

[Date]

[Patient Name]

[Patient Address]

[City, State, Zip Code]

Subject: Reminder - Annual Bone Density Scan (DEXA)

Dear [Patient Name],

Our records indicate that you are due for your routine annual bone density scan (DEXA scan). This screening is an important part of monitoring your bone health and managing your risk for osteoporosis.

We would like to help you schedule this appointment at your earliest convenience. Please contact our scheduling department at [Phone Number] between the hours of [Operating Hours].

If you have already scheduled this appointment or have recently had this scan performed at another facility, please let us know so we can update your medical records.

Thank you for choosing [Practice Name] for your healthcare needs.

Sincerely,

[Doctor/Provider Name]

[Practice Name]

[Practice Phone Number]