

# Request for Outpatient Procedure Scheduling

Date: [Insert Date]

[Recipient Name]

[Recipient Title]

[Medical Institution Name]

[Institution Address]

Dear [Recipient Name],

I hope this message finds you well. I am writing to formally request the scheduling of an outpatient procedure for [Patient's Name], who is under my care.

Procedure details:

- Procedure Name: [Insert Procedure Name]
- Preferred Date: [Insert Preferred Date]
- Time: [Insert Preferred Time]

Please let me know if these details are acceptable or if there are any alternative dates and times available. I appreciate your assistance in this matter, as it is crucial for the timely treatment of [Patient's Name].

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

Best regards,

[Your Name]

[Your Title]

[Your Contact Information]

[Your Institution Name]