

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]
[Recipient's Name]
[Recipient's Title/Position]
[Hospital/Clinic Name]
[Hospital/Clinic Address]
[City, State, Zip Code]

Dear [Recipient's Name],

Subject: Request for Medical Treatment Abroad

I hope this letter finds you well. I am writing to request approval for medical treatment abroad due to [briefly explain the medical condition and reason for treatment].

After consulting with my local healthcare providers, it has been recommended that I seek treatment at [Name of the Hospital/Clinic] in [Country/City] because [explanation of why this facility is chosen, e.g., specialized treatment, advanced technology, expert doctors].

The treatment I am seeking includes [provide specific details about the treatment and any necessary procedures]. I have attached the relevant medical documents and recommendations from my physician for your review. I kindly request your support in facilitating this treatment, including any necessary approvals, travel arrangements, and financial assistance if applicable.

Thank you for considering my request. I appreciate your attention and support in this matter. I look forward to your positive response.

Sincerely,

[Your Name]

[Your Signature (if sending a hard copy)]