

[Date]

[Patient Name]

[Patient Address]

[City, State, Zip Code]

Re: Missed Appointment on [Date of Missed Appointment]

Dear [Patient Name],

This letter is to follow up regarding your missed consultation with [Specialist Name/Department] scheduled for [Date and Time]. Our records indicate that you were unable to attend this appointment and did not contact us to reschedule.

Your primary care physician referred you for this consultation to address [Reason for Referral/Medical Concern]. This follow-up is important for your ongoing care and to ensure an accurate diagnosis or treatment plan.

Please contact our office at [Phone Number] at your earliest convenience to reschedule this appointment. If you have already sought care elsewhere or no longer require this consultation, please let us know so we can update your medical records.

We look forward to hearing from you and assisting with your healthcare needs.

Sincerely,

[Sender Name/Admin Name]

[Facility/Clinic Name]

[Phone Number]