

After-Hours Medical Consultation Request

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Date]

[Doctor's Name]

[Doctor's Practice Name]

[Practice Address]

[City, State, Zip Code]

Dear Dr. [Doctor's Last Name],

I am writing to request an after-hours medical consultation regarding my recent health concerns. I have been experiencing [briefly describe your symptoms or concerns], and I believe it is important to address this matter as soon as possible.

Would it be possible to arrange a consultation at your earliest convenience? I am available on [provide your available dates and times].

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

Sincerely,

[Your Name]