Confirmation of Emergency Contact Update

Date: [Insert Date]

Patient Name: [Insert Patient Name]

Patient ID: [Insert Patient ID]

Dear [Patient's Name],

We would like to inform you that your emergency contact information has been successfully updated in your patient dossier. The details are as follows:

Updated Emergency Contact Information:

Name: [Insert Emergency Contact Name]

Relationship: [Insert Relationship]

Phone Number: [Insert Phone Number]

Email: [Insert Email Address]

If you have any further changes or questions, please do not hesitate to contact our office.

Thank you for your attention to this important matter.

Sincerely,

[Your Name]
[Your Position]
[Healthcare Facility Name]
[Contact Information]