

[Doctor Name]  
[Clinic/Hospital Name]  
[Address]  
[City, State, Zip Code]  
[Phone Number]  
[Date]

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

Dear [Patient Name],

I am writing to provide you with the results of the X-ray performed on [Date] regarding your [Body Part, e.g., left ankle].

The radiologist has completed the review of your images. The findings indicate: [Insert Brief Summary of Results, e.g., no signs of fracture or significant findings].

Based on these results, my recommendations for your care are as follows:

[Recommendation 1, e.g., Physical therapy]  
[Recommendation 2, e.g., Follow-up appointment in two weeks]  
[Recommendation 3, e.g., Over-the-counter pain relief as needed]

If you have any questions regarding these results or would like to discuss the next steps in more detail, please contact our office at [Phone Number] to schedule a consultation.

If you experience any new or worsening symptoms before our next scheduled contact, please let us know immediately.

Sincerely,

[Doctor Signature]

[Doctor Name, Credentials]