

Appointment Confirmation for Liver Function Test

Dear [Patient's Name],

We are writing to confirm your appointment for a liver function test. Below are the details:

Date: [Insert Date]

Time: [Insert Time]

Location: [Insert Clinic/Hospital Name]

Address: [Insert Address]

Please arrive at least 15 minutes early and bring a valid ID and your insurance information.

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

Thank you, and we look forward to seeing you.

Sincerely,

[Your Name]

[Your Position]

[Clinic/Hospital Name]