

To:

Practice name

Address

Telephone

Date:

Dear Health Visitor,

Re:

D.O.B.:

Address:

To improve sharing of information between health professionals for the benefit of children, we are informing health visitors of children under 5 who fail to attend dental appointments.

This child was referred to us for dental treatment by _____

Unfortunately he/she missed a dental appointment on _____

The child _____ has not yet attended our service for dental examination.

Delete as applicable _____ has attended previously and is known to require dental treatment or follow up.

The family have since failed to respond to our letter. It may be that they have chosen to seek dental care elsewhere. However, we would be happy to arrange another appointment at their request.

If this family is known to you, we would welcome working together to promote their oral health. Thank you for any assistance you are able to give.

Yours sincerely,

Dental Nurse