[Current Date]

[Patient Name]
[Patient Address]
[City, State, Zip Code]

Subject: Missed Appointment - Respiratory Equipment Fitting

Dear [Patient Name],

This letter is to inform you that our records show you missed your scheduled appointment for a respiratory equipment fitting on [Date] at [Time].

Properly fitted equipment is essential for the effectiveness of your respiratory treatment. We would like to get you back on schedule as soon as possible to ensure there is no delay in your care.

Please contact our office at [Phone Number] during regular business hours to reschedule this appointment. If you have already called to reschedule or no longer require this service, please disregard this notice.

Please be aware that our policy requires [Number] hours' notice for cancellations. Future missed appointments may result in [mention fee or policy if applicable].

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

Sincerely,

[Staff Name/Department]
[Clinic/Facility Name]
[Phone Number]