

# Dear Parent/Guardian,

We would like to inform you about your child's upcoming MRI scan scheduled for **[Date]** at **[Time]**.

## Preparation Instructions

- Please ensure that your child wears comfortable clothing without any metal components (buttons, zippers, etc.).
- If your child has any metal implants or devices (such as pacemakers), please notify us prior to the appointment.
- Your child should not eat or drink anything for **[Number] hours** before the scan unless otherwise directed.
- If your child is anxious or has special needs, please discuss with us to make appropriate accommodations.

## During the Appointment

Your child will be asked to lie still on the MRI table while the imaging is performed. The scan typically takes about **[Duration]** minutes.

## Post-Scan

Once the MRI is completed, your child can resume their normal activities and diet.

## Contact Information

If you have any questions or concerns, please do not hesitate to reach out to us at **[Phone Number]** or **[Email Address]**.

Thank you for your cooperation.

Sincerely,

**[Your Name]**

**[Your Title]**

**[Medical Facility Name]**