



Danville Regional

MEDICAL CENTER

EMERGENCY DEPARTMENT

142 SOUTH MAIN STREET | DANVILLE, VIRGINIA 24541 434-799-2250 | DANVILLEREGIONAL.COM

Emergency Department Verification Letter

Date: _____

RE: _____

Date in Regard: _____

To Whom It May Concern:

Per verbal consent to release this information, this letter is notification of the following Emergency Department Involvement by the above name person on the above stated date:

- ☐ Was Seen & Treated as a Patient in DRMC's Emergency Department
- ☐ Was a Visitor with a Patient/Family Member at DRMC's Emergency Department

Per patient release of information approval, medical records may be obtained from our Health Information Management Department as needed. If I may be of any further assistance I may be contacted at 434-799-3742.

Sincerely,

DRMC Emergency Department Nurse
434-799-3742