

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

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

Dear [Recipient's Name],

I hope this letter finds you well. I am writing to request the scheduling of an Electrocardiogram (EKG) for [Patient's Name] on behalf of [his/her/their] healthcare provider, Dr. [Doctor's Name].

We would appreciate it if you could inform us of available dates and times for the procedure. Please let us know if there are any specific preparations needed prior to the appointment.

Thank you for your assistance. I look forward to your prompt reply.

Sincerely,

[Your Name]
[Your Title, if applicable]
[Your Relationship to Patient, if applicable]