

# Appointment Reminder

Dear [Patient's Name],

This is a friendly reminder that you have a geriatric care evaluation scheduled on [Date] at [Time]. The appointment will take place at [Location].

Please bring any relevant medical records and a list of medications you are currently taking.

If you have any questions or need to reschedule, please contact us at [Phone Number] or [Email Address].

We look forward to seeing you soon!

Sincerely,

[Your Name]

[Your Title]

[Your Organization]