

# Appointment Cancellation Notice

Dear [Patient's Name],

We regret to inform you that your telemedicine appointment scheduled on [Date] at [Time] has been cancelled due to [reason for cancellation].

We apologize for any inconvenience this may cause. Please contact our office at [Office Phone Number] or [Email Address] to reschedule your appointment at your earliest convenience.

Thank you for your understanding.

Sincerely,

[Your Name]

[Your Title]

[Your Practice Name]

[Contact Information]