

Dismissal Due to Relocation

Dear [Patient's Name],

We are relocating [Medical Practice Name] to a new location as of [Date]. Unfortunately, due to distance and logistical reasons, we will be unable to continue providing care to you.

We recommend that you seek a healthcare provider closer to your residence. Our office is happy to provide your medical records for a smooth transition.

We apologize for any inconvenience and wish you the best.

Sincerely,

[Doctor's Name]

[Medical Practice Name]

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