

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

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

Dear [Recipient's Name],

Subject: EHR Verification Support

I am writing to provide support for the verification of [Patient's Name]'s Electronic Health Record (EHR) as requested.

[Provide a brief description of the patient's health background, relevant dates, and specific information about the EHR in question.]

Enclosed with this letter are the necessary documents that verify the details contained in the EHR. We believe that this information will assist in the verification process and provide clarity regarding the patient's medical history.

Should you require any further information or additional documentation, please do not hesitate to contact me directly at [Your Phone Number] or [Your Email Address].

Thank you for your attention to this matter.

Sincerely,

[Your Signature (if sending a hard copy)]  
[Your Printed Name]  
[Your Title]  
[Your Organization]