[Date]

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

Re: Missed Post-Operative Appointment on [Date of Missed Appointment]

Dear [Patient Name],

Our records indicate that you were unable to attend your scheduled post-operative follow-up appointment on [Date] following your procedure on [Date of Surgery].

Post-operative appointments are a critical part of your recovery process. These visits allow us to monitor your healing, check for potential complications, and ensure that your recovery is progressing as expected. Missing these evaluations can increase the risk of undetected issues.

Please contact our office as soon as possible at [Phone Number] to reschedule this important visit. If you have already rescheduled or if you are receiving follow-up care from another provider, please let us know so we can update your medical records.

If you are experiencing any urgent symptoms such as fever, increased pain, redness, or discharge at the surgical site, please call us immediately or seek emergency care.

Your health and safety are our primary concerns. We look forward to hearing from you soon.

Sincerely,

[Doctor Name/Clinic Name]
[Department Name]
[Contact Information]