[Date]

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

Subject: Appointment Reminder: Your Annual Wellness and Weight Management Review

Dear [Patient Name],

Our records indicate that it is time for your Annual Wellness and Weight Clinic review. Regular check-ins are an essential part of monitoring your health progress and ensuring your current management plan remains effective for your long-term goals.

During this appointment, we will:

- Review your current weight and health metrics.
- Discuss any challenges or successes you have experienced over the past year.
- Update your personalized health and nutrition plan.
- Renew any necessary prescriptions or lab orders.

Please contact our office at [Phone Number] or visit our online portal at [Website/Link] to schedule your appointment at a time that is convenient for you.

We look forward to seeing you and supporting you on your continued wellness journey.

Sincerely,

[Doctor/Provider Name]
[Clinic Name]
[Clinic Phone Number]