URGENT: MEDICAL APPOINTMENT REQUESTED

Date: [Insert Date]

Patient Name: [Insert Patient Name]
Date of Birth: [Insert Date of Birth]
Patient ID/Reference: [Insert ID Number]

Dear [Patient Name],

We have received the results of your recent Prostate Specific Antigen (PSA) blood test performed on [Insert Date of Test].

Your results require a prompt follow-up discussion with your healthcare provider. Please contact our office as soon as possible at [Insert Phone Number] to schedule an urgent consultation. This appointment is necessary to review the findings, discuss what they mean for your health, and determine the next steps in your care.

When you call, please inform the receptionist that you are calling regarding "Urgent PSA Test Results" so that we can prioritize your scheduling.

If you have already scheduled a follow-up appointment regarding these results, please confirm the date and time with our staff.

We look forward to speaking with you soon.

Sincerely,

[Insert Provider Name/Signature]
[Insert Clinic/Practice Name]
[Insert Contact Information]