

Hospital Admission Confirmation

Dear [Patient's Name],

We are pleased to confirm your admission to [Hospital Name] for your maternity case on [Admission Date]. Your scheduled delivery date is [Due Date].

Please arrive at the hospital by [Arrival Time] and bring the following documents:

- Government-issued ID
- Insurance information
- Completed pre-admission forms

If you have any questions or require further assistance, please do not hesitate to contact our admissions office at [Phone Number].

We look forward to providing you with exceptional care during this special time.

Sincerely,

[Doctor's Name]

[Position]

[Hospital Name]

[Contact Information]