

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

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

Dear [Recipient's Name],

I am writing to confirm my appointment for oxygen therapy scheduled on [Date] at [Time]. Please let me know if there are any forms or information I should bring along with me.

Thank you for your assistance. I look forward to my appointment.

Sincerely,

[Your Name]