

Healthcare Services Pricing Details

Date: [Insert Date]

To: [Recipient's Name]

[Recipient's Address]

Dear [Recipient's Name],

We are pleased to provide you with the pricing details for our healthcare services. Below you will find a list of our services along with their corresponding prices:

Service Pricing

Service Description	Price (\$)
Initial Consultation	150
Regular Check-Up	100
Specialized Treatment	250
Imaging Services (X-ray, MRI)	200
Laboratory Tests	75

Please note that prices are subject to change based on individual assessments and insurance coverage.

If you have any questions or need further clarification, please do not hesitate to contact us at [Contact Information].

Thank you for considering our services.

Sincerely,

[Your Name]

[Your Position]

[Your Organization]

[Contact Information]