

[Date]

[Patient Name]

[Patient Address]

[City, State, Zip Code]

Subject: Important: Cholesterol Screening Based on Family History

Dear [Patient Name],

We are writing to you because our records indicate a history of high cholesterol or early heart disease within your family. Because these conditions can be hereditary, we recommend that you undergo a baseline cholesterol screening (lipid panel).

High cholesterol often has no visible symptoms but can increase the risk of heart disease and stroke. Identifying elevated levels early allows us to manage your health through lifestyle changes or preventative care.

Next Steps:

- Please call our office at [Phone Number] to schedule a blood test.
- This test usually requires fasting (no food or drink except water) for 9 to 12 hours prior to the appointment.
- Once the results are available, we will schedule a follow-up to discuss them with you.

If you have already had a cholesterol screening performed by another provider within the last 12 months, please let us know so we can update your medical records.

Sincerely,

[Provider Name/Signature]

[Practice Name]