

Prescription Feedback Submission

Date: [Insert date]

To: [Pharmacy/Doctor's Name]

From: [Your Name]

Address: [Your Address]

Contact Number: [Your Contact Number]

Email: [Your Email]

Subject: Feedback on Prescription

Dear [Pharmacy/Doctor's Name],

I hope this message finds you well. I am writing to provide feedback on my recent prescription dated [Insert prescription date].

Details of the prescription:

- Prescription Number: [Insert prescription number]
- Medication: [Insert medication name]
- Dose: [Insert dosage information]

Feedback:

[Share your feedback regarding the prescription, effects, or any issues faced.]

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

Sincerely,

[Your Name]