## **Announcement of Changes to Arthritis Treatment Protocol**

Date: [Insert Date]

Dear [Patient's Name],

We are writing to inform you about important changes to your arthritis treatment protocol that will be implemented starting [Insert Start Date]. After careful consideration and review of the latest research and guidelines, our goal is to enhance your treatment experience and improve outcomes.

## **Changes to Your Treatment Protocol:**

- Medication Adjustments: [Details about any new medications, dosages, or discontinuation of current medications]
- **Physical Therapy:** [Information about new physical therapy referrals or different approaches]
- **Monitoring Schedule:** [Details on any changes in follow-up appointments or monitoring protocols]

We understand that changes to your treatment may raise questions or concerns. Please do not hesitate to reach out to our office at [Insert Contact Information] if you would like to discuss these changes further.

Thank you for your continued trust in our care. We are committed to providing you with the highest level of service and support during your treatment journey.

Sincerely,

[Doctor's Name]

[Practice Name]

[Contact Information]