

[Date]

[Patient Name]

[Patient Address]

[City, State, Zip Code]

**RE: SECOND NOTICE - FOLLOW-UP REQUIRED**

Dear [Patient Name],

We are writing to you because we have not yet received a response to our previous letter regarding your recent Pap smear results dated [Date of Test].

As mentioned in our first notice, your results were **abnormal**. While an abnormal result does not necessarily mean cancer, it is essential that we perform further diagnostic testing to ensure your health and safety.

Please contact our office at **[Phone Number]** as soon as possible to schedule a follow-up appointment. We recommend scheduling this within the next [Number] days.

If you have already scheduled an appointment or have begun treatment with another provider, please let us know so we can update your medical records.

Your health is our priority, and we look forward to hearing from you immediately.

Sincerely,

[Provider Name/Signature]

[Practice Name]