

# Medication Side Effect Inquiry

[Your Name]  
[Your Address]  
[City, State, Zip Code]  
[Email Address]  
[Phone Number]  
[Date]

[Recipient's Name]  
[Recipient's Title]  
[Recipient's Institution/Organization]  
[Recipient's Address]  
[City, State, Zip Code]

Dear [Recipient's Name],

I hope this message finds you well. I am writing to inquire about the potential side effects associated with [Medication Name]. I have recently been prescribed this medication and would like to gather more information regarding its effects and any precautions I should be aware of.

I have been experiencing [describe any symptoms or concerns you have] since starting the treatment, and I would appreciate your insights on whether these could be related to the medication.

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

Sincerely,

[Your Name]