

Dear [Patient's Name],

We hope this message finds you well. At [Healthcare Facility/Clinic Name], we are dedicated to providing the highest quality of care to our patients.

To ensure we continuously improve our services, we kindly request your feedback regarding your recent experience with us. Your insights are invaluable and will help us enhance the quality of care we provide to our patients.

Please take a few moments to complete our patient evaluation survey by following this link: [Survey Link]. Your responses will remain confidential and are greatly appreciated.

Thank you for your time and for trusting us with your care.

Sincerely,

[Your Name]

[Your Position]

[Healthcare Facility/Clinic Name]

[Contact Information]