

Medical Consultation Confirmation

Dear [Patient's Name],

We are pleased to confirm your medical consultation appointment with Dr. [Doctor's Name]. Here are the details:

- **Date:** [Date]
- **Time:** [Time]
- **Location:** [Clinic/Hospital Name, Address]
- **Purpose:** [Reason for Consultation]

Please arrive at least 15 minutes early to complete the necessary paperwork. 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]