

Revised Allergy Information

Dear [Patient's Name],

We are reaching out to provide you with important updates regarding your allergy information. It is crucial for your health and safety that we keep this information current.

Allergy Information Summary

- **Allergy 1:** [Description]
- **Allergy 2:** [Description]
- **Allergy 3:** [Description]
- Additional comments: [Any additional information]

We recommend that you review this information regularly and notify our office if there are any changes to your allergy status. Your well-being is our priority.

If you have any questions or need further assistance, please do not hesitate to contact us at [Contact Information].

Thank you for your attention to this important information.

Sincerely,

[Your Name]

[Your Title]

[Your Practice Name]

[Contact Information]