Initiating Centre to add Address and Contact Details

Date

GP Details

Dear GP practice

**Re: FreeStyle Libre 2® Changeover**

Re : PATIENT NAME/ NHS number/ Date of Birth

**Repeat prescription amendment required**

Your patient is currently prescribed the *FreeStyle Libre® flash glucose monitoring system* in line with the local prescribing policy. This system has been upgraded to *FreeStyle Libre 2® flash glucose monitoring system*. The patient has been provided with information by our team on how to upgrade to this newer and more advanced option and has our contact details should further advice be needed. There is no change to the tariff price or cost impact of making this change, however it is likely to provide additional benefits given alarms for high or low glucose and improved accuracy.

**Please can we request that the repeat prescription record is updated as follows:**

* **Please ADD:** **Freestyle Libre 2 sensors.** Please prescribe enough to cover the patient’s usual prescription interval. One sensor lasts 14 days, therefore if the patient is usually prescribed 56 days medication, please prescribe four sensors
* **Please REMOVE:** Freestyle Libre sensors

Please ensure patients still have access to finger prick blood glucose testing strips and lancets. Freestyle Libre/Freestyle Libre 2 are not complete substitutes for blood glucose testing. Finger-prick blood glucose testing is still required in certain circumstances. Please see the South East London Flash Glucose guidance for further information if needed.

Yours sincerely

Diabetes Team

cc patient

**South East London Template letter approval date:** March 2021 **Review date:** March 2023 or sooner if evidence or practice changes