

[Your Name]

[Your Position]

[Your Organization]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Date]

[Referral Source's Name]

[Referral Source's Position]

[Referral Source's Organization]

[Referral Source's Address]

[City, State, Zip Code]

Dear [Referral Source's Name],

I hope this message finds you well. I am writing to follow up on the referral of [Patient's Name], whom you referred to our clinic on [Referral Date].

We have received the referral and would like to confirm that [Patient's Name] has scheduled an appointment for [Appointment Date and Time]. Additionally, we will provide all necessary updates regarding their treatment progress.

Please let us know if there are any specific concerns or additional information you would like us to address during [Patient's Name]'s visit.

Thank you for your continued collaboration in providing quality care to our patients.

Sincerely,

[Your Name]

[Your Position]