

Date: [Date]

Patient Name: [Patient Name]

Date of Birth: [DOB]

Patient ID: [ID Number]

Dear [Patient Name],

I am writing to provide you with the results of your recent rheumatology diagnostic consultation and laboratory testing conducted on [Date].

Summary of Findings:

- **Clinical Assessment:** [Brief summary of symptoms and physical exam findings]
- **Laboratory Results:** [List key antibody tests, inflammatory markers, and blood counts]
- **Imaging Results:** [List X-ray, Ultrasound, or MRI findings if applicable]

Diagnosis:

[Confirmed Diagnosis or Differential Diagnosis]

Discussion:

[Explanation of how the results confirm or rule out specific autoimmune conditions such as Rheumatoid Arthritis, Lupus, Psoriatic Arthritis, etc.]

Plan of Care:

1. **Medication:** [Prescription details and instructions]
2. **Follow-up Testing:** [Dates for repeat blood work or imaging]
3. **Referrals:** [Referrals to physical therapy or other specialists]
4. **Next Appointment:** [Date and time of follow-up office visit]

Please contact our office at [Phone Number] if you have any questions regarding these results or if you experience any new or worsening symptoms.

Sincerely,

[Doctor Name], MD/DO

[Practice Name]

[Department of Rheumatology]