

Genetic Testing Appointment Confirmation

Dear [Patient's Name],

We are writing to confirm your appointment for genetic testing as part of your oncology care. Below are the details of your appointment:

Date: [Appointment Date]

Time: [Appointment Time]

Location: [Clinic/Hospital Name, 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 Information].

Thank you for being a part of your healthcare journey.

Sincerely,

[Your Name]

[Your Title]

[Healthcare Provider's Name]