

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Date]

[Doctor's Name]

[Practice Name]

[Practice Address]

[City, State, Zip Code]

Dear Dr. [Doctor's Last Name],

I hope this message finds you well. I am writing to follow up on my previous consultations regarding my sleep disorder. I have been experiencing [briefly describe symptoms or changes] since our last appointment on [date of last appointment].

I would like to discuss potential adjustments to my treatment plan, as I feel [mention any specific concerns or observations]. Additionally, if there are any new recommendations or resources that could assist me in managing my symptoms, I would greatly appreciate your guidance.

Please let me know a convenient time for us to discuss this further, or if I should schedule another appointment. Thank you for your attention and support.

Sincerely,

[Your Name]