

[Your Name]  
[Your Address]  
[City, State, Zip Code]  
[Email Address]  
[Phone Number]

[Date]  
[Recipient's Name]  
[Recipient's Title]  
[Medical Facility Name]  
[Facility Address]  
[City, State, Zip Code]

Dear [Recipient's Name],

I hope this letter finds you well. I am writing to follow up on my recent IUD removal appointment that took place on [date of appointment].

I would like to express my gratitude for the care and attention I received during the procedure. I appreciate the time taken to discuss my concerns and ensure my comfort throughout the process.

Since the removal, I have experienced [briefly describe any symptoms or concerns, if applicable, e.g., bleeding, cramping]. I understand these may be normal post-removal symptoms, but I would appreciate your guidance regarding what to expect moving forward and if any further action is necessary.

Thank you once again for your support and expertise. I look forward to your response.

Warm regards,

[Your Name]