

Inpatient Admission Notification

Date: [Insert Date]

To: [Caregiver/Family Member's Name]

From: [Healthcare Facility Name]

Subject: Admission Notification for [Patient's Name]

Dear [Caregiver/Family Member's Name],

We are writing to inform you that [Patient's Name], born on [Patient's Date of Birth], has been admitted to [Healthcare Facility Name] for geriatric care effective [Admission Date].

The admission has been arranged due to the following reasons:

- [Reason 1]
- [Reason 2]
- [Reason 3]

During their stay, the following treatments and assessments will be conducted:

- [Treatment 1]
- [Assessment 1]
- [Additional Care Details]

We understand that this can be a challenging time, and we want to assure you that [Patient's Name] will receive comprehensive care and attention from our dedicated staff.

Please do not hesitate to reach out to us if you have any questions or require further information.

Sincerely,

[Your Name]

[Your Title]

[Healthcare Facility Name]

[Contact Information]