## **Follow-up After Radiology Appointment**

Date: [Insert Date]
Patient Name: [Insert Patient Name]
Patient ID: [Insert Patient ID]
Address: [Insert Patient Address]
Dear [Patient Name],
Thank you for visiting our facility on [Insert Appointment Date] for your radiology appointment We appreciate your trust in us and are committed to providing you with the highest level of care
The radiology results are currently being reviewed by our medical team. We aim to ensure a comprehensive evaluation, and we will contact you with the findings as soon as they become available. Please allow [Insert Estimated Time Frame] for processing the results.
If you have any questions or concerns in the meantime, do not hesitate to reach out to our office at [Insert Phone Number] or [Insert Email Address].
Thank you for your patience, and we look forward to assisting you further.
Sincerely,
[Your Name]
[Your Position]
[Facility Name]
[Facility Contact Information]