## Dear [Patient's Name],

Thank you for choosing [Clinic/Hospital Name] for your healthcare needs. We hope your recent visit was a positive experience.

To help us continue improving our services, we would appreciate your feedback regarding your experience. Please take a few moments to fill out our feedback form by clicking the link below:

## Provide Feedback

Your valuable insights will help us enhance our services and provide the best possible care to our patients.

Thank you for your time!

Sincerely,
[Your Name]
[Your Position]
[Clinic/Hospital Name]
[Contact Information]