

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]
[Healthcare Provider's Name]
[Healthcare Facility Name]
[Facility Address]
[City, State, Zip Code]

Dear [Healthcare Provider's Name],

I hope this letter finds you well. I am writing to formally request an appointment for an IUD (intrauterine device) healthcare procedure. After conducting research and discussing with my healthcare team, I believe that this method of contraception is suitable for my needs.

I would appreciate it if you could provide me with information regarding the next available appointment slots, the preparation required prior to the procedure, and any relevant costs associated with the service.

Thank you for your attention to my request. I look forward to your prompt response.

Sincerely,
[Your Name]