

# Neurological Exam Outcomes and Next Steps

Date: [Insert Date]

Patient Name: [Patient's Name]

Patient ID: [Patient ID]

Referring Physician: [Physician's Name]

**Dear [Patient's Name],**

Thank you for attending your recent neurological evaluation. Here are the outcomes from your examination:

## **Exam Findings:**

- Cognitive function: [Brief summary]
- Motor function: [Brief summary]
- Sensory function: [Brief summary]
- Reflexes: [Brief summary]
- Coordination: [Brief summary]

## **Diagnosis:**

[Diagnosis if applicable]

## **Next Steps:**

1. Schedule follow-up visit on [Date].
2. Recommended tests: [List of tests]
3. Referral to [Specialist's Name] if necessary.
4. Medication adjustments: [Details if applicable].

Please feel free to reach out to our office if you have any questions or concerns regarding your findings or next steps.

**Sincerely,**

[Your Name]

[Your Title]

[Clinic Name]

[Contact Information]