

[Clinic Name]
[Clinic Address]
[Phone Number]
[Date]

Patient Name: [Patient Name]
Date of Birth: [DOB]
Date of Test: [Date of Lab Work]

Dear [Patient Name],

We have received the results of your recent Comprehensive Metabolic Panel (CMP). This blood test measures several substances in your body, including glucose, electrolytes, and markers for kidney and liver function.

Review of Results:

Your results are within the normal range.
 Your results show some abnormalities in: [List specific markers, e.g., Glucose, Potassium, etc.].

Prescription Updates:

Based on these results, we are making the following adjustments to your medications:

- **Current Medication:** [Name of Medication]
Action: [No change / Increase dose / Decrease dose / Discontinue]
- **New Medication:** [Name of Medication]
Dosage: [Dose and Frequency]
Reason: [Reason for starting]

Next Steps:

No further action is needed at this time.
 Please schedule a follow-up appointment in [Time Frame].
 Please repeat the blood work on [Date].

Your new prescription has been sent to [Pharmacy Name]. If you have any questions regarding these changes or your lab results, please call our office at [Phone Number].

Sincerely,

[Provider Name]
[Provider Title]