

Appointment Confirmation

Dear [Patient's Name],

We are pleased to confirm your appointment for a specialized surgical consultation.

Appointment Details:

- **Date:** [Appointment Date]
- **Time:** [Appointment Time]
- **Location:** [Clinic/Hospital Name and Address]
- **Surgeon:** Dr. [Surgeon's Name]

Please arrive at least 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] or [Email Address].

Thank you, and we look forward to seeing you soon.

Best regards,
[Your Clinic/Hospital Name]