

Confirmation of Genetic Counseling Session

Dear [Patient's Name],

We are writing to confirm your upcoming genetic counseling session scheduled for:

Date: [Insert Date]

Time: [Insert Time]

Location: [Insert Location]

The purpose of this session will be to discuss your test results and any implications they may have for you and your family. Please feel free to bring any questions or concerns you might have.

If you need to reschedule or have any questions prior to the appointment, do not hesitate to contact us at [Insert Contact Information].

Thank you, and we look forward to seeing you soon.

Sincerely,

[Your Name]

[Your Title]

[Your Institution]