

Genetic Counseling Services

Date: [Insert Date]

Dear [Couple's Names],

We understand that facing infertility can be a challenging and emotional journey. We would like to offer our genetic counseling services to help you navigate this difficult time.

What We Offer

- Comprehensive assessment of your family medical history
- Genetic testing options and interpretation
- Discussion of potential genetic conditions that may impact fertility
- Support and resources to help you make informed decisions

Next Steps

To schedule a consultation, please contact us at [Insert Phone Number] or [Insert Email Address]. We are here to support you every step of the way.

Sincerely,

[Your Name]

[Your Title]

[Clinic/Organization Name]

[Contact Information]