

Sleep Study Cancellation Notice

Dear [Patient's Name],

We hope this message finds you well. We are writing to inform you that your scheduled sleep study on [Date] at [Time] has been cancelled.

If you need to reschedule your appointment or have any questions, please do not hesitate to contact our office at [Phone Number] or [Email Address].

Thank you for your understanding.

Sincerely,

[Your Name]

[Your Title]

[Clinic/Hospital Name]

[Clinic/Hospital Address]