

[Clinic Name]
[Clinic Address]
[City, State, Zip Code]
[Phone Number]

[Date]

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

Re: Missed Appointment for Chronic Disease Management

Dear [Patient Name],

We are writing because you missed your scheduled appointment on [Date] at [Time] for [Condition, e.g., Diabetes/Hypertension] management without providing prior notice.

Consistent monitoring is a critical part of managing your chronic condition. Missing these appointments can lead to complications, unmonitored symptoms, and delays in adjusting your treatment plan or prescriptions.

Please be advised of our office policy: [Insert policy details, e.g., fees for no-shows or potential discharge from the practice after three missed appointments].

Your health is our priority. Please contact us at [Phone Number] within the next 48 hours to reschedule this appointment. If you are experiencing any barriers to attending your visits, please let us know so we can assist you.

If you have already called to reschedule, please disregard this letter.

Sincerely,

[Provider Name/Clinic Manager]
[Clinic Name]