

[Date]

[Patient Name]

[Patient Address]

[City, State, Zip Code]

Subject: Reminder for Your Annual Mental Health and Depression Screening

Dear [Patient Name],

Our records show that it is time for your annual mental health and depression screening. At [Practice Name], we believe that mental wellness is just as important as physical health in your overall well-being.

This routine screening is a proactive way to check in on your emotional health and identify any areas where you may need support. The evaluation is quick, confidential, and can be completed during a standard office visit.

Please contact us at [Phone Number] or visit our online portal at [Website/URL] to schedule your appointment. If you already have an appointment scheduled, please disregard this notice.

We look forward to seeing you soon.

Sincerely,

[Provider/Clinic Name]

[Phone Number]

[Clinic Address]