

[Your Name]
[Your Address]
[City, State, ZIP Code]
[Email Address]
[Phone Number]
[Date]
[Hospital Name]
[Department (if applicable)]
[Hospital Address]
[City, State, ZIP Code]

Dear [Health Care Provider's Name or "VBAC Coordinator"],

Subject: Request for VBAC (Vaginal Birth After Cesarean)

I hope this letter finds you well. I am writing to formally request the opportunity to pursue a vaginal birth after cesarean (VBAC) for my upcoming delivery.

My previous birth experience was [briefly describe previous birth(s) and any relevant medical history]. After thorough research and consideration, I believe that I am a suitable candidate for a VBAC and would like to discuss this option further with my healthcare team.

I have researched the potential risks and benefits associated with VBAC and am prepared to participate in any necessary evaluations to ensure both my health and the health of my baby during this process. I am eager to have a supportive birth experience and believe that a VBAC aligns with my birth plan.

I kindly request a meeting to discuss my eligibility for VBAC at [Hospital Name] and any policies or procedures I should be aware of.

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

Sincerely,

[Your Name]
[Your Patient ID (if applicable)]