

Response to Preoperative Consultation Inquiry

Dear [Patient's Name],

Thank you for reaching out regarding your upcoming surgery and preoperative consultation. We appreciate your interest and are here to assist you.

We would like to confirm your preoperative consultation appointment scheduled for [Date] at [Time]. This appointment will take place at our office located at [Address]. During this consultation, our team will review your medical history, discuss the procedure, and address any concerns you may have.

Please ensure you bring along any relevant medical records and a list of medications you are currently taking. If you have any additional questions before your appointment, feel free to reach out to our office at [Phone Number] or [Email Address].

We look forward to seeing you soon and helping you prepare for your surgery.

Best regards,

[Your Name]

[Your Title]

[Clinic/Hospital Name]

[Contact Information]