

Date: [Date]

To: [Imaging Facility Name]

Address: [Facility Address]

Fax/Email: [Facility Contact Information]

RE: Conditional Letter of Protection

Patient Name: [Patient Name]

Date of Birth: [Patient DOB]

Date of Incident: [Date of Accident/Injury]

Our File Number: [Law Firm Case Number]

To Whom It May Concern,

Please be advised that this office represents the above-named patient regarding legal claims arising from the incident occurring on the date referenced above. This letter serves as a Conditional Letter of Protection (LOP) concerning diagnostic imaging services provided to our client.

In consideration for your agreement to provide medical services on credit, our firm agrees to protect your reasonable and necessary medical charges out of any settlement, judgment, or recovery obtained on behalf of the patient. We will withhold sufficient funds from the proceeds of any recovery to satisfy your outstanding balance, provided that:

- The charges are related to the injuries sustained in the aforementioned incident.
- The final bill and all relevant imaging reports are provided to this office promptly upon completion of services.
- The total amount paid shall not exceed the net recovery available after the deduction of legal fees and costs.

The patient hereby authorizes and directs this firm to pay said sums directly to your facility. This agreement does not guarantee payment if no recovery is obtained. However, the patient remains personally responsible for the medical debt in the event of an unsuccessful legal outcome.

Please sign below and return a copy of this letter to acknowledge your acceptance of these terms and to confirm that the patient's account has been placed on a "hold" status pending the resolution of their legal claim.

Sincerely,

[Attorney Name]

[Law Firm Name]

Acknowledgment and Acceptance:

The undersigned agrees to the terms of this Letter of Protection and will provide the requested records and final billing statements.

Authorized Signature (Imaging Facility)

Date