

Attachment 14g: Report of Findings

Early Reporting Letters

General Laboratory

<On official letterhead>

Participant Name and Address

<Insert Date>

Dear <Insert Participant name>,

Recently, you took part in the National Health and Nutrition Examination Survey (NHANES). The survey is run by the National Center for Health Statistics, part of the Centers for Disease Control and Prevention. We reviewed your test results from your exam on <insert date>. We found that some values were abnormal and need your immediate attention.

We cannot be sure whether or not these test results represent illness. Only your doctor can determine that. We **strongly recommend** that you talk to your doctor and give him or her your test results on the enclosed sheet. He or she can evaluate your findings and help you understand what they mean for your health. The NHANES program will not pay for any follow-up tests or care you may require. You are responsible for securing your test results. If you do not want anyone else to review your results place them in a secure place so no one else can review them.

The exam was not intended to be a complete physical exam. It is not a substitute for a visit to a doctor. Our survey clinicians are not authorized to administer treatment or engage in any follow-up with survey participants.

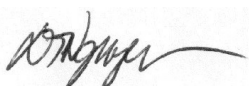
You will receive a full report of your exam findings in the future, but we thought you should know about these results right away.

If you have any questions, 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 “2”

Spanish: 1-800-452-6115, press “3”

Sincerely,



Duong T. Nguyen
Chief Medical Officer

Enclosure

<insert participant ID>

Early Reporting Letter – Hemoglobin Variants

<On official letterhead>

Participant Name and Address

<Insert Date>

Dear <Insert Participant name>,

Dear <insert SP name or Parent/guardian of SP>,

Recently, <you/ your child> took part in the National Health and Nutrition Examination Survey. The survey is run by the National Center for Health Statistics, part of the Centers for Disease Control and Prevention. We reviewed <your/your child's> test results from the exam on <insert date>. We found that some results were abnormal and require your immediate attention.

As part of this exam, <your/your child's> blood was tested for certain Hemoglobin variants. Hemoglobin variants are caused by genetic abnormalities that affect red blood cells. Your child's blood sample taken on <insert exam date> was found to have <% ____ Hemoglobin <S, C, D, E, or F>>. Knowing these results may affect clinical care and family planning in the future. We highly recommend that you follow up with <your/your child's> doctor if you are not aware of this condition.

Hemoglobin variants are usually found in people whose families originally came from areas in Africa, the Middle East, or Asia. In the United States, these conditions are usually discovered after birth. Most newborns are tested as part of recommended newborn screening programs. Persons born outside of the United States, who have not had their blood screened, may not be aware of the condition.

Persons with hemoglobin variants may experience mild or severe symptoms. How severe the symptoms are depends on the variant type and on how much is present in the blood. We have provided you with the percent in the result above so that you will have this information when you follow up with <your/your child's> doctor.

The NHANES program will not pay for any follow-up tests or care you may need, but we will be available to talk with you or your doctor about this letter and to answer any questions you may have. You are responsible for securing your test results. If you do not want anyone else to review your results place them in a secure place so no one else can review them. You can reach me on our toll-free number 1-800-452-6115 between 7:30 AM and 4:30 PM Eastern Time, Monday through Friday.

Sincerely,

Duong T Nguyen, DO
Chief Medical Officer

<insert participant ID>

Early Reporting Letter – Hepatitis C

<On official letterhead>

Participant Name and Address

<Insert Date>

Dear <Insert Participant name>,

Recently, you took part in a voluntary health examination at special mobile facilities operated by the Centers for Disease Control and Prevention. As part of this exam your blood was tested for hepatitis C virus. Your blood sample collected on <insert exam date>, shows you are currently infected with the hepatitis C virus even though you may never have felt sick.

If no one has told you before that you have the virus, we **strongly recommend** you take this letter to your doctor as soon as you can. You will want to talk with your doctor about possible treatment for hepatitis C and how to prevent spreading the disease to other people. Your doctor may want to do more tests to find out if the virus has done any damage to your liver.

Your doctor should know that our laboratory is determining the genotype of the hepatitis virus; however, the result will not be available for several months. He/She can call us at the phone number provided below to get the result. The genotype may be useful in the treatment decisions your doctor will make.

