

# Patient Wellness Assessment Notification

Date: [Insert Date]

Dear [Patient's Name],

We hope this message finds you well. As part of our commitment to your health and wellness, we are reaching out to inform you about our upcoming Patient Wellness Assessment.

This assessment is designed to evaluate your overall health, identify any areas of concern, and optimize your care plan moving forward. Your participation is crucial in ensuring that we meet your health needs effectively.

## Assessment Details:

- **Date:** [Insert Assessment Date]
- **Time:** [Insert Assessment Time]
- **Location:** [Insert Location]

Please confirm your attendance by [Insert Confirmation Date]. If you have any questions or need to reschedule, feel free to contact us at [Insert Contact Information].

Thank you for being an important part of our community. We look forward to seeing you soon.

Sincerely,

[Your Name]

[Your Position]

[Healthcare Facility Name]

[Contact Information]