

[Date]

[Patient Name]

[Patient Address]

[City, State, Zip Code]

Subject: Reminder: Upcoming Follow-Up Appointment for Chronic Care Management

Dear [Patient Name],

This is a friendly reminder of your upcoming follow-up appointment to monitor your ongoing health and manage your [Chronic Condition, e.g., Diabetes/Hypertension]. Regular check-ups are essential to ensure your treatment plan is effective and to make any necessary adjustments.

Appointment Details:

- **Date:** [Date of Appointment]
- **Time:** [Time of Appointment]
- **Provider:** [Doctor/Provider Name]
- **Location:** [Clinic Name/Address]

Please bring the following to your appointment:

- A current list of all medications and supplements you are taking.
- Your recent home monitoring logs (e.g., blood sugar or blood pressure readings).
- A list of any new symptoms or questions you wish to discuss.

If you need to reschedule or cancel this appointment, please contact our office at [Phone Number] at least 24 hours in advance.

We look forward to seeing you and continuing to work together on your health goals.

Sincerely,

[Provider/Clinic Name]

[Phone Number]

[Website]