# NMS

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| --- | --- | --- | --- | --- | --- | --- |
|  | Patient Name |   |   |  | Prescriber’s name |        |
| House number and street name |  | Surgery Name |
| Town |   |  | Street Name |
| Postcode |   |  | Town |
| NHS Number:  |   |  | Postcode |
|  |  | Contact tel number |

Dear <patient name> <Date>

**We would like to help you manage your health and medicines.**

Following your appointment today and as we agreed, you have been prescribed one or more medicines.

Detail of new medicine(s) prescribed:

<insert drug names><insert first prescribed date>

We want to support you in managing your condition and your new medicine. To do this we need you to read this letter and attend a free consultation with your community pharmacy (chemist). This is in addition to the routine reviews offered by other members of our team such as your nurse, GP, GP practice pharmacist and/or hospital.

We are all here to support you and help with any concerns that you might have. Please remember the following:

* If you have any concerns about your medicines, raise them with one of the healthcare professionals. It’s OK to ask.
* Please let us know if you are having any difficulties in taking your medicines as prescribed.
* Please attend any review appointment arranged by the GP practice.
* Attending the community pharmacy review will provide you with additional support.
* Ensure you maintain a healthy lifestyle. For more information on staying healthy and making better choices see: Change for Life <https://www.nhs.uk/change4life/>

**What to do next?**

Please take this letter to your usual community pharmacy (chemist) to arrange an appointment for a New Medicines Service review.

The New Medicine Service is a free NHS consultation, offered through your pharmacy, to help you understand your condition, get the most out of your new medicine(s) and discuss any concerns. The pharmacist will:

* help you to find out more about the new medicine(s) you are taking
* help to sort out any issues you are having with your new medicine(s)
* give you a chance to ask questions about your medicine(s) and discuss any concerns
* help to improve the effectiveness of your new medicine, for example, there may be an easier or better way to take it.
* help you to make your own decisions about managing your condition.
* help you to improve your health, which could lead to fewer GP and hospital visits.

If you would like further information about this free review, please speak to your pharmacist, GP or nurse.

Yours sincerely

On behalf of Dr XX and Partners at XX Surgery

NMS

INFORMATION FOR COMMUNITY PHARMACY

Dear Pharmacist

This p

atient

has been

newly prescribed

a medication and would benefit from the New

Medicines Service.

Please arrange a mutually convenient time for this patient to attend the

pharmacy for this

service.

