

# Confirmation of Urgent Care Consultation

Dear [Patient's Name],

We are pleased to confirm your urgent care consultation scheduled for:

- **Date:** [Insert Date]
- **Time:** [Insert Time]
- **Location:** [Insert Location]

Please arrive 15 minutes early and bring the following documents:

- Photo ID
- Insurance Card
- Any relevant medical records

If you have any questions or need to reschedule, please contact us at [Insert Phone Number].

Thank you for choosing our urgent care services.

Sincerely,

[Your Name]

[Your Title]

[Your Organization]