Almost four million Americans are infected with hepatitis C virus. Most persons who are infected carry the virus for the rest of their lives. The infection can lead to liver damage, although many people with the virus never feel sick. We have enclosed a fact sheet with information on hepatitis C. You may obtain other information on hepatitis C by calling toll free:

American Liver Foundation: <http://www.liverfoundation.org> or 1-800-465-4837

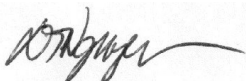
Centers for Disease Control and Prevention: <http://www.cdc.gov/hepatitis>

You are responsible for securing your test results. If you do not want anyone else to review your results place them in a secure place so no one else can review them. If you have any questions, 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 “2”

Spanish: 1-800-452-6115, press “3”

Sincerely,



Duong T. Nguyen
Chief Medical Officer

Enclosure

<insert participant ID>

All Hepatitis C Early Reports are accompanied by the below flyer. This flyer is available in English or Spanish from [Hepatitis C General Information \(cdc.gov\)](https://www.cdc.gov/hepatitis/c/) and was most recently updated in 2020.



What is hepatitis?

Hepatitis means inflammation of the liver. The liver is a vital organ that processes nutrients, filters the blood, and fights infections. When the liver is inflamed or damaged, its function can be affected. Heavy alcohol use, toxins, some medications, and certain medical conditions can cause hepatitis.

Hepatitis is most often caused by a virus. In the United States, the most common types of viral hepatitis are hepatitis A, hepatitis B, and hepatitis C. Although all types of viral hepatitis can cause similar symptoms, they are spread in different ways, have different treatments, and some are more serious than others.

All adults, pregnant women, and people with risk factors should get tested for hepatitis C.

Hepatitis C

Hepatitis C is a liver disease caused by the hepatitis C virus. When someone is first infected with the hepatitis C virus, they can have a very mild illness with few or no symptoms or a serious condition requiring hospitalization. For reasons that are not known, less than half of people who get hepatitis C are able to clear, or get rid of, the virus without treatment in the first 6 months after infection.

Most people who get infected will develop a chronic, or lifelong, infection. Left untreated, chronic hepatitis C can cause serious health problems including liver disease, liver failure, liver cancer, and even death.

How is hepatitis C spread?

The hepatitis C virus is usually spread when someone comes into contact with blood from an infected person. This can happen through:

- **Sharing drug-injection equipment.** Today, most people become infected with hepatitis C by sharing needles, syringes, or any other equipment used to prepare and inject drugs.
- **Birth.** Approximately 6% of infants born to infected mothers will get hepatitis C.
- **Healthcare exposures.** Although uncommon, people can become infected when healthcare professionals do not follow the proper steps needed to prevent the spread of bloodborne infections.
- **Sex with an infected person.** While uncommon, hepatitis C can spread during sex, though it has been reported more often among men who have sex with men.
- **Unregulated tattoos or body piercings.** Hepatitis C can spread when getting tattoos or body piercings in unlicensed facilities, informal settings, or with non-sterile instruments.
- **Sharing personal items.** People can get infected from sharing glucose monitors, razors, nail clippers, toothbrushes, and other items that may have come into contact with infected blood, even in amounts too small to see.
- **Blood transfusions and organ transplants.** Before widespread screening of the blood supply in 1992, hepatitis C was also spread through blood transfusions and organ transplants.



Symptoms

Many people with hepatitis C do not have symptoms and do not know they are infected. If symptoms occur, they can include yellow skin or eyes, not wanting to eat, upset stomach, throwing up, stomach pain, fever, dark urine, light-colored stool, joint pain, and feeling tired. If symptoms occur with a new infection, they usually appear within 2 to 12 weeks, but can take up to 6 months to develop.

People with chronic hepatitis C can live for years without symptoms or feeling sick. When symptoms appear with chronic hepatitis C, they often are a sign of advanced liver disease.

People can live with hepatitis C without symptoms or feeling sick.

Getting tested is the only way to know if you have hepatitis C.

A blood test called a hepatitis C antibody test can tell if you have been infected with the hepatitis C virus—either recently or in the past. If you have a positive antibody test, another blood test is needed to tell if you are still infected or if you were infected in the past and cleared the virus on your own.

CDC recommends you get tested for hepatitis C if you:

- Are 16 years of age and older
- Are pregnant (get tested during each pregnancy)
- Currently inject drugs (get tested regularly)
- Have ever injected drugs, even if it was just once or many years ago
- Have HIV
- Have abnormal liver tests or liver disease
- Are on hemodialysis
- Received donated blood or organs before July 1992
- Received clotting factor concentrates before 1987
- Have been exposed to blood from a person who has hepatitis C
- Were born to a mother with hepatitis C

Hepatitis C can be cured.

Getting tested for hepatitis C is important to find out if you are infected and get life-saving treatment. Treatments are available that can cure most people with hepatitis C in 8 to 12 weeks.



Hepatitis C can be prevented.

Although there is no vaccine to prevent hepatitis C, there are ways to reduce the risk of becoming infected.

