

# Consultation Request for Neurological Issues

**Date:** [Insert Date]

**To:** [Neurologist's Name]  
[Neurologist's Address]  
[City, State, ZIP Code]

Dear Dr. [Neurologist's Last Name],

I am writing to request a consultation regarding ongoing neurological issues that I have been experiencing. Over the past [duration], I have noticed [briefly describe symptoms, e.g., persistent headaches, dizziness, memory loss, etc.]. These symptoms have become increasingly concerning, and I believe a professional evaluation is necessary.

My medical history includes [briefly outline relevant medical history, any previous treatments, medications, etc.]. I have discussed these issues with my primary care physician, [PCP's Name], who recommended that I seek your expertise in neurology.

I would appreciate the opportunity to discuss my condition further and explore potential diagnostic tests or treatment options. Please let me know your available dates for an appointment.

Thank you for considering my request. I look forward to your prompt response.

Sincerely,  
[Your Name]  
[Your Address]  
[City, State, ZIP Code]  
[Your Phone Number]  
[Your Email Address]