Medication Recall Update

Date: [Insert Date]

Dear [Recipient's Name],

We are writing to inform you about an important update regarding the recent recall of [Medication Name]. As part of our commitment to your health and safety, we want to ensure that you are fully informed about the situation and the necessary next steps.

Recall Details

On [date of recall announcement], it was announced that [Medication Name] has been recalled due to [reason for recall]. This recall affects lots [list affected lots].

Next Steps

- 1. Please check your medication supply for any affected lots.
- 2. If you have any of the recalled medication, discontinue use immediately.
- 3. Contact your healthcare provider to discuss alternative treatment options.
- 4. Return the recalled medication to your pharmacy or send it to the address provided below:
 - o [Pharmacy/Manufacturer Name]
 - o [Return Address]
- 5. For more information, you can reach our customer service at [phone number] or visit our website at [website URL].

We sincerely apologize for any inconvenience this may cause and appreciate your understanding and cooperation in this matter.

Thank you for your attention to this important update.

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