

Health Screening Checklist

Dear [Patient's Name],

We are committed to your health and wellness. Please review the following health screening checklist to ensure you are taking the necessary steps for your health:

Health Screening Checklist:

- Annual Physical Exam
- Blood Pressure Screening
- Cholesterol Testing
- Blood Sugar Level Check
- Body Mass Index (BMI) Measurement
- Cancer Screenings (e.g., Mammograms, Colonoscopies)
- Vaccinations (e.g., Flu, Tdap)
- Dental Check-Up
- Vision Test

Please schedule appointments for any screenings that are overdue. If you have any questions or concerns, feel free to reach out to our office.

Take care of your health!

Sincerely,

[Your Healthcare Provider's Name]

[Your Healthcare Provider's Contact Information]