

Medical Evacuation Request

Date: [Insert Date]

To: [Recipient Name]

[Recipient Title]

[Recipient Organization]

[Recipient Address]

Dear [Recipient Name],

I am writing to formally request a medical evacuation for [Patient Name], who is currently situated at [Patient Location]. Given the urgent nature of the medical situation, we require immediate assistance to facilitate a safe transfer to [Destination Medical Facility].

Patient Details:

- Name: [Patient Name]
- Age: [Patient Age]
- Medical Condition: [Brief description of the condition]
- Current Treatment: [Description of current treatments being administered]

Due to [reason for urgency, e.g., deteriorating health, lack of medical facilities], it is imperative that [Patient Name] receives urgent medical care. We believe that the evacuation should occur at the earliest possible convenience.

Please let us know the necessary steps to proceed with this request. We are prepared to provide any additional information or documentation required.

Thank you for your attention to this urgent matter.

Sincerely,

[Your Name]

[Your Title]

[Your Organization]

[Your Contact Information]