Date: [Date]

Patient Name: [Patient Full Name]
Date of Birth: [DOB]
Medical Record Number: [MRN]

Dear [Patient Name],

This letter is to follow up on your recent visit to the Endocrinology Clinic and review your thyroid laboratory results from [Date of Labs].

Your Laboratory Results:

- **TSH:** [Result] (Reference Range: [Range])
- **Free T4:** [Result] (Reference Range: [Range])
- **[Other Test, e.g., T3/Antibodies]:** [Result]

Clinical Assessment:
Based on these results, your thyroid levels are currently [stable / high / low].

Plan of Care:

- **Medication Changes:** [No changes / Change dose to X mg / Start new medication]
- **Instructions:** [e.g., Take medication on an empty stomach 30-60 minutes before breakfast]
- **Next Lab Work:** Please have your blood drawn again in [Number] weeks/months.
- **Follow-Up Appointment:** Your next scheduled office visit is on [Date] at [Time].

If you experience new symptoms such as heart palpitations, excessive fatigue, or significant weight changes before your next appointment, please contact our office at [Clinic Phone Number].

Sincerely,

[Provider Name, Credentials]
[Clinic Name]
[Clinic Address]