

Date: [Date]

Patient Name: [Patient Name]

Date of Birth: [DOB]

Patient ID: [ID Number]

Dear [Patient Name],

We are writing to provide you with the results of your recent Gastrointestinal (GI) Panel stool sample analysis, which was collected on [Collection Date].

Test Summary:

[] **Negative:** No common bacterial, viral, or parasitic pathogens were detected in your sample.

[] **Positive:** The following organism(s) were identified: [Detected Pathogen Name].

Provider Comments:

[Insert clinical notes or treatment plan here]

Next Steps:

- If your results are positive, a prescription has been sent to [Pharmacy Name] (if applicable).
- Please continue to stay hydrated and practice thorough handwashing.
- Follow up with our office if your symptoms worsen or if you develop a high fever.

If you have any questions regarding these results, please contact us at [Phone Number] or through the patient portal.

Sincerely,

[Provider Name]

[Clinic/Practice Name]