

Appointment Confirmation

Dear [Patient's Name],

We are pleased to confirm your dermatology appointment with Dr. [Doctor's Name]. Below are the details of your appointment:

- **Date:** [Appointment Date]
- **Time:** [Appointment Time]
- **Location:** [Clinic Address]
- **Contact Number:** [Clinic Phone Number]

Please arrive 15 minutes early and bring any relevant medical records. If you have any questions or need to reschedule, feel free to contact us.

Thank you,

[Your Clinic Name]