

Appointment Notification for Allergy Test

Dear [Patient's Name],

We are writing to inform you of your upcoming allergy test appointment:

- **Date:** [Appointment Date]
- **Time:** [Appointment Time]
- **Location:** [Clinic/Hospital Name, Address]

Please try to arrive 15 minutes early to complete any necessary paperwork. If you have any questions or need to reschedule, do not hesitate to contact us at [Contact Number].

Thank you for choosing [Clinic/Hospital Name] for your healthcare needs.

Sincerely,

[Your Name]

[Your Position]

[Clinic/Hospital Name]