

Pharmaceutical Change Announcement

[Date]

[Recipient Name]

[Recipient Title]

[Company Name]

[Company Address]

Dear [Recipient Name],

We are writing to inform you about an important change regarding our product, [Product Name]. Effective [Effective Date], there will be a [brief description of the change, e.g., formulation change, packaging update, etc.]. This decision has been made to [reason for change, e.g., enhance efficacy, improve safety, align with regulatory requirements, etc.].

We remain committed to ensuring that our products meet the highest standards of quality and safety. As such, we want to assure you that [any relevant assurances regarding the product's integrity, safety, or compliance].

If you have any questions or require further details regarding this change, please do not hesitate to contact us at [Contact Information].

Thank you for your understanding and continued support.

Sincerely,

[Your Name]

[Your Title]

[Company Name]

[Company Contact Information]