

# Health Check Follow-up

Date: [Insert Date]

To: [Patient's Name]

Address: [Patient's Address]

Dear [Patient's Name],

We hope this letter finds you in good health. Following your recent medical intervention on [Insert Date of Intervention], we would like to conduct a health check to assess your recovery and ongoing health status.

Please schedule a follow-up appointment with our office at your earliest convenience. During this visit, we will review your progress, discuss any concerns, and determine if any further treatment is necessary.

Should you have any questions before your appointment, do not hesitate to contact us at [Insert Phone Number] or [Insert Email Address].

Thank you for your attention to your health and well-being.

Sincerely,

[Your Name]

[Your Title]

[Healthcare Facility Name]