- Avoid sharing or reusing needles, syringes or any other equipment used to prepare and inject drugs, steroids, hormones, or other substances.
- Do not use personal items that may have come into contact with an infected person's blood, even in amounts too small to see, such as glucose monitors, razors, nail clippers, or toothbrushes.
- Do not get tattoos or body piercings from an unlicensed facility or in an informal setting.



www.cdc.gov/hepatitis

April 2010

Early Reporting Letter – Hepatitis B

<On official letterhead>

Participant Name and Address

<Insert Date>

Dear <Insert Participant name>,

Recently, you took part in the National Health and Nutrition Examination Survey (NHANES). The survey is run by the National Center for Health Statistics, part of the Centers for Disease Control and Prevention. As part of this exam your blood was tested for hepatitis B virus. Your blood sample taken on <insert date>, shows you were infected with the hepatitis B virus, even though you may never have felt sick. Having received the vaccine for hepatitis B would NOT cause this test to be positive (your blood was positive for the hepatitis B surface antigen). You may or may not still have the virus in your blood.

If no one has told you before that you had the virus, we **strongly recommend** you take this letter to your doctor as soon as you can. You will want to talk with your doctor about possible treatment for hepatitis B and how to prevent spreading the disease to other people. Your doctor may want to do more tests to find out if the virus has done any damage to your liver. We have enclosed a fact sheet with information on hepatitis B. You may obtain other information on hepatitis B by calling toll free:

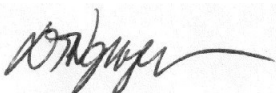
American Liver Foundation 1-800-223-0179
Hepatitis Foundation International 1-800-891-0707
or the CDC web site
<http://www.cdc.gov/hepatitis>

We want to give you this important information and urge you to see your doctor. The NHANES program will not pay for any follow-up tests or care you may need, but we will be available to talk with you or your doctor about this letter and to answer any questions you may have. You are responsible for securing your test results. If you do not want anyone else to review your results place them in a secure place so no one else can review them.

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"
Spanish: 1-800-452-6115, press "2"

Sincerely,



Duong T. Nguyen, D.O.
Chief Medical Officer

Enclosure

<*insert participant ID*>

Laboratory Information for Hepatitis B Testing in NHANES

The following CLIA-certified laboratory performed your hepatitis B test:

Centers for Disease Control and Prevention
National Center for HIV, Hepatitis, STD and TB Prevention Division of Viral Hepatitis
Laboratory Branch 1600 Clifton Road NE
Building 18, 3-218, MS A33
Atlanta, GA 30329

All Hepatitis B Early Reports are accompanied by the below flyer. This flyer is available in English or Spanish from [Hepatitis B - Basic Information \(cdc.gov\)](https://www.cdc.gov/hepatitis/b/basic) and was most recently updated in 2016.

HEPATITIS B

General Information

What is hepatitis?

"Hepatitis" means inflammation of the liver. The liver is a vital organ that processes nutrients, filters the blood, and fights infections. When the liver is inflamed or damaged, its function can be affected. Heavy alcohol use, toxins, some medications, and certain medical conditions can cause hepatitis. However, hepatitis is most often caused by a virus. In the United States, the most common types of viral hepatitis are Hepatitis A, Hepatitis B, and Hepatitis C.



The only way to know if you have Hepatitis B is to get tested.

What is Hepatitis B?

Hepatitis B can be a serious liver disease that results from infection with the Hepatitis B virus. **Acute Hepatitis B** refers to a short-term infection that occurs within the first 6 months after someone is infected with the virus. The infection can range in severity from a mild illness with few or no symptoms to a serious condition requiring hospitalization. Some people, especially adults, are able to clear, or get rid of, the virus without treatment. People who clear the virus become immune and cannot get infected with the Hepatitis B virus again.

Chronic Hepatitis B refers to a lifelong infection with the Hepatitis B virus. The likelihood that a person develops a chronic infection depends on the age at which someone becomes infected. Up to 90% of infants infected with the Hepatitis B virus will develop a chronic infection. In contrast, about 5% of adults will develop chronic Hepatitis B. Over time, chronic Hepatitis B can cause serious health problems, including liver damage, cirrhosis, liver cancer, and even death.

How is Hepatitis B spread?

The Hepatitis B virus is spread when blood, semen, or other body fluids from an infected person enters the body of someone who is not infected. The virus can be spread through:

- **Sex with an infected person.** Among adults, Hepatitis B is often spread through sexual contact.
- **Injection drug use.** Sharing needles, syringes, and any other equipment to inject drugs with someone infected with Hepatitis B can spread the virus.
- **Outbreaks.** While uncommon, poor infection control has resulted in outbreaks of Hepatitis B in healthcare settings.
- **Birth.** Hepatitis B can be passed from an infected mother to her baby at birth. Worldwide, most people with Hepatitis B were infected with the virus as an infant.

