

(Sapphire Plus Lesion Detection customer)

(Address)

(City, State, Zip)

(Phone)

(email)

(Oral surgeon)

(Address)

(City, State, Zip)

(Date)

Dear Dr. _____:

I am writing you on a matter of the utmost urgency regarding my patient, _____. Recently an oral cancer examination of Mr. (Mrs./Ms.) using the Sapphire® Plus Lesion Detection Oral Cancer Screening System revealed oral mucosal abnormalities that I suspect might be cancerous or precancerous tissue.

This is to inform you that I have asked Mr. (Mrs./Ms.) _____ to schedule an appointment for further evaluation with possible tissue biopsy as soon as possible. I have enclosed my documentation of the suspect area.

If for some reason you are unable to take on this patient at this time, please let me know at your earliest convenience.

Thank you for your prompt attention to this matter.

Sincerely

ADDRESS TO GO HERE

Sapphire® plus
LESION DETECTION