

[Your Name]
[Your Address]
[City, State, ZIP Code]
[Email Address]
[Phone Number]
[Date]
[Doctor's Name or Medical Facility's Name]
[Facility's Address]
[City, State, ZIP Code]

Dear [Doctor's Name or Medical Facility's Name],

I am writing to formally request an appointment for the insertion of an intrauterine device (IUD) as a method of contraception. After researching various contraceptive options, I believe that an IUD would be a suitable choice for my health and lifestyle.

I would appreciate the opportunity to discuss my medical history and any potential concerns during a consultation. I am looking for a reliable and effective long-term solution and would like to explore the best options available.

Please let me know available dates and times for an appointment. Thank you for considering my request.

Sincerely,
[Your Name]