

# Formal Complaint Regarding Misdiagnosis

Your Name  
Your Address  
City, State, Zip Code  
Email Address  
Phone Number  
Date: [Insert Date]

To Whom It May Concern,  
[Hospital Name]  
[Hospital Address]  
City, State, Zip Code

Subject: Formal Complaint Regarding Misdiagnosis

Dear [Recipient's Name or "To Whom It May Concern"],

I am writing to formally express my dissatisfaction and concern regarding a misdiagnosis that occurred during my recent visit to [Hospital Name] on [Date of Visit]. I believe that this misdiagnosis has led to an exacerbation of my medical condition and unnecessary complications that could have been avoided with proper care.

During my appointment, I presented with [describe symptoms]. However, the conclusion drawn by the healthcare staff was [describe incorrect diagnosis]. This diagnosis not only misrepresented my condition but also caused a delay in receiving the appropriate treatment.

I would like to request a thorough review of my case, as well as an explanation of the procedures followed during my visit. I seek assurance that measures will be taken to prevent such occurrences in the future.

Thank you for addressing my concerns. I look forward to your prompt response.

Sincerely,  
[Your Name]