

Appointment Confirmation

Dear [Patient's Name],

We are pleased to confirm your follow-up appointment with Dr. [Doctor's Name]. Please find the details of your appointment below:

- **Date:** [Appointment Date]
- **Time:** [Appointment Time]
- **Location:** [Clinic/Hospital Name, Address]
- **Reason for Visit:** Follow-up consultation

Please arrive at least 15 minutes early to complete any necessary paperwork. If you need to reschedule, feel free to contact us at [Phone Number] or [Email Address].

We look forward to seeing you soon.

Sincerely,

[Your Name]

[Your Position]

[Clinic/Hospital Name]

[Contact Information]