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AI-generated content may be incorrect.**

NHI Number: XXXXXXX

Date: (day/month/year) Aho: (aho/mahina/tau)

First Name Last Name Higoa Tohi Higoa Magafaoa

Address 1 Kaina nofo 1

Address 2 Kaina nofo 2

Town/City Postcode Taone/Postcode Maaga

Tēnā koe/ Dear First Name Last Name,

Ha nei e FIT test Foou (Replacement FIT test) haau. Kua fakafano he haau a ekekafo haau a higoa ke he XXX District Endoscopy Unit ke onoono ke he haau a tau fakakiteaga ne kua logona ke he haau a kupu gakau. Hanei haau a FIT Test foou (faecal immunochemical test)

Fuafua he FIT test nei ke moua ko e fai vala toto nakai e fakavao (valate) haau. To maeke e tau kumikumiaga ke lata mo koe ke lagomatai a mautolu ke:

* onoono ke he haau a nofoaga hagahaga kelea ke he kenesa gakau (bowel cancer)
* onoono ke he haau a tuaga hagahaga kelea kaeke ke fai lekua kelea lahi ke he haau a gakau (bowel)
* fifili ko e heigoa e levekiaga kua lata ma e haau a tau fakakiteaga kua logona.

Mahuiga lahi ke taute fakamafiti e tiviaga nei ke he tau aho gahoa i mua.

## Ko e haau ke taute mogonei

* Muitua ke he tau poakiaga fakamau ki loto he puha tivi (test kit).
* Fakamau hifo e aho ne taute e koe e tivi he laupepa request form. To nakai maeke i a mautolu ke gahuahua ke he tau tivi ne nakai fakamau hifo e aho ne taute ai. Kaeke ke nakai fakamau hifo e aho ne taute e tivi haau, to liu ni a koe ke taute foki taha tivi.
* Fakahu e haau a sample he fagatohi mau tuai he aho taha ia ni po ke aho hake. To tukutuku hifo e hagahaga kelea ke malona mo e nakai aoga e sample.

Fakaaue ki a koe he taute e FIT test. To matutaki atu a mautolu to hoko e 4 e faahi tapu ka mole he moua mai e talahauaga ke he haau a tivi.

Kaeke ke fai huhu a koe, matutaki mai fakaaoga e numela telefoni po ke email ne fakamau ki lalo he laupepa nei. To fiafia lahi e taha mai he matakau gahua ke lagomatai a koe.

Ngā mihi/Yours sincerely,

**Endoscopy Unit**

**XXX District**

**Phone Number extension**

**Email**

**Health New Zealand | Te Whatu Ora**

A close-up of a document

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