

[Your Clinic/Practice Letterhead]

[Date]

[Recipient Name]

[Recipient Title/Position]

[Recipient Institution/Practice Name]

[Recipient Address]

[City, State, ZIP Code]

Dear [Recipient Name],

Re: EKG Interpretation for [Patient Name]

Date of Service: [Date of EKG]

Patient ID: [Patient ID]

I am writing to provide you with the results of the EKG performed on [Patient Name] on [Date of EKG]. The following details were noted during the assessment:

****Clinical Indications:****

- [List indications that led to the EKG]

****ECG Findings:****

- Heart Rate: [HR] bpm

- Rhythm: [Rhythm description]

- PR Interval: [Duration]

- QRS Duration: [Duration]

- QT Interval: [Duration]

- Overall Interpretation: [Interpretation summary]

****Additional Notes:****

- [Any notable features such as abnormal findings or specific observations]

****Recommendations:****

- [List any recommendations for further testing, treatment options, or follow-up care]

Please feel free to contact me if you have any questions or require further information regarding this case. Thank you for your collaboration in providing the best care for our patient.

Sincerely,

[Your Name]

[Your Title/Position]

[Your Contact Information]

[Your Institution/Practice Name]