

Appointment Confirmation

Dear [Patient's Name],

We are pleased to confirm your appointment for an arthritis management consultation.

Date: [Appointment Date]

Time: [Appointment Time]

Location: [Clinic/Hospital Name, Address]

Please arrive 15 minutes early to complete any necessary paperwork and bring any previous medical records related to your condition.

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

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

Sincerely,

[Your Name]

[Your Title]

[Clinic/Hospital Name]