

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

[Date]

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

Subject: Reminder: Biannual Pacemaker Check and Cardiology Review

Dear [Patient Name],

Our records indicate that you are now due for your routine six-month pacemaker evaluation and cardiology review.

Periodic monitoring of your device is essential to ensure it is functioning correctly, to assess battery longevity, and to optimize settings for your heart health. During this appointment, your cardiologist will also review your overall cardiovascular status.

Your Appointment Details:

- **Date:** [Date]
- **Time:** [Time]
- **Location:** [Department/Room Number]

If the scheduled time is not convenient for you, please contact our office at [Phone Number] as soon as possible to reschedule. If you have already scheduled this appointment, please disregard this notice.

Please remember to bring a current list of your medications to this visit.

We look forward to seeing you soon.

Sincerely,

[Doctor's Name/Clinic Manager]
[Clinic Name]