

# Letter of Protest Against Unjust Medical Diagnosis Charges

Date: [Insert Date]

To,

[Recipient Name]

[Recipient Title]

[Medical Institution Name]

[Address]

Dear [Recipient Name],

I am writing to formally protest the medical diagnosis charges that were recently incurred following my visit to your facility on [Date of Visit]. After reviewing the detailed billing statement, I find several charges to be unjust and unwarranted.

Specifically, I am concerned about the following charges:

- [Charge Description 1]
- [Charge Description 2]
- [Charge Description 3]

Based on my understanding of the services rendered and the standard practices in the medical field, I believe these charges are excessive and do not accurately reflect the care I received.

I kindly request a thorough review of my case and an itemized explanation of the charges listed above. I believe it is crucial to maintain transparency and fairness in such matters.

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

Sincerely,

[Your Name]

[Your Address]

[Your Contact Information]