Hospital Stay Extension Request

Date: [Insert Date]

To Whom It May Concern,

I hope this message finds you well. I am writing to formally request an extension of my hospital stay due to ongoing family health concerns that require my immediate attention and support.

Details of the situation are as follows:

- **Patient Name:** [Insert Patient Name]
- Patient ID: [Insert Patient ID]
- Current Admission Date: [Insert Admission Date]
- **Requested Extension Period:** [Insert Requested Extension Dates]

The health issues affecting my family have created an urgent need for my presence to manage their care and ensure their wellbeing. I believe that extending my stay at the hospital will afford me the necessary time to address these concerns without compromising the quality of care I am receiving.

I sincerely appreciate your understanding and assistance in this matter. Please let me know if any additional information or documentation is required to process my request.

Thank you for your consideration.

Warm regards,

[Your Name]

[Your Contact Information]

[Your Relationship to the Patient]