

Inpatient Admission Notification

Date: [Insert Date]

To: [Recipient's Name]

[Recipient's Title]

[Recipient's Organization]

[Recipient's Address]

Dear [Recipient's Name],

We are pleased to inform you that [Patient's Name], date of birth [Patient's DOB], has been admitted to our facility for rehabilitation services effective [Admission Date].

Admission Details:

- **Admission Date:** [Insert Admission Date]
- **Diagnosis:** [Insert Diagnosis]
- **Room Number:** [Insert Room Number]
- **Expected Length of Stay:** [Insert Expected Length of Stay]

Please do not hesitate to contact our admissions department at [Insert Phone Number] should you have any questions or need further information regarding the patient's care.

Thank you for your attention, and we look forward to providing excellent care for [Patient's Name].

Sincerely,

[Your Name]

[Your Title]

[Your Organization]

[Your Contact Information]