

Referral Letter for Surgical Consultation

Subject: Referral for Surgical Evaluation

Dear Dr. [Specialist's Name],

I am referring my patient, [Patient Name], for a surgical consultation regarding [condition].

Non-invasive treatments have been attempted, but the patient requires evaluation for potential surgical intervention.

Attached are imaging studies, lab reports, and clinical notes. Your assessment and recommendations for surgical management are requested.

Thank you for your attention to this case.

Sincerely,

[Your Name]

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