[Date]

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

Subject: Important: Routine Preventative Health Screening Reminder

Dear [Patient Name],

Our records indicate that you are due for your routine preventative Sexually Transmitted Infection (STI) screening. Regular testing is a vital part of maintaining your overall health and wellness.

Many STIs do not show immediate symptoms, and early detection is the most effective way to ensure successful treatment and prevent long-term health complications. We recommend this screening as a standard part of your preventative care plan.

Next Steps:

- Please call our office at [Phone Number] to schedule an appointment.
- You may also book your appointment online through our patient portal at [Website URL].
- The screening process is quick, confidential, and typically involves a simple blood draw or urine sample.

If you have recently had these tests performed at another facility, or if you have any questions regarding this reminder, please contact us so we can update your medical records.

Thank you for prioritizing your health.

Sincerely,

[Provider Name or Clinic Name]
[Contact Information]