## **Important Update: Changes to Prescription Replacement Guidelines**

Date: [Insert Date]

Dear [Recipient's Name],

We are writing to inform you of recent changes to our prescription replacement guidelines. These adjustments are designed to enhance patient care and ensure the timely availability of necessary medications.

## **Overview of Changes**

- New criteria for determining eligibility for prescription replacements.
- Updated documentation requirements for lost or stolen prescriptions.
- Changes in the approval process that aim to reduce waiting times.

Please note that these changes will take effect on [Effective Date]. We encourage you to review the updated guidelines available on our website or contact our office if you have any questions.

Thank you for your attention to this important matter and for your continued partnership.

Sincerely,

[Your Name]
[Your Position]
[Your Organization]
[Contact Information]