

# Letter of Coordination

Date: [Insert Date]

To: [Recipient's Name]

[Recipient's Title]

[Recipient's Institution]

[Recipient's Address]

[City, State, Zip Code]

Dear [Recipient's Name],

We hope this letter finds you in good health. We are writing to coordinate care for our mutual patient, [Patient's Name], who has been receiving treatment for [Patient's Condition].

As part of our collaborative approach, we would like to discuss [specific details about the patient's treatment plan, any upcoming appointments, or required referrals]. It is essential to ensure continuity of care and that all involved parties are aligned in our efforts.

Please find attached the relevant medical records and details of the patient's treatment history. We believe that open communication will greatly benefit our patient's health outcomes.

We would appreciate the opportunity to speak with you further about this. Please feel free to contact us at [Your Phone Number] or [Your Email Address] at your convenience.

Thank you for your attention to this important matter. We look forward to your prompt response.

Sincerely,

[Your Name]

[Your Title]

[Your Institution]

[Your Phone Number]

[Your Email Address]