

Date: [Insert Date]

To the Parents/Guardians of: [Child's Full Name]

Date of Birth: [Child's Date of Birth]

Dear Parent or Guardian,

This letter is to inform you of the results of your child's recent blood lead screening test performed on [Date of Test].

Test Result: [Insert Result Value] $\mu\text{g}/\text{dL}$

Interpretation of Results:

- **Low Risk (Less than 3.5 $\mu\text{g}/\text{dL}$):** No immediate action is required. We will continue to monitor your child during their next scheduled well-child visit.
- **Elevated (3.5 $\mu\text{g}/\text{dL}$ or higher):** This result is higher than the current reference level. We recommend a follow-up test and an evaluation of potential lead sources in your home.

Lead exposure can come from various sources, including old paint dust, contaminated soil, or certain imported toys and ceramics. Even small amounts of lead can affect a child's growth and development.

Next Steps:

[Insert specific instructions, e.g., "No further action is needed at this time" OR "Please call our office to schedule a follow-up venous blood test within 30 days."]

If you have any questions regarding these results or would like more information on lead prevention, please contact our office at [Phone Number].

Sincerely,

[Provider Name/Signature]

[Clinic/Practice Name]