

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

[Doctor's Name]  
[Doctor's Address]  
[City, State, Zip Code]

Dear [Doctor's Name],

Subject: Request for VQ Scan

I hope this letter finds you well. I am writing to request a ventilation-perfusion (VQ) scan to evaluate my lung function, as discussed during my last appointment on [date of last appointment].

[Briefly explain your medical history related to lung issues, any symptoms you are experiencing, and why you believe a VQ scan is necessary.]

I understand that a VQ scan can help in diagnosing [mention specific conditions or concerns, e.g., pulmonary embolism, chronic lung disease]. I believe this imaging study will provide valuable information for my treatment plan.

Please let me know the next steps to schedule the scan and if you require any additional information from my side. Thank you for your attention to this matter.

Sincerely,

[Your Name]  
[Your Signature (if sending a hard copy)]  
[Your Medical Record Number (if applicable)]