

[Hospital or Clinic Letterhead]

[Date]

[Patient Name]

[Patient Address]

[City, State, Zip Code]

Dear [Patient Name],

This letter is to inform you of the results of your post-operative echocardiogram performed on [Date of Test]. This ultrasound of your heart was conducted to monitor your recovery following your recent procedure on [Date of Surgery].

**Result Summary:**

[Insert Summary: e.g., Your heart function is stable / The surgical repair looks intact / There is significant improvement in blood flow.]

**Key Findings:**

- Ejection Fraction (Heart Strength): [Percentage]%
- Valve Function: [Normal / As expected post-surgery]
- Fluid Status: [No fluid buildup detected / Minimal fluid detected]

**Next Steps:**

[Insert Next Steps: e.g., Continue current medications / Schedule a follow-up in 3 months / No further action required at this time.]

If you experience any new symptoms such as increased shortness of breath, chest pain, or sudden swelling in your legs, please contact our office immediately at [Phone Number] or seek emergency care.

Sincerely,

[Doctor's Name]

[Department Name]

[Contact Information]