Health Screening Results

Date: [Insert Date]

Employee Name: [Insert Employee Name]

Employee ID: [Insert Employee ID]

Department: [Insert Department]

Health Screening Results Summary

Test	Results	Normal Range
Blood Pressure	[Insert Result]	[Insert Normal Range]
Cholesterol Level	[Insert Result]	[Insert Normal Range]
Blood Glucose Level	[Insert Result]	[Insert Normal Range]

Recommendations

[Insert any recommendations based on the results]

If you have any questions regarding your results, please do not hesitate to contact the Health and Safety Department.

Best regards,

[Your Name]
[Your Title]
[Company Name]