

Kidney Function Test Appointment Confirmation

Dear [Patient Name],

We are pleased to confirm your appointment for a Kidney Function Test.

Date: [Appointment Date]

Time: [Appointment Time]

Location: [Clinic/Hospital Name, Address]

Please arrive 15 minutes early to complete any necessary paperwork. If you have any questions or need to reschedule, feel free to contact us at [Contact Number].

Thank you, and we look forward to seeing you!

Sincerely,

[Your Name]

[Your Position]

[Clinic/Hospital Name]