

Medical Grievance Letter

Your Name: [Your Name]

Your Address: [Your Address]

City, State, Zip Code: [City, State, Zip Code]

Email: [Your Email]

Phone Number: [Your Phone Number]

Date: [Date]

To:

Medical Facility Name: [Facility Name]

Address: [Facility Address]

City, State, Zip Code: [Facility City, State, Zip Code]

Subject: Medical Grievance regarding Staff Conduct

Dear [Facility Administrator's Name],

I am writing to formally express my grievance regarding the conduct of [Staff Member's Name/Position] during my visit on [Date of Incident].

During my appointment, I experienced the following issues: [Briefly describe the behavior or incident that prompted your grievance]. This treatment was not only unprofessional but also affected the quality of care I received.

I believe that all patients deserve to be treated with respect and dignity, and I hope that my feedback will lead to improvements in staff training and conduct.

Thank you for addressing this matter. I look forward to your prompt response.

Sincerely,

[Your Name]

[Your Signature (if sending a hard copy)]