

GI Health Assessment Reminder

Dear [Patient's Name],

This is a friendly reminder for your upcoming gastrointestinal health assessment scheduled on [Date] at [Time].

Please arrive at least 15 minutes early and bring any necessary documents related to your medical history.

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

Thank you for prioritizing your health!

Sincerely,

[Your Name]

[Your Title]

[Your Clinic/Organization Name]

[Contact Information]