

[Clinic Name]
[Clinic Address]
[City, State, Zip Code]
[Phone Number]

[Date]

[Patient Name]
[Patient Address]
[City, State, Zip Code]

Dear [Patient Name],

Subject: Routine Blood Pressure Monitoring Reminder

According to our records, you are due for a routine review of your blood pressure management. Regular monitoring is essential to ensure your blood pressure remains within a healthy range and to adjust your treatment plan if necessary.

To ensure your records are up to date, please complete the following:

- **Home Monitoring:** Please record your blood pressure readings twice daily (morning and evening) for the next seven days.
- **Submit Readings:** You can submit these readings via our online portal, by dropping off your monitoring sheet at the reception, or during your appointment.
- **Book an Appointment:** Please contact the clinic at [Phone Number] to schedule a review with [Doctor/Nurse Name].

If you have recently had your blood pressure checked or have already scheduled an appointment, please disregard this letter.

Properly managing hypertension significantly reduces the risk of heart disease and stroke. We look forward to seeing you soon to continue your care.

Sincerely,

[Doctor/Practice Manager Name]
[Clinic Name]