

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

[Patient's Name]  
[Patient's Address]  
[City, State, Zip Code]

Dear [Patient's Name],

Thank you for visiting [Your Dental Practice Name] on [Date of Visit]. We hope you found your appointment satisfactory and informative.

As a follow-up to your recent visit, we would like to schedule your next appointment. Regular dental check-ups are essential for maintaining optimal oral health.

Please contact our office at [Phone Number] or [Email Address] to schedule an appointment at your convenience. We suggest the following available times:

- [Date and Time Option 1]
- [Date and Time Option 2]
- [Date and Time Option 3]

If these options do not work for you, please let us know your preferred times and we will do our best to accommodate.

Thank you for choosing [Your Dental Practice Name] for your dental care. We look forward to hearing from you soon!

Best regards,

[Your Name]  
[Your Position]  
[Your Dental Practice Name]