

Date: [Insert Date]

Patient Name: [Insert Patient Name]

Date of Birth: [Insert Patient DOB]

Patient Address: [Insert Patient Address]

Subject: URGENT: Missed Prenatal Appointment Notification

Dear [Patient Name],

Records indicate that you missed your scheduled prenatal appointment on [Insert Date of Appointment] at [Insert Time]. We attempted to contact you via [Phone/Email/Portal] on [Insert Date], but we have not heard back from you.

Because you are in your third trimester, regular monitoring is critical for your safety and the safety of your baby. During this stage of pregnancy, we must screen for serious conditions such as high blood pressure (preeclampsia), gestational diabetes, and fetal growth concerns that can develop quickly and without obvious symptoms.

Please contact our office immediately at [Insert Phone Number] to reschedule.

If you are experiencing any of the following symptoms, go to the nearest Labor and Delivery triage or Emergency Room immediately:

- Decrease in your baby's movement
- Severe headache that does not go away
- Vision changes (blurriness or seeing spots)
- Sudden swelling in your face or hands
- Vaginal bleeding or leaking of fluid
- Persistent abdominal pain or regular contractions

If you have decided to transfer your care to another provider, please let us know so we can assist with the transfer of your medical records.

Sincerely,

[Provider Name/Clinic Name]

[Contact Information]