

# Important: Medication Recall Notification

Date: [Insert Date]

To: [Recipient Name]  
[Recipient Address]  
[City, State, Zip Code]

Dear [Recipient Name],

We are writing to inform you about a recall of the medication [Medication Name] with the Lot Number [Lot Number]. This action has been initiated due to [brief reason for recall, e.g., potential contamination, labeling error, etc.].

We kindly ask that you take the following steps:

1. Discontinue use of the product immediately.
2. Check your inventory and isolate any remaining units of the recalled product.
3. Return the affected medication to [return address or instructions].

We understand that this may cause inconvenience and we appreciate your cooperation and understanding during this time. For any questions, please contact our Customer Service Department at [Customer Service Phone Number] or email us at [Customer Service Email].

Thank you for your prompt attention to this matter.

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