Hepatitis B is **not** spread through breastfeeding, sharing eating utensils, hugging, kissing, holding hands, coughing, or sneezing. Unlike some forms of hepatitis, Hepatitis B is also not spread by contaminated food or water.

What are the symptoms of Hepatitis B?

Many people with Hepatitis B do not have symptoms and do not know they are infected. If symptoms occur, they can include: fever, feeling tired, not wanting to eat, upset stomach, throwing up, dark urine, grey-colored stool, joint pain, and yellow skin and eyes.

When do symptoms occur?

If symptoms occur with an acute infection, they usually appear within 3 months of exposure and can last up to 6 months. If symptoms occur with chronic Hepatitis B, they can take years to develop and can be a sign of advanced liver disease.

Continued on next page



U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention

How would you know if you have Hepatitis B?

The only way to know if you have Hepatitis B is to get tested. Blood tests can determine if a person has been infected and cleared the virus, is currently infected, or has never been infected.

Who should get tested for Hepatitis B and why?

CDC develops recommendations for testing based upon a variety of different factors. Here is a list of people who should get tested. The results will help determine the next best steps for vaccination or medical care.

All pregnant women are routinely tested for Hepatitis B. If a woman has Hepatitis B, timely vaccination can help prevent the spread of the virus to her baby.

Household and sexual contacts of people with Hepatitis B are at risk for getting Hepatitis B. Those who have never had Hepatitis B can benefit from vaccination.

People born in certain parts of the world that have increased rates of Hepatitis B. Testing helps identify those who are infected so that they can receive timely medical care.

People with certain medical conditions should be tested, and get vaccinated if needed. This includes people with HIV infection, people who receive chemotherapy and people on hemodialysis.

People who inject drugs are at increased risk for Hepatitis B but testing can tell if someone is infected or could benefit from vaccination to prevent getting infected with the virus.

Men who have sex with men have higher rates of Hepatitis B. Testing can identify unknown infections or let a person know that they can benefit from vaccination.

How is Hepatitis B treated?

For those with acute Hepatitis B, doctors usually recommend rest, adequate nutrition, fluids, and close medical monitoring. Some people may need to be hospitalized. People living with chronic Hepatitis B should be evaluated for liver problems and monitored on a regular basis. Treatments are available that can slow down or prevent the effects of liver disease.

Can Hepatitis B be prevented?

Yes. The best way to prevent Hepatitis B is by getting vaccinated. The Hepatitis B vaccine is typically given as a series of 3 shots over a period of 6 months. The entire series is needed for long-term protection.

Who should get vaccinated against Hepatitis B?

All infants are routinely vaccinated for Hepatitis B at birth, which has led to dramatic declines of new Hepatitis B cases in the US and many parts of the world. The vaccine is also recommended for people living with someone infected with Hepatitis B, travelers to certain countries, and healthcare and public safety workers exposed to blood. People with high-risk sexual behaviors, men who have sex with men, people who inject drugs, and people who have certain medical conditions, including diabetes, should talk to their doctor about getting vaccinated.

For more information

Talk to your doctor, call your health department, or visit www.cdc.gov/hepatitis.

Early Reporting Letter – Hepatitis D

Sample person name
Address

Date

Dear <insert name>,

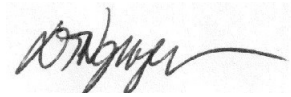
Recently, <you/ your child> took part in the National Health and Nutrition Examination Survey. The survey is run by the National Center for Health Statistics, part of the Centers for Disease Control and Prevention. As part of this exam, <you/ your child> blood was tested for hepatitis D virus and hepatitis B virus. Your blood sample taken on <insert exam date>, shows <you/ your child> <are/is> infected with the hepatitis D virus along with the hepatitis B virus. <You/ Your child> may not have felt sick.

Hepatitis D only happens in people who also have the hepatitis B virus. You can have Hepatitis D for a short time, or it can become a long-term, chronic infection. Hepatitis D can cause serious illness in some people that can lead to life-long liver damage.

We **strongly recommend** you see <your/ your child's> doctor soon to discuss treatment and how to prevent spreading the disease to other people. The NHANES program will not pay for any follow-up tests or care you 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 are responsible for securing your test results. If you do not want anyone else to review your results place them in a secure place so no one else can review them.

You can reach me on our toll-free number 1-800-452-6115 between 7:30 AM and 4:30 PM Eastern Time, Monday through Friday.

