[Practice Name]
[Practice Address]
[Date]

To [Patient Name],

Subject: Annual Thyroid Function Test Reminder

Our records show that your annual thyroid function blood test is now due. This routine check is necessary to monitor your thyroid levels and ensure that your current medication dosage remains correct for your health.

Please contact the surgery at [Phone Number] or use our online booking system to schedule an appointment for a blood test with the phlebotomist or practice nurse.

If you have already had this blood test in the last month, please disregard this letter.

Yours sincerely,

[Doctor/Practice Manager Name]
[Practice Name]