

**Attachment 6B  
Template**

**(ATSDR Letterhead)**  
Flesch-Kincaid Reading level – 11.7

**Sample Results Letter to a Pregnant Woman or Woman of Child Bearing Age  
(15 to <45 years)**

DATE \_\_\_\_\_

Name XXXXX  
Address XXXX

Dear \_\_\_\_\_

Thank you for participating in the Agency for Toxic Substances and Disease Registry's (ATSDR) Exposure Investigation (EI) in Iola, Kansas. The goal of the EI is to determine whether people living in the city of Iola are being exposed to lead.

ATSDR collected venous blood from you on [Month Day, Year]. This letter contains the results of your blood lead tests.

Your test results are shown below.

| <b>Blood Lead Test Results for</b> |                    | <b>First name Last name</b>         |
|------------------------------------|--------------------|-------------------------------------|
| <b>Test</b>                        | <b>Test Result</b> | <b>Investigation Exposure Level</b> |
| Blood Lead                         | XXX µg/dL          | 5 µg/dL <sup>1</sup>                |

**Reporting women blood lead level:**

*Insert G. Blood Lead Level below Investigation Exposure Level (IEL)*

*Insert H. Blood Lead Level equal to or above Investigation Exposure Level (IEL)*

ATSDR's recommendations for reducing exposure to lead are in the enclosed factsheets.

If you have questions concerning this Exposure Investigation or your test results, please contact me at 770-488-0744, toll-free at (888) 892-1320 or by email at [LRosales-Guevara@cdc.gov](mailto:LRosales-Guevara@cdc.gov).

Sincerely,

Luly Rosales-Guevara, MD  
Principal Investigator – Iola, Kansas Exposure Investigation  
ATSDR Division of Community Health Investigations, Exposure Investigation Team

Enclosures {Factsheet B}