

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]
[Recipient Name]
[Recipient's Title]
[Organization/Company Name]
[Address]
[City, State, Zip Code]

Dear [Recipient Name],

Subject: TB Test Compliance Letter

I hope this message finds you well.

I am writing to confirm my compliance with the tuberculosis (TB) testing requirements as mandated by [organization/policy name]. I have undergone the required TB test on [test date] and received the results on [result date].

Result: [Positive/Negative]

Test Type: [Mantoux Tuberculin Skin Test or QuantiFERON-TB Gold Test]

Provider: [Name of the healthcare provider or clinic]

I have attached a copy of my test results and any relevant documentation for your records. Should you require any further information or clarification, please do not hesitate to contact me.

Thank you for your attention to this matter.

Sincerely,

[Your Name]

[Your Job Title] (if applicable)

[Your Department] (if applicable)