

[Your Practice Letterhead]

[Date]

[Patient's Name]

[Patient's Address]

[City, State, Zip Code]

Dear [Patient's Name],

We hope this message finds you well. We are writing to inform you about some important changes that will be taking place at our practice.

[Briefly describe the change: e.g., new office hours, changes in policies, staff changes, etc.]

We understand that changes can be an adjustment, and we are here to assist you through this transition. If you have any questions or concerns, please feel free to reach out to our office at [phone number] or [email address].

Thank you for your understanding and for being a valued patient.

Sincerely,

[Your Name]

[Your Title]

[Practice Name]

[Contact Information]

[Website URL, if applicable]

[Optional: Practice Logo]