[Date]

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

Dear [Patient Name],

We are writing to provide you with the results of your recent thyroid panel blood work performed on [Date of Lab Test].

Your Results:

- TSH: [Result] (Reference Range: [Range])
- Free T4: [Result] (Reference Range: [Range])
- Free T3: [Result] (Reference Range: [Range])

Provider Assessment:

[ ] Your results are within the normal range. No further action is required at this time.

[ ] Your results show values outside of the normal range. Specifically: [Notes].

Next Steps:

[ ] Continue your current medication dosage as prescribed.

[ ] Please adjust your medication to [New Dosage] starting [Date].

[ ] Please schedule a follow-up appointment to discuss these results in detail.

[ ] Repeat lab work is required in [Number] weeks/months.

If you have any questions or are experiencing new symptoms, please contact our office at [Phone Number].

Sincerely,

[Provider Name]
[Clinic Name]