

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

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

Dear [Recipient's Name],

Subject: Urgent Medical Treatment Request

I am writing to formally request assistance for urgent medical treatment for [Patient's Name], who is [Patient's Age] years old and has been diagnosed with [Medical Condition]. Due to the severity of the condition, it is imperative that treatment be undertaken as soon as possible to prevent any potential complications.

[Provide a brief description of the patient's medical history, current condition, and any previous treatments or interventions that have been attempted.]

Given the circumstances, I kindly urge you to expedite any necessary approvals or arrangements for the required treatment. [Include details on the specific treatment needed, recommended specialists, or facilities, if applicable.]

Thank you for your immediate attention to this matter. I look forward to your prompt response.

Sincerely,

[Your Name]  
[Your Title/Relationship to Patient]  
[Your Signature (if sending a hard copy)]