Sincerely yours,



Duong T Nguyen, DO
Chief Medical Officer

<insert participant ID>

Early Reporting Letter – Butyrylcholinesterase

<On official letterhead>
Sample person name
Address

Date

Dear <insert SP name or Parent/guardian of SP>,

Recently, <you/ your child> took part in the National Health and Nutrition Examination Survey. The survey is run by the National Center for Health Statistics, part of the Centers for Disease Control and Prevention. We reviewed <your/your child's> test results from the exam on <insert date>. We found that some results need your attention.

As part of your exam, <your/your child's> blood was tested for butyrylcholinesterase.

<Your/your child's> butyrylcholinesterase level was low at less than 0.05 U/ml.

This is a new test developed to understand what butyrylcholinesterase levels are like in the general population. Although this test is not the same test used in clinics or hospitals, we think it is important for you to know your result as it may be important to your health.

Low butyrylcholinesterase is also known as Pseudocholinesterase deficiency. Having a low level happens in a very small percent of people. Some people who have a low level may react to certain medicines used in general anesthesia for surgery. Although this reaction is rare, it is important to tell your doctor so that a safe medication is used for you.

The NHANES program will not pay for any follow-up tests or care you may require. We will be available to talk with you or your doctor about this letter and to answer any questions you may have. You are responsible for securing your test results. If you do not want anyone else to review your results place them in a secure place so no one else can review them.

You can reach me at 1-800-452-6115. I am available Monday through Friday from 7:30 AM to 4:30 PM Eastern Time.

Sincerely,



Duong T Nguyen, DO
Chief Medical Officer

<insert participant ID>

Early Reporting Letter – High Urine Arsenic

<On official letterhead>

Participant Name and Address

<Insert Date>

Dear <Insert Participant name> ,

Recently, you took part in the National Health and Nutrition Examination Survey (NHANES). The survey is run by the National Center for Health Statistics, part of the Centers for Disease Control and Prevention. As part of this exam, your urine was tested for arsenic, a metal widespread in the environment. The arsenic level in your urine sample taken on <insert date> was above the usual range (reference range). This suggests you were exposed to arsenic during the week before your exam.

We strongly recommend you take this letter to your doctor as soon as you can. You will want to talk with your doctor about any other tests and possible treatment that you may need.

We want to give you this important information and urge you to see your doctor. The NHANES program will not pay for any follow-up tests or care you 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 are responsible for securing your test results. If you do not want anyone else to review your results place them in a secure place so no one else can review them.

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 "2"
Spanish: 1-800-452-6115, press "3"

Sincerely,



Duong T. Nguyen
Chief Medical Officer

Enclosure

<insert participant ID>

Early Reporting Letter - High Urine Arsenic (page 2)

<On official letterhead>

<Insert Participant Name and address>

<Insert Date>

Recently, the person named in this report 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.. The objective of the survey is to obtain information on the health and nutrition status of the U.S. population. The survey was performed on a random sample of individuals living in your region.

The listed laboratory value from the individual named above was sufficiently increased to require early reporting.

Test	Participant's value	Reference range
Total urinary arsenic	ug/L	See below

Total urinary arsenic values greater than 50 ug/L are suggestive of increased exposure to arsenic during the week before the urine collection date. The incidence of health effects is indeterminate in the range of 50-200 ug/L. In persons having urinary arsenic concentrations greater than 200 ug/L on a long-term basis, the incidence of health effects is low, but increases with the length of time over which exposure has occurred and the concentration level. The chronic effects of arsenic include: skin pigmentation changes, plantar and palmar hyperkeratotic papules, peripheral vascular insufficiency, and an increased incidence of cancer (skin, bladder, lung).

Urinary arsenic concentration levels will represent a person's most recent exposures (within days or weeks). The levels do not indicate length of exposure. Concentration may increase or decrease at different times depending on changes in: exposure (intake), personal activities, diet, timing of specimen collection and the influence of health conditions. Persons having the same intake may have differences in levels due the influence of these factors as well as genetic differences between individuals.

Reference comparison values for normal populations will vary with population and the conditions under which the study was performed. Reference comparison values may vary with age, gender, race, location, activities, analytic methods and other factors.

Urine arsenic levels in healthy adults between 5 to 50 µg/L generally correspond to whole blood arsenic levels between 2-23 µg/L. Ref: Tietz, R.E. Ed.: Clinical Guide to Laboratory Tests. 3rd ed. Philadelphia, W.B. Saunders Col, 1995.

The examination was not intended to be a complete physical examination nor a substitute for a visit to a doctor. Our survey physicians are not authorized to administer treatment or engage in any follow-up with the survey participants.

