|  |  |
| --- | --- |
| {{address1}} | {{surgery\_name}} |
| {{address2}} | {{doctors\_address1}} |
| {{address3}} | {{doctors\_address2}} |
| {{post\_code}} | {{doctors\_phone\_number}} |

**Dear {{ patient\_prefix}} {{ patient\_surname }},**

An appointment has been made for you to see Dr. {{ dr\_name }} on:

**The {{ day }} of {{ month }} {{ year }} at {{ time }} at the {{ clinic\_type }}**

It would be helpful if a family member or friend could attend this appointment with

you. It would also be helpful if you could have with you a list of all your current

medication (prescribed and over the counter)

**Yours sincerely,**

{{ signature }}

Doctor {{ dr\_name }}