[Date]

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

Dear [Patient Name],

Our records show that you missed your scheduled follow-up appointment on [Date] at [Time]. We also note that you have not yet contacted our office to reschedule.

Regular follow-up care is an important part of managing your health and [mention specific condition or "your ongoing treatment plan"]. Missing these appointments can lead to complications or delays in your recovery.

Please contact our office at [Phone Number] as soon as possible to reschedule your appointment. If you have already made an appointment or are receiving care elsewhere, please let us know so we can update your medical record.

If you have any questions or concerns, do not hesitate to call us.

Sincerely,

[Provider Name/Practice Name]
[Phone Number]