

Inquiry for Immunotherapy Treatment Availability

Date: [Insert Date]

[Recipient's Name]

[Recipient's Title]

[Clinic/Hospital Name]

[Address]

Dear [Recipient's Name],

I hope this message finds you well. My name is [Your Name], and I am interested in exploring immunotherapy options for [specific health condition]. I have heard commendable things about your facility and would like to inquire about the availability of immunotherapy treatments.

Could you please provide me with information regarding the following:

- Types of immunotherapy programs offered.
- Eligibility criteria for patients.
- Current availability and waiting times for treatment.
- Costs and insurance coverage information.

Thank you for your assistance. I look forward to your prompt reply.

Sincerely,

[Your Name]

[Your Contact Information]

[Your Address]