

Medical Appointment Cancellation Letter

Subject: Cancellation of Appointment on [Date]

Dear [Doctor's Name/Clinic Name],

I regret to inform you that I must cancel my scheduled appointment on [Date] at [Time] due to [brief reason: unforeseen circumstances/conflict/illness/etc.].

I apologize for any inconvenience this may cause. I would like to reschedule at your earliest availability. Please let me know what dates and times would work for a new appointment.

Thank you for your understanding.

Sincerely,

[Your Name]

[Your Contact Information]

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