

[Date]

[Patient Name]

[Patient Address]

[City, State, Zip Code]

Dear [Patient Name],

We hope your recovery at home is progressing well following your recent outpatient procedure on [Date of Surgery].

This is a reminder that you have a scheduled post-operative follow-up appointment with [Doctor Name]. Monitoring your healing process is a vital part of your recovery to ensure the best possible outcome.

**Appointment Details:**

- **Date:** [Appointment Date]
- **Time:** [Appointment Time]
- **Location:** [Clinic Name/Department], [Room/Suite Number]

Please remember to bring a list of any medications you are currently taking and any questions you may have regarding your recovery or activity levels.

If you need to reschedule or if you are experiencing urgent symptoms such as high fever, excessive swelling, or severe pain, please contact our office immediately at [Phone Number].

We look forward to seeing you soon.

Sincerely,

[Staff Name/Department]

[Facility Name]