

[Practice Name]  
[Practice Address]  
[Phone Number]  
[Date]

To the Parent or Guardian of [Patient Name],

Our records indicate that your child, [Patient Name], is currently overdue for their scheduled infant well-child checkup. According to our files, the last visit was on [Date of Last Visit].

Regular well-child visits are essential during the first year of life. These appointments allow us to:

- Monitor your baby's growth and physical development.
- Track developmental milestones.
- Administer necessary immunizations to protect against serious illnesses.
- Address any questions or concerns you may have about feeding, sleep, or safety.

Please call our office at [Phone Number] at your earliest convenience to schedule this important appointment. If you have already scheduled a visit or believe you have received this letter in error, please let us know so we can update our records.

We look forward to seeing you and your baby soon.

Sincerely,

[Doctor or Clinic Name]  
[Practice Name]