

Patient Safety Measures Notification

Date: [Insert Date]

To: [Patient's Name]

Address: [Patient's Address]

Dear [Patient's Name],

We hope this letter finds you well. We are writing to inform you about important safety measures that we have implemented at our facility to ensure your wellbeing during your visits.

Safety Measures Implemented:

- Regular sanitation of all equipment and surfaces.
- Mandatory mask-wearing for all staff and visitors.
- Social distancing protocols in waiting areas.
- Screening of patients upon arrival for temperature and symptoms.
- Contactless check-in process to minimize interaction.

Your safety is our utmost priority, and we are committed to providing a safe environment for all our patients. If you have any questions or concerns regarding these measures, please do not hesitate to reach out to us.

Thank you for your continued trust in our care.

Sincerely,

[Your Name]

[Your Title]

[Facility Name]

[Contact Information]