

Request for Home Healthcare Assistance

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, ZIP Code]

[Your Email]

[Your Phone Number]

[Recipient's Name]

[Healthcare Agency's Name]

[Address]

[City, State, ZIP Code]

Dear [Recipient's Name],

I hope this letter finds you well. I am writing to formally request home healthcare assistance for [Name of the Patient], who is currently [briefly explain patient's condition or situation].

Given the circumstances, I believe that home healthcare services would greatly benefit [Name of the Patient] and improve their quality of life. I am particularly interested in services such as [list specific services needed, e.g., nursing care, physical therapy, personal care, etc.].

Please let me know the necessary steps to begin this process, including any required documentation or assessments. I am eager to ensure that [Name of the Patient] receives the care they need.

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

Sincerely,

[Your Name]