

Follow-Up Instructions

Date: [Insert Date]

Patient Name: [Insert Patient Name]

Dear [Patient Name],

Thank you for your recent telehealth consultation. Below are your follow-up instructions:

1. Medication Instructions

Please take the prescribed medication as directed:

- [Medication Name] - [Dosage] - [Frequency]

2. Symptoms Monitoring

Monitor the following symptoms:

- [Symptom 1]
- [Symptom 2]

3. Follow-Up Appointment

Please schedule a follow-up appointment within [time frame]. You can book it through our website or call our office at [Office Phone Number].

4. When to Seek Help

If you experience any of the following, please seek immediate medical attention:

- [Emergency Symptom 1]
- [Emergency Symptom 2]

Contact Information

For any questions or concerns, feel free to contact us at:

Email: [Office Email]

Phone: [Office Phone Number]

Thank you for choosing our services. We wish you a speedy recovery!

Sincerely,

[Your Name]

[Your Title]

[Your Organization]