

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]
[Doctor's Name]
[Doctor's Office/Clinic Name]
[Office Address]
[City, State, Zip Code]

Dear Dr. [Doctor's Last Name],

I hope this message finds you well. I am writing to discuss my current treatment plan and to request a prescription for Vyvanse.

Over the past few months, I have been experiencing symptoms consistent with [mention any relevant diagnosis, e.g., ADHD], which have significantly impacted my daily life, including [describe specific challenges, e.g., focus, organization, etc.]. After researching and considering various treatment options, I believe that Vyvanse would be an effective medication to address these symptoms.

I would appreciate the opportunity to discuss this option further during our next appointment or via a telehealth consultation if necessary. Thank you for your attention to this matter, and I look forward to your guidance.

Sincerely,
[Your Name]