Missed Appointment Letter (From Staff):

Date: 08/08/2019

Re: [Patient’s name]

Dear Parent/Guardian,

This letter is to inform you that [patient’s name] has missed their appointment with the SCPA Ambulatory Medicine department on [date and time].

We have made several attempts to contact you at the phone number we have on file [patient’s phone number]. Therefore, we need your help in order to facilitate proper care for this patient. Please call our office at (215)427-5985 to schedule another appointment. Thank you for allowing us to provider quality healthcare for [patient’s name] .

We look forward to hearing from you soon.

Sincerely,

The Staff and Physicians at St Christopher's Pediatric Associates

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Fecha: [date of letter]

Asunto: [Patient Name]

Estimado/a padre, madre o tutor:

Le enviamos esta carta para informarle que [Patient Name] no ha asistido a su cita con el departamento de Medicina Ambulatoria de SCPA del [date and time].

Hemos intentado comunicarnos con usted en varias ocasiones al número de teléfono que figura en nuestros registros [patient’s phone number]. Por lo tanto, necesitamos su ayuda para brindarle atención adecuada a este paciente. Llame a nuestro consultorio al (215)427-5985 para programar una nueva cita. Gracias por permitirnos brindarle atención médica de calidad a [patient’s name].

Esperamos tener noticias suyas pronto.

Atentamente.

El personal y los médicos del St Christopher's Pediatric Associates

Missed Appointment Letter (From Provider):

Dear [Patient’s Name],

It has come to my attention that you missed your last appointment with me. As you know, regular medical attention is essential to maintaining your health. Please contact the office at your earliest convenience to reschedule. I look forward to seeing you soon.

Sincerely,

[Provider’s Name]

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Estimado/a [Patient Name],

Me han informado que no ha asistido a su última cita conmigo. Como usted sabe, la atención médica permanente es fundamental para mantener su salud. Le rogamos que se comunique con el consultorio a la mayor brevedad para programar una nueva cita. Espero verlo/a pronto.

Atentamente.

[Provider’s Name]

Appointment Reminder Letter:

Dear [Patient’s Name],

This is a reminder that your appointment is scheduled on [appointment date and time] for a(n) Well Child Check/ Follow Up Visit with [provider’s name].

If you cannot make this appointment, please call our office at (215) 427-5985 at least 24 hour prior to this appointment. We would be happy to reschedule your appointment for a more convenient time.

Sincerely,

The Staff and Physicians at St Christopher's Pediatric Associates

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Estimado/a [Patient’s Name]:

Le enviamos este recordatorio de su cita programada para el [appointment date and time] para un control de niño sano/una visita de seguimiento con [Provider’s Name].

Si no puede asistir a esta cita, llame a nuestro consultorio al (215) 427-5985 al menos 24 horas antes de la cita. Con gusto reprogramaremos la cita en un día y horario que sea más conveniente para usted.

Atentamente,

El personal y los médicos del St Christopher's Pediatric Associates

Normal Labs Letter:

Dear [Patient’s Name],

It was a pleasure to see you at our SCPA Ambulatory Medicine office. Your lab tests were normal. There is no need for further testing at this time. I look forward to seeing you at your next scheduled appointment.

Sincerely,

[Provider’s Name]

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Estimado/a [Patient’s Name],

Muchas gracias por asistir al consultorio de Medicina Ambulatoria del SCPA. Los resultados de sus análisis de laboratorio son normales. No necesita hacerse más análisis por el momento. Espero verlo/a pronto en su próxima cita programada.

Atentamente.

[Provider’s Name]