

[Date]

[Patient Name]

[Patient Address]

[City, State, Zip Code]

Dear [Patient Name],

I am writing to provide an update regarding your recent medical evaluation and test results for [Condition/Symptom].

At this time, your initial test results are inconclusive. This means the results do not provide a clear "yes" or "no" answer regarding a specific diagnosis. Diagnostic uncertainty can occur when symptoms are in the early stages, when tests are performed too soon after the onset of illness, or when results fall within a borderline range.

To ensure we reach an accurate conclusion and provide the most appropriate care, we have scheduled a follow-up appointment or retest as follows:

Retest/Appointment Type: [Type of Test or Consult]

Date: [Date]

Time: [Time]

Location: [Facility Name/Department]

It is important to proceed with this retesting to monitor any changes in your condition. In the meantime, please monitor your symptoms closely. If you experience any of the following "red flag" symptoms, please contact our office immediately or seek emergency care:

- [Symptom 1]
- [Symptom 2]
- [Symptom 3]

If you have any questions regarding this process or why further testing is necessary, please call our office at [Phone Number].

Sincerely,

[Provider Name]

[Practice Name]