[Date]

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

Subject: Notification of Missed Appointment

Dear [Patient Name],

I am writing to you in my role as your Medical Care Coordinator. Our records indicate that you missed a scheduled appointment with [Provider/Clinic Name] on [Date of Appointment] at [Time].

Regular appointments are a vital part of your care plan and help us ensure your health needs are being met. We understand that unexpected events occur, but we missed seeing you.

Please contact our office as soon as possible at [Phone Number] to reschedule this visit. If you are experiencing any barriers to attending your appointments, such as transportation issues or scheduling conflicts, please let me know so that I can assist you.

If you have already rescheduled this appointment, please disregard this letter.

We look forward to hearing from you soon.

Sincerely,

[Your Name]
Medical Care Coordinator
[Facility/Organization Name]