

**Date:** [Date]

**Subject: Appointment Reminder: Routine Screening Mammogram**

Dear [Patient Name],

According to our records, it is time for your routine screening mammogram. Because you have been identified as having a higher-risk profile, regular imaging is an essential part of your proactive healthcare plan.

Early detection is the most effective tool we have. Annual screenings allow our specialists to monitor any subtle changes and ensure you receive the most accurate assessment possible.

**Your Appointment Details:**

- **Location:** [Facility Name/Address]
- **Date:** [Date]
- **Time:** [Time]

If the time above does not work for you, please call us at [Phone Number] or visit our online portal at [URL] to reschedule. Please bring your insurance card and a valid photo ID to your appointment.

Thank you for prioritizing your health. We look forward to seeing you.

Sincerely,

[Physician or Clinic Name]

[Department Name]

[Contact Information]