Medication Expiration Date Explanation

Date: [Insert Date]

[Your Name]

[Your Title]

[Your Contact Information]

To Whom It May Concern,
We are writing to inform you about the recent expiration of the medication prescribed to you. The expiration date, as noted on the packaging, indicates the last date that the manufacturer guarantees the full potency and safety of the drug.
Using medication beyond its expiration date could lead to reduced effectiveness or unforeseen health risks. It is important to dispose of expired medications properly and consult with your healthcare provider for a replacement.
If you have any questions or concerns regarding your prescription, please feel free to reach out to us.
Thank you for your attention to this important matter.
Sincerely,