

[Your Clinic/Institution Letterhead]

[Address]

[City, State, Zip Code]

[Phone Number]

[Email Address]

[Date]

[Patient's Name]

[Patient's Address]

[City, State, Zip Code]

Dear [Patient's Name],

Subject: Tuberculosis (TB) Test Results

We hope this letter finds you well. We are writing to inform you of the results of your recent tuberculosis (TB) test conducted on [test date].

****Test Type:**** [Mantoux Test / IGRA / Other]

****Test Date:**** [Test Date]

****Results:**** [Positive/Negative]

****Interpretation:**** [Provide interpretation, e.g., "A positive result indicates that you have been exposed to the TB bacteria," or "A negative result suggests no current TB infection."]

If you have received a positive result, we recommend scheduling a follow-up appointment to discuss further evaluation and potential treatment options. Please contact our office at [phone number] to arrange this appointment.

If your result is negative, no further action is required at this time; however, if you experience any symptoms suggestive of TB, please seek medical attention promptly.

Thank you for your attention to this important health matter. Please feel free to reach out if you have any questions or concerns regarding your results.

Sincerely,

[Your Name]

[Your Title]

[Your Clinic/Institution Name]

[Contact Information]