

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

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

Dear [Recipient Name],

Subject: Request for Approval of Oxygen Concentrator

I hope this letter finds you well. I am writing to formally request approval for the use of an oxygen concentrator for [Patient's Name], who has been diagnosed with [Patient's Medical Condition].

Given the patient's condition and medical necessity, an oxygen concentrator is essential to ensure [his/her/their] respiratory health and overall well-being. The specific model we are considering is [Model Name/Number], which has been recommended by [Patient's Healthcare Provider's Name/Position].

Enclosed with this letter, please find the following documents for your review:

1. Medical prescription from [Healthcare Provider's Name]
2. Detailed specifications of the recommended oxygen concentrator
3. [Any additional documents that may be required, e.g., insurance coverage information]

I believe that this equipment will significantly improve [Patient's Name]'s quality of life. I appreciate your prompt attention to this request and look forward to your favorable response.

Thank you for your consideration.

Sincerely,

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