

[Your Name/Practice Name]

[Address]

[City, State, Zip Code]

[Phone Number]

[Email]

[Date]

[Patient Name]

[Patient Address]

[City, State, Zip Code]

Subject: Rescheduling Your Missed Consultation

Dear [Patient Name],

We missed you today for your scheduled new patient consultation on [Date] at [Time]. We hope everything is alright.

We are still very interested in meeting with you to discuss your health needs. Because we want to ensure you receive the care you require, please contact our office at [Phone Number] at your earliest convenience to reschedule your appointment.

You may also rebook your visit online through our website at [Website URL].

Please note that our office requires [Number] hours' notice for cancellations. If you are unable to make your next scheduled time, please let us know in advance to avoid any potential fees.

We look forward to hearing from you soon.

Sincerely,

[Your Name/Signature]

[Title/Office Position]