

# Medical Consultation Request Letter

Date: [Insert Date]

To,

[Physician's Name]

[Medical Practice Name]

[Address]

[City, State, Zip Code]

Dear [Physician's Name],

I hope this letter finds you well. I am writing to request a consultation regarding [briefly state the reason, e.g., ongoing health issues, a specific condition, etc.].

My name is [Your Name] and I am [briefly describe yourself, e.g., a patient referred by another doctor, etc.]. I would like to discuss my medical concerns and explore possible treatment options.

Please let me know your available times for a consultation. I am eager to receive your expert guidance on this matter.

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

Sincerely,

[Your Name]

[Your Contact Information]