

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

[Date]

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

Subject: Follow-Up Cardiovascular Health Assessment

Dear [Patient Name],

Our records indicate that you are due for a follow-up cardiovascular health assessment. Regular monitoring of your heart health is an important part of your ongoing care and helps us manage your blood pressure, cholesterol levels, and overall heart function.

We recommend that you schedule an appointment at your earliest convenience. This assessment will include:

- A review of your current medications
- Blood pressure and heart rate check
- Blood tests (if required)
- Discussion of any lifestyle changes or symptoms

Please call our office at [Phone Number] to book your appointment. If you have recently had a cardiovascular check-up elsewhere, please let us know so we can update your medical records.

We look forward to seeing you soon.

Sincerely,

[Doctor or Clinic Manager Name]
[Clinic Name]