[Date]

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

Subject: Friendly Reminder: Your Glaucoma and Vision Screening

Dear [Patient Name],

We hope this letter finds you well. Our records show that it is time for your routine glaucoma and vision screening.

Glaucoma often has no early symptoms, which is why regular check-ups are essential for protecting your sight. Early detection allows us to manage your eye health effectively and prevent vision loss.

Please contact our office at [Phone Number] to schedule your appointment. You can also book online at [Website URL].

If you have already scheduled your visit, please disregard this notice. We look forward to seeing you soon.

Sincerely,

[Doctor's Name/Clinic Name]
[Clinic Address]
[Phone Number]