Cancer Screening Appointment Confirmation

Dear [Patient Name],

We are pleased to confirm your cancer screening appointment scheduled for:

Date: [Appointment Date] **Time:** [Appointment Time]

Location: [Clinic/Hospital Name and 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 [Phone Number] or [Email Address].

Thank you for choosing us for your healthcare needs. We look forward to seeing you soon!

Sincerely,
[Your Name]
[Your Title]
[Clinic/Hospital Name]