

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

Dear [Doctor's Name],

I hope this message finds you well. I am writing to request an appointment for oxygen therapy due to [briefly explain your condition or reason for the request].

I believe that oxygen therapy would significantly benefit my health and quality of life. Please let me know available dates and times for this appointment, as well as any necessary preparations or paperwork I should complete beforehand.

Thank you for your attention to my request. I look forward to your prompt response.

Sincerely,  
[Your Name]