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[Your Name]
[Your Title/Position]
[Your Institution/Practice Name]
[Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]
[Recipient's Name]
[Recipient's Title/Position]
[Recipient's Institution/Practice Name]
[Address]
[City, State, Zip Code]
Dear [Recipient's Name],
Subject: EKG Report Interpretation for [Patient's Name, Date of Birth]
I hope this message finds you well. Please find below the interpretation
of the EKG conducted for [Patient's Name] on [Date of EKG].
**Patient Information**:
- Name: [Patient's Name]
- Date of Birth: [Date of Birth]
- Date of EKG: [Date of EKG]
**Indications for EKG**:
[Brief reason for EKG, e.g., chest pain, routine screening, etc.]
**Description of EKG findings**:
- Heart Rate: [e.g., Normal, Tachycardic, Bradycardic]
- Rhythm: [e.g., Sinus Rhythm, Atrial Fibrillation, etc.]
- Axis: [e.g., Normal, Left Axis Deviation, etc.]
- Intervals:
 - PR Interval: [e.g., Normal, Prolonged]
 - QRS Duration: [e.g., Normal, Prolonged]
 - QT Interval: [e.g., Normal, Prolonged]
- ST Segment: [e.g., Elevation, Depression, Normal]
- T Waves: [e.g., Inverted, Peaked, Normal]
- Additional findings: [e.g., any abnormalities noted]
**Conclusion/Impression**:
[Give a brief conclusion regarding the overall interpretation e.g.,
"Overall, the EKG is consistent with...," "No significant abnormalities
noted, " etc.]
**Recommendations**:
[If applicable, outline any further recommendations, follow-up tests, or
referrals.]
Feel free to contact me if you have any questions or require further
clarification regarding the report.
Sincerely,
[Your Signature (if sending a hard copy)]
[Your Name]
[Your Title/Position]
[Your Institution/Practice Name]
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