

Medical Equipment Malfunction Complaint

Date: [Date]

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]

[Recipient Name]
[Title]
[Organization Name]
[Address]
[City, State, Zip Code]

Dear [Recipient Name],

I am writing to formally address a concern regarding the malfunction of [specific equipment name], which occurred on [date of the incident]. This equipment failure has resulted in [brief description of the impact on patient care or operations].

Details of the incident are as follows:

- **Date of occurrence:** [date]
- **Location of use:** [location]
- **Nature of malfunction:** [describe malfunction]
- **Impact on services:** [describe impact]

Given the critical nature of this equipment within our medical facility, I urge prompt action to resolve this issue. I request that a thorough investigation be conducted and a plan for repair or replacement be communicated at the earliest.

Thank you for your immediate attention to this matter. I look forward to your swift response.

Sincerely,

[Your Name]
[Your Title/Position]
[Your Organization Name]