

[Date]

[Patient Name or Parent/Guardian Name]

[Street Address]

[City, State, Zip Code]

Subject: Overdue Vaccination Notification

Dear [Patient Name or Parent/Guardian Name],

Our records show that [Patient Name] has missed a scheduled appointment for vaccinations on [Missed Date] and is now overdue for the following immunizations:

- [Vaccine Name 1]
- [Vaccine Name 2]
- [Vaccine Name 3]

Vaccinations are essential to protect against serious and preventable diseases. Staying on schedule ensures the best possible protection for [Patient Name] and the community.

Please contact our office at [Phone Number] as soon as possible to reschedule this appointment. If you have already received these vaccinations elsewhere, please let us know so we can update our records.

Thank you for prioritizing your health.

Sincerely,

[Doctor/Provider Name]

[Clinic/Practice Name]

[Phone Number]