

[Your Name]  
[Your Address]  
[City, State, Zip Code]  
[Email Address]  
[Phone Number]  
[Date]  
[Recipient Name]  
[Recipient's Title/Position]  
[Recipient's Institution/Practice Name]  
[Address]  
[City, State, Zip Code]

Dear [Recipient Name],

I hope this letter finds you well. I am writing to formally request guidance and support as I navigate the process of discontinuing my use of Vyvanse.

After careful consideration and discussions with my healthcare provider, I have decided to stop using Vyvanse due to [briefly explain reason, e.g., side effects, personal reasons, etc.]. I understand the importance of managing this process safely, so I am seeking your assistance in creating a withdrawal plan that minimizes potential discomfort or complications.

I would appreciate it if we could schedule a time to discuss the best approach to tapering off the medication and any alternative treatments or therapies you might recommend.

Thank you for your understanding and support during this transition. I look forward to hearing from you soon.

Sincerely,  
[Your Name]