You are responsible for securing your test results. If you do not want anyone else to review your results place them in a secure place so no one else can review them. If you have any questions, 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 "2"
Spanish: 1-800-452-6115, press "3"

Sincerely,



Duong T. Nguyen
Chief Medical Officer

Early Reporting Letter – Cytomegalovirus

<official letterhead>

Date

Dear Parent/guardian,

Recently, your child took part in the National Health and Nutrition Examination Survey. The survey is run by the National Center for Health Statistics, part of the Centers for Disease Control and Prevention. We reviewed your child's test results from his/her exam on <insert date>. We found that some values were abnormal and need your immediate attention.

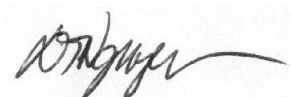
As part of this exam your child's blood was tested for cytomegalovirus (CMV) infection. Your child's blood sample taken on <insert exam date>, was positive for CMV infection.¹

CMV is a very common virus that most people get. Once a person gets CMV it stays in his/her body for life. Nearly all healthy children who get CMV have no symptoms and parents will likely not even know that their child has been infected. If your child has serious medical problems, including a weakened immune system, CMV can cause more serious problems. We recommend you take this letter to your doctor.

Although CMV infection will not likely harm your child, children with a CMV infection can pass the virus to pregnant women. If a woman gets a new CMV infection while pregnant, her baby can be harmed. If your child has CMV and you are pregnant or planning to get pregnant, we recommend you learn about CMV. There are simple steps you can take to lower your risk of CMV infection at this website <http://www.cdc.gov/cmvi/index.html>. You may also call the number below for this information.

The NHANES program will not pay for any follow-up tests or care you may need, 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 our toll-free number 1-800-452-6115 between 7:30 AM and 4:30 PM Eastern Time, Monday through Friday.

Sincerely,



Duong T Nguyen, DO
Chief Medical Officer

Enclosure

<insert participant ID>

¹ As evidenced by the presence of CMV IgM and IgG antibodies.

Cytomegalovirus Fact Sheet

Am Fam Physician. 2003 Feb 1;67(3):526.

What is cytomegalovirus?

Cytomegalovirus (say: "si-toe-meg-ah-low-vi-russ") or CMV is a virus that infects cells and causes them to become enlarged. Many people are infected with CMV and don't even know it. People are usually infected by the time they are two years old or during their teenaged years. CMV usually causes no long-term problems. However, CMV can cause problems in a newborn if the mother gets the infection during pregnancy.

CMV is only spread through contact with an infected person's body fluids (such as saliva, blood, urine, semen, or breast milk). It can also be sexually transmitted. Careful handwashing with soap and water can help prevent the spread of CMV.

What are the symptoms of CMV?

Usually, there are no symptoms. A few people will have symptoms that are similar to mononucleosis (such as a sore throat, fever, headache, and being tired). People who have weakened immune systems because of human immunodeficiency virus (HIV) or because they received an organ transplant may have severe symptoms.

How will my doctor know if I have CMV?

Because usually there are no symptoms, your doctor won't know that you have CMV. If you do have symptoms, your doctor may test your blood to look for CMV. People who have HIV should be seen by an eye doctor as recommended by their doctor to make sure the virus hasn't infected their eyes. Also, people with HIV should let their doctor know if they are having any painless blurring of their vision, "floaters" only in one eye, light flashes, areas of blindness, and shortness of breath.

Is there a treatment for CMV?

There is no vaccine for CMV. Because CMV is a virus, antibiotics won't work. If your body's immune system is normal, your body should be able to control the infection. If your immune system is weakened, your doctor may use one of several different medicines to treat CMV infection.

Early Reporting Letter – Total Mercury

<official letterhead>

<date>

Jane Doe 123 Main St
Anytown, MD 12345

Dear Jane Doe,

Recently, you took part in the National Health and Nutrition Examination Survey (NHANES). The survey is run by the National Center for Health Statistics, part of the Centers for Disease Control and Prevention. You may remember that blood samples were taken during your exam on <date>. These samples were tested for mercury. Mercury is a metal found in our environment. The test results in the table below show you have been exposed to mercury at high levels. A high blood level is often caused by eating large amounts of fish from waters that have high levels of mercury.

	Your value	Elevated level *
Total Blood Mercury	13.3 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

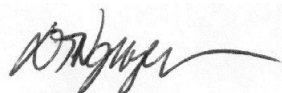
We recommend that you see your doctor because exposure to mercury at high levels can affect your health. The NHANES program will not pay for any follow-up tests or care you may need, but we will be available to talk with you or your doctor about this letter and to answer any questions you may have. You are responsible for securing your test results. If you do not want anyone else to review your results place them in a secure place so no one else can review them.

