

[Date]

[Patient Name]

[Patient Address]

[City, State, Zip Code]

Subject: Appointment Reminder: Sports Injury Rehabilitation

Dear [Patient Name],

This is a reminder of your upcoming physical therapy session at [Clinic Name] to continue your sports injury rehabilitation program.

Appointment Details:

Date: [Date of Appointment]

Time: [Time]

Therapist: [Therapist Name]

To ensure a productive session, please remember to:

- Wear comfortable athletic clothing and appropriate footwear.
- Bring any specific braces, splints, or orthotics you use during activity.
- Arrive 10 minutes early if you need to update any paperwork.

Consistent attendance is vital for your recovery and return to sport. If you need to reschedule, please contact us at [Phone Number] at least 24 hours in advance to avoid any cancellation fees.

We look forward to helping you get back in the game.

Sincerely,

[Your Name/Clinic Name]

[Phone Number]

[Website/Email Address]