

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

[Date]

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

Dear [Patient Name],

Our records indicate that you are due for your routine cardiovascular health assessment. Regular check-ups are essential for monitoring your heart health and managing potential risk factors such as blood pressure and cholesterol levels.

This appointment will include:

- A review of your medical history
- Blood pressure check
- Blood tests (if required)
- Discussion regarding lifestyle and preventative care

Please contact our office at [Phone Number] to schedule your appointment at your earliest convenience. If you have already scheduled this assessment, please disregard this letter.

We look forward to seeing you soon.

Sincerely,

[Doctor/Provider Name]
[Practice Name]