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"

Spanish: 1-800-452-6115, press "2"

Sincerely,



Duong T. Nguyen, D.O.
Chief Medical Officer

<insert participant ID>



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

SAMPLE ROF 2021

Date

Participant Name
Address

Dear Participant,

We appreciate your 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, you have 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 you was not a complete examination and was not intended to be a substitute for visits to your medical care provider. However, the enclosed report contains results of your examination that may be useful to maintaining and promoting your health. You are responsible for securing your test results. If you do not want anyone else to review your results place them in a secure place so no one else can review them.

If you have any questions about the results of your 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"
Spanish: 1-800-452-6115, press "2"

Sincerely,

Duong T. Nguyen, D.O.
Chief Medical Officer

Enclosure

123456



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: DATE
Participant Name: Participant
Participant Age at Interview: xx years
Participant Age at Exam: xx years
Participant Gender: Female
SP ID: 123456

Body Measurements

Height: 5 ft. 4 in.
Weight: 122.9 lbs.

Blood Pressure & Heart Rate

ADULT (ages 18 years and up) Normal
Systolic Blood Pressure: 118 mm Hg < 120
Diastolic Blood Pressure: 76 mm Hg < 80
Resting Pulse Rate: 88
Cuff Size: Adult

Your blood pressure today is within the normal range based on the American Cardiology Association (ACC) and the American Heart Association (AHA) Hypertension Guidelines for Prevention, Detection, Evaluation, and Management of High Blood Pressure in Adults. American Journal of Hypertension, 2018; 31 (2):133-135.

CHILD (ages 8-17 years)
Systolic Blood Pressure: 105 mm Hg
Diastolic Blood Pressure: 65 mm Hg
Resting Pulse Rate: 94
Cuff Size: Child

Your child's blood pressure today is within the normal range based on the American Academy of Pediatrics (AAP) Clinical Practice Guideline for Screening and Management of High Blood Pressure in Children and Adolescents. Pediatrics 2017; 140 (3):e20171904



Centers for Disease Control and Prevention, NCHS 3311 Toledo Road, MS P08, Hyattsville, Maryland 20782



Complete Blood Count

	Result	Units	Flag	Reference Range
White Blood Count	7.0	x10 ⁹ /L		4.1 - 12.9
Lymphocytes	21.8	%		14.1 - 47.6
Monocytes	4.7	%		3.8 - 11.6
Neutrophils	56.6	%		39.8 - 78.1
Eosinophils	0.6	%		0.6 - 7.3
Basophils	1.4	%		0.1 - 1.7
Red Blood Count	4.7	x10 ¹² /L		3.6 - 5.2
NRBC	0.0	x10 ¹² /L		0.0 - 0.3
Hemoglobin	12.7	g/dL		10.6 - 15.6
Hematocrit	38.0	%		32.0 - 45.9
MCV	80.8	fL		74.6 - 98.2
MCH	26.0	pg		24.3 - 33.8
MCHC	33.4	g/dL		32.1 - 35.3
RDW	14.5	%		11.4 - 16.3
Platelet Count	360	x10 ⁹ /L		168 - 441

National Health and Nutrition Examination Survey

Duong T. Nguyen D.O.
Senior Medical Officer
National Center for Health Statistics
3311 Toledo Road, RM 4324
Hyattsville, Maryland 20782

CENTERS FOR DISEASE CONTROL
AND PREVENTION

- Test not done
- A/A/A/ 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: 22





Blood Tests

	<u>Result</u>	<u>Units</u>	<u>Flag</u>	<u>Reference Range</u>
Glucose	85	mg/dL		60 - 109
Hemoglobin A1c	4.6	%		< 6.5
ALT	10	IU/L		< 31
AST	11	IU/L		< 31
Alkaline Phosphatase	60	IU/L		39 - 117
Albumin	3.3	g/dL		3.2 - 5.2
Bicarbonate	20	mmol/L	Low	22 - 29
BUN	7	mg/dL		6 - 19
Calcium	10.0	mg/dL		8.4 - 10.2
Cholesterol	182	mg/dL		< 200
CPK	30	IU/L		22 - 199
Triglycerides	87	mg/dL		< 150
HDL	66	mg/dL		> 39
Phosphorus	4.1	mg/dL		2.6 - 4.5
Sodium	136	mmol/L		133 - 145
Potassium	4.00	mmol/L		3.30 - 5.10
Chloride	102	mmol/L		96 - 108
Total Protein	6.9	g/dL		5.9 - 8.4
Uric Acid	3.7	mg/dL		2.4 - 5.7
Bilirubin	0.2	mg/dL		0.0 - 1.0
Serum Folate	48.8	nmol/L		10.5 - 90.7
RBC Folate	1610	nmol/L		640 - 2006
Serum Ferritin	48	µg/L		15 - 150
Iron	63	µg/dL		22 - 163
Total Iron Binding Capacity (TIBC)	344	µg/dL		250 - 450
Transferrin Saturation	18	%	Low	20 - 50
Lead	0.5	µg/dL		0.0 - 10.0
Vitamin D	vvv	µg/dL		
Cadmium	0.1	µg/L		0.3 - 1.2
Total Blood Mercury	0.6	µg/L		< 5.7
Testosterone	500	µg/dL		250-1100
Thyroglobulin	5	ng/ml		1.5-29.2
TSH	4	mIU/dL		0.45-4.12
Follicle Stimulating Hormone	12	mIU/mL		Varies individually
Lutenizing Hormone	15	mIU/mL		Varies individually

