## **Neurological Exam Follow-Up**

[Clinic/Hospital Name]

Date: [Insert Date] Patient Name: [Insert Patient Name] Patient ID: [Insert Patient ID] Dear [Patient's Name], This letter is to follow up on your recent neurological examination conducted on [Insert Date of Exam]. We appreciate your cooperation during this assessment. During the exam, we evaluated the following: Motor function Sensory response Reflexes • Cognitive function The findings were as follows: • Motor function: [Insert Findings] • Sensory response: [Insert Findings] • Reflexes: [Insert Findings] • Cognitive function: [Insert Findings] Based on these results, we recommend the following steps for your continued care: • [Recommendation 1] • [Recommendation 2] • [Recommendation 3] Your next appointment is scheduled for [Insert Date]. Please feel free to reach out if you have any questions or concerns. Thank you for your attention to this matter. Sincerely, [Doctor's Name] [Doctor's Title]

[Contact Information]