

Patient No-Show Notification

Dear [Patient's Name],

We hope this message finds you well. This is to inform you that you did not attend your scheduled appointment on [Date] at [Time]. We understand that situations may arise that prevent you from keeping your appointment.

Next steps:

- Please contact our office at [Phone Number] to reschedule your appointment.
- If you have any questions or require further assistance, feel free to reach out.
- We kindly ask you to give us at least 24 hours notice for any future cancellations.

Thank you for your understanding. We look forward to seeing you soon!

Sincerely,

[Your Practice Name]

[Your Contact Information]