

Letter of Appeal for Certified Copies of Health Files

Date: [Insert Date]

To,

[Recipient's Name]

[Title/Position]

[Organization Name]

[Organization Address]

Dear [Recipient's Name],

I am writing to formally appeal for certified copies of my health files, which I believe are essential for my ongoing medical treatment. Despite my previous requests on [insert previous request dates], I have not yet received the necessary documents.

As a patient of [Doctor's Name or Institution Name], my health records are vital for understanding my medical history and for ensuring continuity of care. I kindly request your assistance in expediting this process.

Please find attached any required forms and identification, as per your organization's policy regarding access to health records.

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

Sincerely,

[Your Name]

[Your Address]

[Your Phone Number]

[Your Email Address]