Allergy Status Update

Date: [Insert Date]

To: [Medical Staff Name]

From: [Your Name]

Patient ID: [Patient ID]

Patient Name: [Patient Name]

Dear [Medical Staff Name],

This letter is to inform you of an update regarding the allergy status of the patient referenced above.

Previous Allergy Information:

• Allergy 1: [Details]

• Allergy 2: [Details]

Updated Allergy Information:

• New Allergy: [Details]

• Severity: [Mild/Moderate/Severe]

• Additional Notes: [Any relevant information]

Please update the patient's medical records accordingly and ensure that this information is taken into consideration during any future treatments or procedures.

Thank you for your attention to this matter.

Sincerely,

[Your Name]

[Your Position]

[Your Contact Information]