

[Date]

[Patient Name]

[Patient Address]

[City, State, Zip Code]

Dear [Patient Name],

We are writing to provide you with the results of your recent cervical cancer screening (Pap test and/or HPV test) performed on [Date of Procedure].

Your Result: [Insert Result - e.g., Normal / Negative / Abnormal / Inconclusive]

What this means:

[Insert explanation - e.g., No abnormal cells or high-risk HPV types were found at this time. / Some cell changes were detected that require further evaluation.]

Follow-up Recommendation:

Based on these results, your next recommended step is:

- [Option 1: Routine screening in [3/5] years.]
- [Option 2: Repeat testing in [6/12] months.]
- [Option 3: Schedule a follow-up appointment for a colposcopy.]

Regular screening is the most effective way to prevent cervical cancer. If you have any questions regarding these results or would like to discuss them further, please contact our office at [Phone Number].

Sincerely,

[Provider Name/Clinic Name]

[Contact Information]