## **Health Screening Results**

Date: [Insert Date]

Company Name: [Insert Company Name]

Employee Name: [Insert Employee Name]

Employee ID: [Insert Employee ID]

Department: [Insert Department]

## **Health Screening Summary**

Health Indicator	Result	Normal Range
Blood Pressure	[Insert Result]	[Insert Normal Range]
Cholesterol Level	[Insert Result]	[Insert Normal Range]
Blood Sugar Level	[Insert Result]	[Insert Normal Range]
Body Mass Index (BMI)	[Insert Result]	[Insert Normal Range]

## Recommendations

- [Insert Recommendation 1]
- [Insert Recommendation 2]
- [Insert Recommendation 3]

If you have any questions regarding your health screening results, please feel free to contact the HR department.

Best regards,
[Insert Your Name]
[Insert Your Position]
[Insert Company Name]