

[Practice Name]  
[Practice Address]  
[Phone Number]

[Date]

[Patient Name]  
[Patient Address]

Dear [Patient Name],

We missed you at your appointment scheduled for [Date] at [Time].

Our primary concern is your health and well-being. Regular follow-ups and scheduled treatments are essential for managing your healthcare needs effectively. When an appointment is missed, it can delay important screenings, medication adjustments, or necessary treatments.

We understand that unexpected things happen. However, we would like to get you back on track with your care plan as soon as possible.

Please contact our office at [Phone Number] to reschedule. You may also schedule through our online portal at [Website Link].

If you have already rescheduled or if you feel you no longer require this care, please let us know so we can update your records.

We look forward to seeing you soon.

Sincerely,

[Provider Name/Practice Manager]  
[Practice Name]