[Your Full Name]
[Your Phone Number]
[Your Email Address]
[Date]

[Doctor's Name or Clinic Name]
[Clinic Address]
[City, State, Zip Code]

Subject: Rescheduling Request for Missed Annual Physical Examination

Dear [Doctor's Name or Office Manager],

I am writing to sincerely apologize for missing my scheduled annual physical examination on [Date of Original Appointment] at [Time]. Unfortunately, I was unable to attend due to [brief reason, e.g., an unexpected personal emergency / illness / work conflict].

I value my health and would like to reschedule this important check-up as soon as possible. Please let me know if any of the following dates and times work for your schedule:

- [Option 1: Date and Time]
- [Option 2: Date and Time]
- [Option 3: Date and Time]

If these times are not available, please let me know the next earliest opening you have. I am also aware of your cancellation policy and am prepared to pay any necessary missed-appointment fees if applicable.

Thank you for your understanding and for your continued care.

Sincerely,

[Your Signature]
[Your Printed Name]