[Clinic Name]
[Clinic Address]
[City, State, Zip Code]
[Phone Number]

[Date]

[Patient Name]
[Patient Address]
[City, State, Zip Code]

RE: Renal (Kidney) Ultrasound Results

Dear [Patient Name],

The results of your recent renal ultrasound performed on [Date of Test] are now available. Your physician has reviewed these images and the findings are as follows:

Result Summary: [Normal / Abnormal / Inconclusive]

Detailed Findings:
[Insert brief description of findings regarding kidney size, shape, and presence of stones, cysts, or obstructions.]

Next Steps:
[ ] No further action is required at this time.
[ ] Please schedule a follow-up appointment to discuss these results in detail.
[ ] Further testing is recommended: [Insert Test Name].
[ ] A referral has been made to a specialist (Nephrologist/Urologist).

If you have any questions regarding these results, please contact our office at [Phone Number] or message us through the patient portal.

Sincerely,

[Provider Name/Signature]
[Title]
[Clinic Name]