

Patient Appointment Cancellation

Date: [Insert Date]

Dear [Patient's Name],

We are writing to inform you that your follow-up appointment scheduled for [Insert Date and Time] has been canceled. We apologize for any inconvenience this may cause.

If you would like to reschedule your appointment, please contact our office at [Insert Phone Number] or [Insert Email]. We will be happy to assist you in finding a new date and time that works for you.

Thank you for your understanding.

Sincerely,

[Your Name]

[Your Title]

[Clinic/Practice Name]

[Contact Information]