

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

[Date]

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

Dear [Patient Name],

Our records show that you are now due for your routine prostate cancer screening. Regular screening is an important part of preventative healthcare for men of your age.

This initial screening typically involves a simple blood test called a PSA (Prostate-Specific Antigen) test and a brief physical examination. These tests help in the early detection of any changes, which is when treatment is most effective.

Please contact our office at [Phone Number] to schedule an appointment for your screening. If you have had this test performed elsewhere recently, please let us know so we can update your medical records.

If you have any questions or would like to discuss the benefits and risks of screening, please feel free to bring them up during your visit.

Sincerely,

[Doctor Name/Signature]  
[Practice Name]