

[Date]

[Patient Name]

[Patient Address]

[City, State, Zip Code]

Dear [Patient Name],

We missed you at your scheduled Medical Nutrition Therapy (MNT) appointment on [Date of Missed Appointment] at [Time].

Consistent sessions are an important part of managing your nutritional health and reaching your wellness goals. We understand that unexpected events occur, but we would like to get you back on track as soon as possible.

Please contact our office at [Phone Number] or reply to this email to reschedule your appointment. Our office hours are [Hours of Operation].

Please be aware of our cancellation policy: [Insert brief mention of late fee or 24-hour notice policy if applicable].

We look forward to hearing from you and continuing to support your health journey.

Sincerely,

[Provider Name/Signature]

[Title, e.g., Registered Dietitian Nutritionist]

[Clinic Name]