

# Patient Rescheduling Request

Date: [Insert Date]

Dear [Healthcare Provider's Name],

I hope this message finds you well. I am writing to request the rescheduling of my upcoming appointment originally set for [Insert Original Date and Time]. Due to [briefly explain reason, e.g., a scheduling conflict, unforeseen circumstances], I am unable to attend at this time.

I would greatly appreciate it if we could reschedule the appointment to a later date. I am available on [Insert Two or Three Alternative Dates and Times]. Please let me know if any of those options work for you, or if there are other times available.

Thank you very much for your understanding. I look forward to your reply.

Sincerely,

[Your Full Name]

[Your Contact Information]

[Your Patient ID (if applicable)]