

[Date]

[Patient Name]

[Patient Address]

[City, State, Zip Code]

Subject: Important Follow-up Regarding Your CPAP Therapy

Dear [Patient Name],

We are writing to follow up on your progress with your CPAP therapy. Our records indicate that your recent device usage has fallen below the recommended level for effective treatment.

Consistent use of your CPAP machine is vital for managing sleep apnea and improving your overall health. To achieve the best results, it is generally recommended to use the device for at least 4 hours per night, at least 70% of the time.

If you are experiencing any of the following difficulties, we want to help:

- Discomfort from the mask or headgear
- Dryness in the nose or mouth
- Difficulty exhaling against the pressure
- Trouble falling asleep with the device

Please contact our office at [Phone Number] or email [Email Address] to speak with a specialist. We can assist with mask fittings, pressure adjustments, or provide tips to make your therapy more comfortable.

Your health and well-being are our priority. We look forward to helping you get back on track with your treatment.

Sincerely,

[Provider/Clinic Name]

[Department Name]

[Contact Information]