be classified as health care personnel eligible for vaccination according to the France Ministry of Solidarity and Health. This employee’s essential work requires them to, among other things, be present in operating rooms and procedural suites where [COMPANY]’s life-saving medical devices are used, which places them in a setting with the potential for direct or indirect exposure to COVID-19 patients and infectious materials.

The France Ministry of Solidarity and Health states that:

Vaccination is now open to all volunteers over 50 years of age or with co-morbidities with a risk of severe COVID-19, belonging to the following categories:

* **health care professionals**, including liberal professionals;
* staff of health and medico-social establishments working with vulnerable people;
* firefighters;
* home helpers working with vulnerable people.[[1]](#footnote-1)

The requirement for this employee’s presence in the health care facilities below may be verified by the following contacts:

* [Hospital Contact]
* [ASC Contact]
* [Clinic Contact]
* [Lab Contact]

Although many of our employees can work from home and have been asked to do so, certain positions cannot be performed from home and are necessary for [COMPANY] to fulfill its critical health care operations.

If there are any questions or concerns, please contact [COMPANY CONTACT] at [COMPANY CONTACT PHONE#] or [COMPANY CONTACT EMAIL].

Sincerely,

[COMPANY EXECUTIVE SIGNATORY PRINTED NAME]

[COMPANY EXECUTIVE SIGNATORY TITLE]

1. <https://solidarites-sante.gouv.fr/grands-dossiers/vaccin-covid-19/je-suis-un-professionnel-de-sante-du-medico-social-et-du-social/article/liste-des-centres-de-vaccination-pour-les-professionnels-concernes> [↑](#footnote-ref-1)