[Date]

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

Dear [Patient Name],

We are contacting you regarding the lab work and diagnostic tests ordered during your recent visit on [Date of Visit].

Our records indicate that we have not yet received the results for the following requested tests:

- [Test Name 1]
- [Test Name 2]
- [Test Name 3]

If you have already completed these tests, please let us know the name of the facility or laboratory where the tests were performed so we may request the records. If you have not yet completed this intake, please do so as soon as possible, as these results are necessary for your ongoing care and treatment plan.

If you require a new copy of the lab requisition form or need assistance finding a testing location, please contact our office at [Phone Number].

Thank you for your prompt attention to this matter.

Sincerely,

[Provider Name/Office Name]
[Clinic Name]
[Contact Information]