

# Emergency Contact Update

Date: [Insert Date]

To Whom It May Concern,

I am writing to update my emergency contact information for my hospital records.

**Patient Name:** [Insert Patient Name]

**Date of Birth:** [Insert Date of Birth]

**New Emergency Contact Name:** [Insert New Contact Name]

**Relationship to Patient:** [Insert Relationship]

**Contact Number:** [Insert Contact Number]

**Address:** [Insert Contact Address]

Please update my records accordingly. Thank you for your attention to this matter.

Sincerely,

[Insert Your Name]

[Insert Your Contact Information]