

## Formal disagreement with medical assessment

Subject: Disagreement with Medical Report Findings

Dear [Doctor's Name/Medical Board],

I am writing to formally express my disagreement with the medical report issued on [date] concerning my health evaluation. The findings, as outlined in the report, do not reflect my current medical condition or the history of my treatment.

Several key details regarding my medical history, including [specific tests, treatments, or past conditions], were either overlooked or inaccurately represented. I believe this has led to an incomplete and potentially misleading conclusion.

I respectfully request a reevaluation of my medical records and, if necessary, an independent review by another specialist. Accurate documentation of my health is crucial for both my treatment and insurance purposes.

Thank you for your understanding and cooperation.

Sincerely,

[Your Name]

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