

# Cancellation Notice

Date: [Insert Date]

To: [Doctor's Name]

[Clinic/Hospital Name]

[Clinic/Hospital Address]

Dear [Doctor's Name],

I am writing to inform you that I need to cancel my upcoming appointment scheduled for [Date of Appointment] regarding my kidney function.

Due to [reason for cancellation, e.g., unforeseen circumstances], I am unable to attend. I apologize for any inconvenience this may cause.

Please let me know if I need to reschedule my appointment or if there are any further steps I should take.

Thank you for your understanding.

Sincerely,

[Your Name]

[Your Contact Information]