

# Post-Operative Care Appointment

Dear [Patient's Name],

We hope this message finds you well. We are writing to schedule your post-operative care appointment following your recent procedure on [Date of Surgery].

Please find the details of your appointment below:

- **Date:** [Appointment Date]
- **Time:** [Appointment Time]
- **Location:** [Clinic/Hospital Name, Address]

If the scheduled time is not convenient for you, please do not hesitate to contact our office at [Phone Number] or [Email Address] to reschedule.

It is important to attend this appointment for your recovery. We look forward to seeing you soon.

Best Regards,

[Your Name]

[Your Position]

[Clinic/Hospital Name]

[Contact Information]