**Attachment 1d**

Form Approved

OMB No. 0920-0950

 Exp. Date: 11/30/2021

**Report of Findings - Example**

**DEPARTMENT OF HEALTH & HUMAN SERVICES**

Centers for Disease Control and Prevention

National Health and Nutrition Examination Survey

National Center for Health Statistics 3311 Toledo Road, MS P08

Hyattsville, Maryland 20782

Jane Doe

**101** Deer Lane

Buck, MI 00000

Dear Parent or Guardian,

We appreciate your child's participation in the National Health and Nutrition Examination Survey conducted by the National Center for Health Statistics, part of the Centers for Disease Control and Prevention. By taking part in this survey, your child has helped add to our knowledge about the health status of people living in the United States. The information we collect is used to evaluate the country's health problems, develop health programs, and improve the quality of medical care.

The examination given to your child was not a complete examination and was not intended to be a substitute for visits to his/her medical provider. However, the enclosed report contains results of your child's examination that may be useful to maintaining and promoting his/her health.

If you have any questions about the results of your child's examination, you can reach me on one of our toll-free numbers below between 7:30 AM and 4:30 PM Eastern Time, Monday through Friday.

|  |  |  |
| --- | --- | --- |
| English: | 1-800-452-6115, press "1" | Chinese: 1-866-887-7996, press "1" |
| Spanish: | 1-800-452-6115, press "2" | Korean: 1-866-887-7996, press "2" |
| Sincerely, |  | Vietnamese: 1-866-887-7996, press "3" |



Duong T. Nguyen, D.O.

Senior Medical Officer

Enclosure

123456 (Participant ID number)



These measurements were obtained as part of a survey and do not represent a medical diagnosis.

Interpretation of these measurements must be made by a physician.

**Date of Examination:** XX/XX/XXXX

**Participant Name:** Jane Doe

**Participant Age at Interview:** 6 months

**Participant Age at Exam:**  6 months

**Participant Gender:** Female

**SP ID:** 123456

**Body Measurements**

Length: X ft. X in.

Weight: XX.X lbs.

These measurements were obtained as part of a survey and do not represent a medical diagnosis.

Interpretation of these measurements must be made by a physician.



**Complete Blood Count**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| White Blood Count | **Result**11.8 | **Units**(x109 /L) | **Flag** | **Reference Range**4.3 - 14.0\* |
| Lymphocytes | 57.8 | (%) |  | 21.6 - 68.8 |
| Monocytes | 7.2 | (%) |  | 4.2 - 14.4 |
| Neutrophils | 37.6 | (%) |  | 19.4 - 69.5 |
| Eosinophils | 0.6 | (%) |  | 0.6 - 9.9 |
| Basophils | 0.3 | (%) |  | 0.1 - 2.5 |
| Red Blood Count | 4.0 | (x1012 /L) |  | 4.0 - 5.3 |
| NRBC | 0.1 | (/100 WBC) |  | 0.0 - 0.3 |
| Hemoglobin | 13.7 | (g/dL) |  | 11.0 - 14.2 |
| Hematocrit | 36.8 | (%) |  | 32.5 - 41.9 |
| MCV | 75.4 | (fL) |  | 70.2 - 89.1 |
| MCH | 27.9 | (pg) |  | 23.3 - 30.8 |
| MCHC | 33.3 | (g/dL) |  | 32.4 - 35.5 |
| RDW | 12.8 | (%) |  | 11.3 - 15.4 |
| Platelet Count | 363 | (x109 /L) |  | 215 - 547 |

**This finding was not confirmed by microscopy and follow-up may be necessary.**

***\* Reviewers please note:*** *CBC Reference ranges will vary based on age of infant and will be programmed for ranges of ages 0-12 months. Normal adult ranges listed here*.

