

Dear [Recipient's Name],

I hope this message finds you well. I am writing to inform you that I will be transitioning my healthcare to a new provider, [New Provider's Name], effective [Transition Date]. This decision comes after careful consideration of my healthcare needs.

During the transition, I kindly request that you transfer my medical records to [New Provider's Name] at the following address:

[New Provider's Address]

If you have any questions or need further information, please feel free to reach out to me at [Your Phone Number] or [Your Email Address]. I appreciate the care and support you have provided and look forward to a smooth transition.

Thank you very much for your attention to this matter.

Sincerely,

[Your Name]

[Your Address]

[Your Phone Number]

[Your Email Address]