

[Date]

[Patient Name]

[Patient Address]

[City, State, Zip Code]

Welcome to [Clinic/Provider Name] Remote Care

Dear [Patient Name],

Welcome to our Remote Medical Care program. We are pleased to provide you with high-quality healthcare from the comfort and safety of your own home. This service is designed to give you easier access to your medical team through secure video visits and digital communication.

Getting Started:

- **Patient Portal:** Please log in to [Link/URL] to complete your registration.
- **Equipment Check:** Ensure you have a smartphone, tablet, or computer with a working camera and microphone.
- **Connection:** A stable internet connection is required for video consultations.

Your First Appointment:

Your initial remote consultation is scheduled for [Date] at [Time]. You will receive a secure meeting link via email 15 minutes before your session begins.

What to Expect:

During your remote visits, your provider will review your medical history, discuss current symptoms, and manage your prescriptions just as they would during an in-person visit. If a physical examination or lab work is required, we will coordinate a brief in-office visit or a local laboratory referral.

Support:

If you experience any technical difficulties or need to reschedule, please contact our support team at [Phone Number] or [Email Address].

We look forward to partnering with you in your health and wellness journey.

Sincerely,

[Provider Name/Signature]
[Title]
[Clinic/Facility Name]