

**Lung Screening Study  
Result Letter to Participant**

[DATE]

[PARTICIPANT NAME]  
[PARTICIPANT ADDRESS]

Dear [PARTICIPANT NAME],

Recently you participated in a voluntary screening exam as part of the Lung Screening Study. **Your (CHEST X-RAY/SPIRAL CT) exam revealed abnormalities in your lungs. The possibility that these abnormalities represent lung cancer cannot be ruled out.** The attached report provides you with detailed results of your exam.

**It is necessary for you to receive additional medical attention.** I urge you to see your primary care physician (doctor) as soon as possible. When you see your doctor, you should talk with him or her about whether you should see a recognized specialist for further evaluation of your test results. A copy of your test results has been mailed to your doctor if you provided the name of a doctor when you started in the study.

If you do not have a doctor, or would like your records sent to another doctor or a recognized specialist, please contact us and we will help you to identify health care providers.

The screening examination was not intended to be a complete physical examination or a substitute for a visit to a doctor. **It is very important that you see your doctor in a timely fashion to discuss your test results.**

If you have any questions about your exam results or any other aspect of the Lung Screening Study, please do not hesitate to call NAME, Lung Screening Study Project Coordinator at (###) ### - ####.

Thank you for your participation in the Lung Screening Study.

Sincerely,

Principal Investigator  
Lung Screening Study