

[Date]

[Patient Name]

[Patient Address]

[City, State, Zip Code]

Subject: Reminder: Your Annual Well-Woman Preventative Care Visit

Dear [Patient Name],

According to our records, it is time for your annual Well-Woman preventative care appointment. As we age, these routine visits become even more important for maintaining your health and independence.

During this visit, your provider will review your medical history and may perform or discuss the following:

- Physical examination and vital signs.
- Medication and supplement review.
- Breast health and pelvic exams.
- Bone density (Osteoporosis) screening.
- Colon cancer screening updates.
- Immunizations (such as Flu, Pneumonia, or Shingles shots).
- Hearing, vision, and balance screenings.

Most Medicare and private insurance plans cover one wellness visit per year at no cost to you. Please bring a current list of your medications to your appointment.

To schedule your visit, please call our office at [Phone Number] or book online through the patient portal at [Website URL].

We look forward to seeing you and helping you stay healthy.

Sincerely,

[Doctor's Name/Practice Name]

[Phone Number]

[Office Address]