Notice to Reschedule Medical Appointment

Date: [Insert Date]
To: [Patient's Name]
Address: [Patient's Address]
Dear [Patient's Name],
We hope this message finds you well. We are writing to inform you that your upcoming medical appointment originally scheduled for [Original Date and Time] at [Clinic/Hospital Name] needs to be rescheduled due to [Reason for Rescheduling].
We sincerely apologize for any inconvenience this may cause. We would like to offer you the following alternative dates and times for your appointment:
 [Alternative Date and Time 1] [Alternative Date and Time 2] [Alternative Date and Time 3]
Please let us know your preferred option, and we will do our best to accommodate your schedule
Thank you for your understanding.
Sincerely,
[Your Name]
[Your Title]
[Clinic/Hospital Name]
[Contact Information]