

[Date]

[Patient Name]

[Patient Address]

[City, State, Zip Code]

Dear [Patient Name],

This is a reminder regarding your upcoming consecutive chemotherapy treatment sessions scheduled at [Clinic/Hospital Name].

Your next appointments are scheduled as follows:

- Day 1: [Date] at [Time]
- Day 2: [Date] at [Time]
- Day 3: [Date] at [Time]

Please report to the [Department Name] on the [Floor Number] floor. Remember to bring a list of your current medications and ensure you have followed any specific fasting or hydration instructions provided by your oncologist.

If you are experiencing a fever, chills, or any new symptoms, or if you need to reschedule these appointments, please contact our office immediately at [Phone Number].

We look forward to seeing you soon.

Sincerely,

[Provider/Nurse Name]

[Oncology Department]

[Clinic/Hospital Name]