

Letter of Clarification

Date: [Insert Date]

To: [Recipient's Name]

[Recipient's Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I hope this letter finds you well. I am writing to clarify some details regarding the consent for the surgical procedure scheduled on [Insert Date of Surgery]. It is essential that you fully understand the procedure, its risks, and the anticipated outcomes.

The procedure involves [brief description of the surgical procedure]. It is important to note that while we strive for successful outcomes, there are inherent risks, including [list potential risks].

If you have any questions or need further clarification on any aspect, please do not hesitate to reach out. Your understanding and comfort with the procedure are our top priorities.

Thank you for your attention to this important matter. We look forward to assisting you through your surgical journey.

Sincerely,

[Your Name]

[Your Title]

[Your Contact Information]