

**Dear [Patient's Name],**

We hope this message finds you well. At [Healthcare Facility Name], we are dedicated to providing the best possible care and service to our patients.

Your recent visit on [Date of Visit] is important to us, and we would love to hear your thoughts about your experience. Your feedback helps us understand what we are doing well and where we can improve.

We kindly ask you to take a few minutes to complete our patient experience survey, which can be accessed at the following link: [Survey Link].

Thank you for choosing [Healthcare Facility Name] for your healthcare needs. We appreciate your time and input.

Sincerely,  
[Your Name]  
[Your Title]  
[Healthcare Facility Name]  
[Contact Information]