

Gastrointestinal Health Assessment Appointment

Dear [Patient's Name],

We are pleased to inform you that your gastrointestinal health assessment has been scheduled. Below are the details of your appointment:

Date: [Appointment Date]

Time: [Appointment Time]

Location: [Clinic/Hospital Name and Address]

Please arrive at least 15 minutes early to complete any necessary paperwork. If you have any questions or need to reschedule, feel free to contact us at [Contact Number] or [Email Address].

Thank you, and we look forward to seeing you!

Sincerely,

[Your Name]

[Your Title]

[Clinic/Hospital Name]