

[Your Name/Law Firm Name]

[Address]

[City, State, Zip Code]

[Phone Number]

[Email Address]

[Date]

[Adjuster Name]

[Insurance Company Name]

[Address]

[City, State, Zip Code]

RE: SETTLEMENT DEMAND

Claimant: [Patient Name]

Insured/Provider: [Doctor/Hospital Name]

Claim Number: [Number]

Date of Incident: [Date]

Dear [Adjuster Name],

SUMMARY OF INCIDENT

On [Date], [Patient Name] was under the care of [Provider Name] for the purpose of [Description of original procedure or treatment]. During the course of this treatment, the medical provider failed to meet the accepted standard of care by [Briefly describe the medical error, e.g., surgical error, misdiagnosis, or medication mistake].

LIABILITY AND NEGLIGENCE

The medical records indicate that [Provider Name] breached their duty of care. Specifically, [Detail the specific actions or omissions that constituted negligence]. As a direct result of this breach, [Patient Name] suffered preventable injuries that would not have occurred under a standard level of medical competence.

INJURIES AND MEDICAL TREATMENT

As a result of the malpractice, [Patient Name] suffered the following injuries: [List injuries]. To treat these complications, the claimant required:

- [Additional surgeries/procedures]
- [Extended hospital stays]
- [Ongoing physical therapy or rehabilitation]

ECONOMIC AND NON-ECONOMIC DAMAGES

The claimant has incurred significant losses, including:

- **Medical Expenses:** Totaling \$[Amount] to date, with estimated future costs of \$[Amount].

- **Lost Wages:** Totaling \$[Amount] due to inability to work from [Date] to [Date].
- **Pain and Suffering:** Significant physical pain, emotional distress, and loss of enjoyment of life.

SETTLEMENT DEMAND

Based on the clear liability of your insured and the severity of the damages sustained, [Patient Name] hereby demands the sum of \$[**Total Dollar Amount**] to settle this claim in its entirety. This offer is made for the purpose of settlement only and is valid for [Number] days from the date of this letter.

Sincerely,

[Your Signature]

[Your Typed Name]