

Follow-Up Hearing Test Appointment

Dear [Patient's Name],

We hope this message finds you well. This is a friendly reminder that your follow-up hearing test appointment is scheduled for:

Date: [Insert Date]

Time: [Insert Time]

Location: [Insert Location]

Please arrive at least 15 minutes early to complete any necessary paperwork. If you have any questions or need to reschedule, do not hesitate to contact us at [Insert Phone Number] or [Insert Email].

Thank you for choosing [Facility's Name] for your hearing health needs.

Sincerely,

[Your Name]

[Your Position]

[Facility's Name]