

[Date]

[Patient Name]

[Patient Address]

[City, State, Zip Code]

Subject: Reminder: Final Post-Operative Follow-Up Appointment

Dear [Patient Name],

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

This letter is a reminder of your final scheduled post-operative follow-up appointment:

Date: [Appointment Date]

Time: [Appointment Time]

Location: [Clinic/Hospital Name and Suite Number]

This final visit is a crucial step in your recovery process. During this appointment, [Doctor's Name] will perform a final assessment of your healing, review any long-term care instructions, and officially discharge you from surgical post-operative care.

Please remember to bring any relevant medical logs or a list of questions you may have regarding your return to full activities.

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

We look forward to seeing you and confirming your successful recovery.

Sincerely,

[Doctor or Department Name]

[Facility Name]