

Cancellation of Fertility Treatment Appointment

Date: [Insert Date]

To,

[Fertility Clinic Name]

[Clinic Address]

[City, State, Zip Code]

Dear [Doctor's Name or Fertility Specialist],

I hope this message finds you well. I am writing to formally cancel my upcoming fertility treatment appointment scheduled for [insert date and time] due to [brief reason if desired, e.g., personal circumstances, a change in plans, etc.].

I apologize for any inconvenience this may cause and appreciate your understanding. Please let me know if there is a need for further information from my side.

Thank you for your assistance and support.

Sincerely,

[Your Name]

[Your Contact Information]

[Your Patient ID or Reference Number, if applicable]