

Appointment Confirmation

Dear [Patient's Name],

We are pleased to confirm your appointment for a kidney function evaluation.

Date: [Date]

Time: [Time]

Location: [Clinic/Hospital Name, Address]

Please arrive at least 15 minutes before your scheduled time and bring any relevant medical records and identification.

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

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

Sincerely,

[Your Name]

[Your Title]

[Organization Name]