

Professional Second Opinion Request

Subject: Second Opinion Consultation Request

Dear Dr. [Name],

I hope this letter finds you well. I am seeking a second opinion regarding a dental treatment plan that was recently recommended to me by another practitioner.

During my consultation on [date], I was advised to undergo [describe recommended treatment: multiple extractions, extensive restoration work, periodontal surgery, etc.]. While I respect my current dentist's expertise, the complexity and cost of this treatment plan has prompted me to seek additional professional perspective.

I have copies of recent X-rays, treatment notes, and diagnostic materials that I can provide for your review. I would very much appreciate your independent assessment of my oral health status and treatment options.

I am particularly interested in understanding [specific concerns: necessity of all recommended procedures, alternative treatment approaches, timeline considerations, etc.]. Your objective evaluation would be invaluable in helping me make an informed decision about my dental care.

Could we schedule a consultation appointment within the next few weeks? I am available [mention availability] and willing to accommodate your schedule.

Thank you for considering my request. I look forward to benefiting from your professional expertise.

Respectfully,

[Your Name]

[Contact Information]

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