--- Test not done

^^^ Results Still Pending

<<< Lower than the limit of detection

>>> Above the limit of detection

vvv Delayed Results Number of hours fasted prior to blood draw: 0

Jane Doe, 6 months, Female, 123456, X/XX/2019;

 Centers for Disease Control and Prevention,

NCHS 3311 Toledo Road, MS P08, Hyattsville, Maryland 20782



**Laboratory - Blood Tests**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Result** | **Units** | **Flag** | **Reference Range** |
| Serum Folate | 72.8 | ng/mL |  | ≤ 1 month16-72 > 1 month 4-20  |
|  |  |  |  |  |
| Serum Ferritin | 77 | ng/mL |  | Newborn 25-200 1 month 200-600 2-5 months 50-200 6 mo. – 1 year 7-140 |
|  |  |  |  |  |
| Transferrin Receptor | 20 | mg/dL  |  | 0 - ≤ 3 months 130-275 >3 months - <1 year 203-360  |
| C Reactive proteinVitamin D | 0.125 | mg/dLng/mL  |  | 0-0.5 > 20 |
| Blood Lead | 0.3 | µg/dL |  | < 5 |
| Total Blood Mercury   | 1.5   | µg/LL |   | < 5.8 |

--- Test not done

^^^ Results Still Pending

<<< Lower than the limit of detection

>>> Above the limit of detection

vvv Delayed Results Number of hours fasted prior to blood draw: 0

Jane Doe, 6 months, Female, 123456, X/XX/20xx;

 Centers for Disease Control and Prevention,

NCHS 3311 Toledo Road, MS P08, Hyattsville, Maryland 20782

**Laboratory Information**

|  |  |
| --- | --- |
| NHANES Mobile Examination Center Laboratory National Center for Health Statistics3311 Toledo Road, MS P08 Hyattsville, Maryland 20782 | Complete blood count |
| Centers for Disease Control and Prevention National Center for Environmental Health Nutritional Biomarkers Branch Laboratory 4770 Buford Highway, NEMS F-55Atlanta, GA 30341 | Serum ferritin, transferrin saturation, vitamin D, serum folate and RBC folate |
| Centers for Disease Control and Prevention NCEH / DLS / IRAT4770 Buford Hwy. Building 103, Labs 1117, 1119,1103Mailstop F-18Atlanta, GA 30341-3724 | Total urinary arsenic, blood lead, cadmium, manganese, total blood mercury, selenium, inorganic blood mercury, urinary nickel, urinary chromium, iodine (salt) and fluoride (water) |

The following CLIA-certified laboratories performed the named tests on biologic specimens



Number of hours fasted prior to blood draw: 0

Jane Doe, 6 months, Female, 123456, X/XX/20xx;

 Centers for Disease Control and Prevention,

NCHS 3311 Toledo Road, MS P08, Hyattsville, Maryland 20782

**Attachment J – Sample Early report letter**

**DEPARTMENT OF HEALTH & HUMAN SERVICES**

National Health and Nutrition Examination Survey

National Center for Health Statistics 3311 Toledo Road, MS P08 Hyattsville, Maryland 20782

8/6/2019

Centers for Disease Control and Prevention

John Q. Public

Main St Anywhere US 12345

John Q. Public,

Recently, your child participated in the National Health and Nutrition Examination Survey (NHANES), conducted by the National Center for Health Statistics, part of the Centers for Disease Control and Prevention. You may recall that blood samples were collected as part of your examination on 7/1/2018. These samples were tested for mercury, a metal found in our environment. The test results reported below indicate your child has been exposed to mercury. A high blood level may result from eating large amounts of fish from waters containing high levels of mercury.

|  |  |  |
| --- | --- | --- |
|  | **Your value** | **Elevated level \*** |
| *Total Blood Mercury* | *9.5 ug/L* | *>= 5.8 ug/L* |
| \*Elevated levels are based on an EPA Reference Dose below which exposures among women of reproductive age are considered to be without adverse effects. From Rice DE, Schoeny R, Mahaffrey K. Methods and rationale for derivation of a reference dose for methyl mercury by the US Environmental Protection Agency. Risk Analysis. 2003; 23:107-115 |

We want to give you this important information about your child and urge you to have your child seen by their doctor because exposure to mercury at these levels may affect health. The NHANES program will not pay for any follow-up tests or care your child may require, but we will be available to talk with you or your doctor about this letter and to answer any questions you may have. You can reach me on one of our toll-free numbers below from 7:30 AM to 4:30 PM Eastern Time, Monday through Friday.

|  |  |  |  |
| --- | --- | --- | --- |
| English: | 1-800-452-6115, press "1" | Chinese: | 1-866-887-7996, press "1" |
| Spanish: | 1-800-452-6115, press "2" | Korean: | 1-866-887-7996, press "2" |
| Sincerely, |  | Vietnamese: | 1-866-887-7996, press "3" |

Duong T. Nguyen, D.O.

Senior Medical Officer