

Adjustment of Emergency Contact Details

Date: [Insert Date]

To: [Hospital Name]

Address: [Hospital Address]

Dear [Recipient's Name],

I am writing to request an update to my emergency contact details in your hospital records. Please find the current details and the proposed changes below:

Current Emergency Contact Details:

Name: [Current Contact Name]

Phone Number: [Current Phone Number]

Relationship: [Current Relationship]

New Emergency Contact Details:

Name: [New Contact Name]

Phone Number: [New Phone Number]

Relationship: [New Relationship]

Please let me know if you require any further information or documentation to process this change. Thank you for your attention to this matter.

Sincerely,

[Your Name]

[Your Address]

[Your Phone Number]

[Your Email Address]