

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Recipient's Name]

[Recipient's Title]

[Organization/Practice Name]

[Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I hope this message finds you well. My name is [Your Name], and I am writing to inquire about the availability of geriatric care consultations at your facility. As the need for specialized care for older adults continues to grow, I am interested in understanding the services you offer and the procedure for scheduling an appointment.

Could you please provide information regarding the following:

- Availability of consultations
- Appointment scheduling process
- Insurance and payment options
- Any specific documentation required prior to the consultation

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

Sincerely,

[Your Name]