

[Doctor or Clinic Name]
[Address]
[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 health screening conducted on [Date of Screening].

Summary of Results:

- **Blood Pressure:** [Result] (Normal/Elevated)
- **Cholesterol Levels:** [Result] (Within Range/Action Required)
- **Blood Glucose:** [Result] (Normal/Follow-up Needed)
- **Body Mass Index (BMI):** [Result]
- **Other Tests:** [Result/Details]

Provider Comments:

[Insert specific notes regarding whether results were normal, or if lifestyle changes/medications are recommended.]

Next Steps:

- [] No further action is required at this time. We recommend a follow-up in [Time Frame].
- [] Please schedule a follow-up appointment to discuss these results in detail.
- [] Please begin the recommended treatment plan as discussed.

If you have any questions or would like to view your full lab report, you may access it via the patient portal or contact our office at [Phone Number].

Sincerely,

[Doctor's Name/Signature]
[Clinic Name]