

[Date]

[Patient Name]

[Patient Address]

[City, State, Zip Code]

Re: Colposcopy Biopsy Results

Dear [Patient Name],

We are writing to provide you with the results of the biopsy taken during your recent colposcopy procedure performed on [Date of Procedure].

**Your Results:**

[Insert Specific Results: e.g., Normal / CIN 1 / CIN 2 / CIN 3 / Benign Inflammation]

**Explanation of Results:**

[Insert Brief Clinical Explanation]

**Next Steps and Recommendations:**

- [Recommendation 1: e.g., Repeat Pap smear in 6 months]
- [Recommendation 2: e.g., Schedule a follow-up treatment procedure]
- [Recommendation 3: e.g., No further action needed at this time]

If your results require a follow-up appointment or procedure, our office will contact you shortly to schedule this. Alternatively, you may call us at [Phone Number] to discuss these results further or to arrange your next visit.

Please note that it is important to follow the recommended timeline for your next screening to ensure continued health.

Sincerely,

[Provider Name/Signature]

[Clinic/Practice Name]

[Contact Information]