

Pediatric Health Assessment Pre-Appointment Instructions

Dear [Parent/Guardian's Name],

We are looking forward to your child's upcoming health assessment appointment on [Date] at [Time]. To ensure a smooth and effective visit, please review the following instructions:

Before the Appointment:

1. Complete the health history form enclosed with this letter.
2. Ensure your child is up-to-date with immunizations and bring the vaccination record.
3. Write down any concerns or questions you may have regarding your child's health.
4. Prepare a list of all medications your child is currently taking.
5. If possible, ensure your child is well-rested the night before the appointment.

On the Day of the Appointment:

- Arrive 15 minutes early to allow time for check-in.
- Bring any previous medical records and the health history form.
- Please ensure your child wears comfortable clothing for the assessment.

If you have any questions or need to reschedule, please contact our office at [Office Phone Number].

Thank you for your cooperation. We look forward to seeing you and your child!

Sincerely,

[Your Name]

[Your Position]

[Your Clinic Name]