Medication Adjustment Notification

Dear [Patient's Name],

We hope this message finds you well. We are writing to inform you of a recent adjustment to your medication regimen. After careful consideration and a review of your current health status, we believe these changes will better suit your needs.

New Medication Details:

• **Medication Name:** [New Medication Name]

• **Dosage:** [New Dosage]

• **Frequency:** [New Frequency]

If you have any questions regarding this change or experience any side effects, please do not hesitate to contact our office at [Phone Number] or [Email Address].

Thank you for your attention to this matter, and for being a valued patient.

Sincerely,

[Your Name]
[Your Title]
[Medical Practice Name]
[Contact Information]