Dear [Patient Name],

Welcome to [Clinic Name]! We are pleased that you have chosen us for your dermatological care.

Your first appointment is scheduled for:

- **Date:** [Date]
- **Time:** [Time]
- **Location:** [Clinic Address]

To ensure a smooth consultation, please bring the following to your appointment:

- Photo ID and insurance card.
- A list of current medications and supplements.
- A list of skincare products you are currently using.
- Any relevant medical records or previous biopsy results.

Please arrive 15 minutes early to complete any necessary registration forms. If you need to reschedule, kindly provide us with at least 24 hours' notice.

We look forward to meeting you and helping you achieve healthy skin.

Sincerely,

[Doctor Name/Clinic Manager]
[Clinic Name]
[Phone Number]
[Website URL]