

Priya Sharma

Patient ID: 812345

City: Bangalore

Green Leaf Hospital Bangalore

Email: (not provided)

Phone: (not provided)

Date: 05/12/2025

To

Dr. Arjun Rao

Green Leaf Hospital Bangalore

Cardiology Department

Subject: Request for Cardiology Consultation

Dear Dr. Rao,

I would like to request a consultation regarding recurring chest pain I have been experiencing over the past few weeks. Kindly let me know if I can schedule an appointment before 20/12/2025 for a detailed evaluation.

Thank you for your time and expertise.

Sincerely,

Priya Sharma