- Test not done
- A/A/A/ 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: 22





Urine Tests

	<u>Result</u>	<u>Units</u>	<u>Flag</u>	<u>Reference Range</u>
Albumin Creatinine Ratio - 1st Collection	7.17	mg/g		< 30.00
Total Arsenic	---	µg/L		
Urinary Nickel	---	µg/L		

Kidney Health

Your kidneys filter your blood and help control blood pressure. We checked how healthy your kidneys are by calculating your estimated glomerular filtration rate (eGFR). This is not a meaningful test if you are very muscular.

Your estimated glomerular filtration rate (eGFR) was 120 mL/min/1.73m²

This indicates normal function

This value is not meaningful for pregnant women, individuals with acute kidney failure, people with extreme body size or muscle mass (such as individuals who are bodybuilders, extremely obese or severely malnourished), and people on vegetarian or low-meat diets or taking creatine dietary supplements.

---	Test not done
A/A/A	Results Still Pending
<<<	Lower than the limit of detection
>>>	Above the limit of detection
vvv	Delayed Results

SP, xx years, Female, 123456, Date
Centers for Disease Control and Prevention, NCHS 3311 Toledo Road, MS P08, Hyattsville, Maryland 20782



Body Composition

The whole-body scan provides information on your percent body fat.

The body composition exam results showed that your total body fat is ___%.

We do not know exactly what percent body fat is considered healthy for your age and gender.

Researchers are working to define the healthy ranges for the public. You may want to discuss this result and your body measurement findings (page 1) with your doctor to find out what they mean for you. Too much body fat can increase a person's risk of getting diabetes or heart disease.

Liver Elastography

Liver elastography measures the stiffness of your liver. In general, having liver stiffness may indicate liver damage.

Information from your liver ultrasound exam showed a value of 3.60 kiloPascals (kPa).

A scoring system (1), was used to interpret your result. Using this recommended scoring system, the result showed you have little or no liver stiffness. No additional follow-up regarding this test is recommended at this time.

1. Published in GASTROENTEROLOGY 2005;128:343–350.

Balance

You performed a Modified Romberg test for balance during your examination. This screening test is listed by the Centers for Medicare and Medicaid (CMS) Physician Quality Reporting System for fall risk assessment.



Final Report of Findings

Laboratory Information

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

NHANES Mobile Examination Center Laboratory National Center for Health Statistics 3311 Toledo Road, MS P08 Hyattsville, Maryland 20782	Complete blood count
Diabetes Diagnostic Laboratory University of Missouri - Columbia 1 Hospital Drive Room M765 Columbia, MO 65212	Glucose and hemoglobin A1c
Centers for Disease Control and Prevention National Center for Environmental Health Nutritional Biomarkers Branch Laboratory 4770 Buford Highway, NE MS F-55 Atlanta, GA 30341	Serum ferritin, serum folate, RBC folate, vitamin A(retinol), vitamin C and vitamin D
Centers for Disease Control and Prevention NCEH / DLS / IRAT 4770 Buford Hwy. Building 103, Labs 1117, 1119, 1103 Mailstop F-18 Atlanta, GA 30341-3724	Total urinary arsenic, blood lead, cadmium, manganese, total blood mercury, selenium, inorganic blood mercury and urinary nickel
Microalbumin Laboratory University of Minnesota 515 Delaware Street SE Room 13-219 - MOOS Tower Minneapolis, MN 55455	Urine albumin/creatinine ratio
University of Minnesota Advanced Research and Diagnostic Laboratory 1200 Washington Ave S Suite 175 Minneapolis, MN 55415	Glucose, CPK, estimated glomerular filtration rate, iron binding, transferrin saturation, iron, ALT, AST, alkaline phosphatase, albumin, bicarbonate, BUN, calcium, cholesterol, triglycerides, HDL, LDL, serum creatinine, GGT, LDH, phosphorus, sodium, potassium, chloride, total protein, uric acid and bilirubin

SP, xx years, Female, 123456, Date

Centers for Disease Control and Prevention, NCHS 3311 Toledo Road, MS P08, Hyattsville, Maryland 20782