

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]
[Recipient's Name]
[Recipient's Title/Position]
[Hospital/Clinic Name]
[Address]
[City, State, Zip Code]

Dear [Recipient's Name],

Subject: Pre-Operative Knee Replacement Preparation

I hope this letter finds you well. I am writing to confirm my upcoming knee replacement surgery scheduled for [date of surgery] at [hospital/clinic name].

In preparation for the procedure, I would like to confirm the following details:

1. Pre-operative assessments and tests required.
2. Instructions regarding medication management prior to the surgery.
3. Guidance on the day of surgery, including arrival time and necessary documents.
4. Any recommendations for post-operative care that I should be aware of.

My medical history includes [briefly outline relevant medical history]. Please let me know if there are any additional details you need from my end.

Thank you for your assistance and guidance. I look forward to hearing from you soon.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]