

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]
[Recipient's Name]
[Recipient's Title]
[Recipient's Organization]
[Organization Address]
[City, State, Zip Code]

Dear [Recipient's Name],

I am writing to express my intent to pursue IV therapy for [specific reason, e.g., hydration, nutrient deficiencies, recovery from illness]. After researching the benefits and potential outcomes, I believe that this treatment will effectively meet my health needs.

I understand the importance of discussing my medical history and preferences with a qualified professional. I am committed to working collaboratively to determine the most appropriate IV therapy protocol tailored to my situation.

I appreciate your consideration of my intent and look forward to the opportunity to discuss this further.

Thank you for your attention.

Sincerely,
[Your Name]