

[Practice/Clinic Name]
[Address Line 1]
[City, State, Zip Code]
[Phone Number]

[Date]

[Patient Name]
[Patient Address]
[City, State, Zip Code]

Dear [Patient Name],

We are writing to provide you with the results of your recent blood work performed on [Date of Test] to monitor your [Medication Name] levels.

Result Summary:

- **Medication Level:** [Result Value]
- **Reference Range:** [Normal Range]
- **Status:** [Normal / High / Low]

Your results indicate that your medication levels are currently within the expected range. No changes to your dosage are required at this time. Please continue taking your medication exactly as prescribed.

We will continue to monitor these levels as part of your routine care. Your next scheduled blood test should occur on or around [Next Date].

If you have any questions regarding these results or if you are experiencing any new side effects, please contact our office at [Phone Number].

Sincerely,

[Provider Name/Signature]
[Title]