

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

[Recipient Name]
[Recipient Title]
[Recipient Organization]
[Recipient Address]
[City, State, ZIP Code]

Dear [Recipient Name],

Subject: EHR Data Verification Request

I hope this message finds you well.

I am writing to request your assistance in verifying the data contained in our Electronic Health Record (EHR) system related to [specify patient or data set, e.g., Patient ID, time period, etc.]. Accurate and up-to-date data is crucial for ensuring quality patient care and compliance with regulatory requirements.

Please review the attached records and confirm the following details:

1. [Detail 1 to verify]
2. [Detail 2 to verify]
3. [Detail 3 to verify]

Your timely response by [specific date] would be greatly appreciated.

Should you need any further information or clarification, please do not hesitate to contact me directly.

Thank you for your cooperation and support in this matter.

Sincerely,

[Your Name]
[Your Title]
[Your Organization]