

Date _____

Patient Address
(See Demographics sheet)

Dear Mr./Mrs. _____ (see Demographics Sheet)

You were recently seen in the Emergency Department at Robinson Memorial Hospital. During that visit you had (laboratory / radiology) studies performed. Upon review of your studies, they show

This (does/does not) appear to be related to the reason for your visit.

(We attempted to contact you by telephone but were unsuccessful.)

(We contacted you by telephone and discussed this. We are sending this letter to confirm our conversation and your need to follow-up for further evaluation by your doctor.)

You will need to follow-up with your doctor or the doctor to whom you were referred within _____ days for further evaluation. A copy of this letter is being sent to your doctor.

If you have any further questions or would like to discuss this matter further, you may contact me at 330.297.2850.

Sincerely,

Copy: medical records
physician named above