**This letter is for you to adapt for your patient(s). Please ensure that you customise the text highlighted in yellow so that the information is appropriate. Please also ensure that once you have made your amendments, any important information isn’t split across two pages, or that an instruction to continue on to a second page is added.**

Insert practice header or print to practice headed paper, or type address details below.

[Practice name]

[Address]

[Tel]

[Email]

[Date]

[Title\_Initial\_Surname]

[Patient Address Block]

Dear [Title] [Surname],

**Your Dry Eye preparation will no longer be available on NHS Prescription**

Dear Mr/Mrs/Miss [Surname],

As a practice we constantly review repeat prescriptions to make sure that we are following the latest NHS guidance and providing the best value for the NHS.

We are currently reviewing the prescribing of dry eye preparations based on the NHS England published guidance that recommends reducing the prescribing of medicines or treatments that are available to buy over the counter.

NHS Dorset recommend that these products should no longer be prescribed, however they are available to buy from pharmacies and most supermarkets, therefore you will still have access to these products should you wish to continue using them.

If you have any questions about this change, please contact your GP/Nurse/Pharmacist (delete as appropriate).

|  |  |
| --- | --- |
| **GP/Nurse/Pharmacist** [delete as applicable] | [Add number] |

Yours sincerely

Dr [insert name] and partners

[insert practice name]