

Dear [Recipient's Name],

I hope this message finds you well. I am writing to inquire about the scheduling of a gastrointestinal procedure that I need to undergo.

My physician, Dr. [Physician's Name], has recommended that I undergo the procedure due to [brief explanation of the reason, if necessary]. I would like to know the available dates and times for the procedure, as well as any necessary preparations I need to follow prior to the appointment.

Additionally, if you could provide information regarding any pre-authorization or documentation that may be required from my insurance provider, I would greatly appreciate it.

Thank you for your assistance. I look forward to your prompt response.

Sincerely,

[Your Name]

[Your Contact Information]

[Your Address]