

Appointment Confirmation

Dear [Patient's Name],

We are writing to confirm your appointment for periodontal treatment at [Dental Practice Name].

Date: [Appointment Date]

Time: [Appointment Time]

Location: [Practice Address]

Please arrive 15 minutes early to complete any necessary paperwork. If you have any questions or need to reschedule, feel free to contact us at [Phone Number] or [Email Address].

Thank you for choosing us for your dental care.

Best regards,

[Your Name]

[Your Title]

[Dental Practice Name]