

Appointment Confirmation

Dear [Patient's Name],

We are pleased to confirm your appointment with Dr. [Cardiologist's Name] at [Clinic/Hospital Name].

Date: [Date]

Time: [Time]

Location: [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].

We look forward to seeing you.

Sincerely,

[Your Name]

[Your Title]

[Clinic/Hospital Name]