

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

[Recipient's Name]
[Recipient's Title]
[Healthcare Facility Name]
[Facility Address]
[City, State, Zip Code]

Dear [Recipient's Name],

Subject: Complaint Resolution Letter

I am writing to formally address my recent concerns regarding [briefly describe the issue, e.g., the care provided on a specific date].

1. ****Background****

- Date of Service: [Date]
- Nature of the Issue: [Describe the issue in detail, including relevant names, dates, and events].

2. ****Steps Taken****

- [Outline the steps you have taken to resolve the issue prior to this letter, such as contacting the office or speaking with staff].

3. ****Desired Resolution****

- [Clearly state what you hope to achieve through this letter, whether it be an apology, a refund, corrective action, etc.].

Thank you for taking the time to address my concerns. I look forward to your prompt response and a satisfactory resolution to my complaint.

Sincerely,

[Your Name]