

Date: [Insert Date]

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Recipient's Name]

[Recipient's Title/Position]

[Clinic/Hospital Name]

[Address]

[City, State, Zip Code]

Dear [Recipient's Name],

I hope this message finds you well. I am writing to request clarification regarding the recent changes made to my drug regimen as discussed during my last appointment on [insert date of appointment].

Specifically, I would like to understand:

- Reasons for the change in medication.
- Any potential side effects I should be aware of.
- How to properly transition from my previous medications.
- Any specific follow-up steps I should take.

Thank you for your attention to this matter. I appreciate your guidance and look forward to your prompt response.

Sincerely,

[Your Name]