

# Allergy Testing Appointment Confirmation

Dear [Patient's Name],

We are pleased to inform you that your allergy testing appointment has been scheduled. Please find the details below:

**Date:** [Appointment Date]

**Time:** [Appointment Time]

**Location:** [Clinic Name and Address]

Please arrive 15 minutes early to complete any necessary paperwork. For your comfort and health, we recommend wearing loose clothing on the day of your appointment.

Should you have any questions or need to reschedule, feel free to contact our office at [Phone Number] or [Email Address].

Thank you for choosing us for your skin health needs.

Sincerely,  
[Your Name]  
[Your Position]  
[Clinic Name]