

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

Dear [Recipient's Name],

Subject: Cessation of Vyvanse Treatment

I hope this message finds you well. I am writing to formally notify you of my decision to discontinue the use of Vyvanse, effective immediately. After careful consideration and discussion with my healthcare provider, I believe that ceasing this medication is in my best interest. I appreciate the support and guidance I've received throughout my treatment.

Please let me know if any further action is required on my part or if you need any additional information.

Thank you for your understanding.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]