Follow-Up on Your Advanced Care Directive

Dear [Recipient's Name],

Date: [Insert Date]

We hope this message finds you well. This letter serves as a follow-up regarding your Advanced Care Directive that was completed on [insert completion date]. We want to ensure that your wishes are clearly understood and that we have the most current information regarding your healthcare preferences.

Please review the details of your directive:

- **Healthcare Agent:** [Insert Agent Name]
- **Preferred Treatment Options:** [Insert Treatment Preferences]
- **Do Not Resuscitate (DNR) Order:** [Insert DNR Preferences]
- Other Special Instructions: [Insert Any Additional Instructions]

If there have been any changes to your health status or if you wish to make amendments to your directive, please do not hesitate to contact us. It is vital that we have up-to-date information to align with your healthcare goals.

Thank you for your attention to this important matter. We look forward to hearing from you soon.

Sincerely,

[Your Name]

[Your Title]

[Your Organization]

[Your Contact Information]