

Appointment Confirmation

Date: [Insert Date]

Dear [Patient's Name],

We are pleased to confirm your appointment for respiratory therapy.

Appointment Details:

- Date: [Insert Appointment Date]
- Time: [Insert Appointment Time]
- Location: [Insert Facility Name & Address]

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

We look forward to seeing you!

Sincerely,

[Your Name]

[Your Title]

[Facility Name]

[Facility Contact Information]