## **Appointment Confirmation**

Dear [Patient Name],

We are writing to confirm your follow-up consultation regarding your sleep study.

Date: [Appointment Date]

**Time:** [Appointment Time]

Location: [Clinic/Hospital Name and Address]

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

Thank you and we look forward to seeing you!

Sincerely,

[Your Name]

[Your Title]

[Clinic/Hospital Name]