
Reactivation Letter

Date

Name
Address
City, State, ZIP

Dear _____,

Upon reviewing your chart recently, I noticed that it has been quite some time since your last visit. We've missed you and are concerned about you. As you know, regular preventive care is important in having good dental health.

Should I put your record on inactive status? Please help us by checking the proper line below and returning this letter today.

Thank you, and if you have any questions, please call our office at XXX-XXXX.

Sincerely,

_____ D.D.S./D.M.D.

_____ I want to remain an active patient. Please call me to schedule an appointment.
My phone number is _____.

_____ I'll call for an appointment soon.

_____ I'm not interested. Please remove my name from your active list.

_____ I've changed dentist.

_____ Comments: _____

(Insert current newsletter/Doctor's business card)

Patient's Signature