

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

Dear [Doctor's Name],

I hope this letter finds you well. I am writing to inform you that I have decided to discontinue my use of Vyvanse. After careful consideration and consultation, I believe this is the best course of action for my health at this time.

I would like to request your guidance on how to manage the withdrawal process effectively and safely. Additionally, if there are alternative treatments or strategies you would recommend to assist with this transition, I would greatly appreciate your insights.

Thank you for your continued support and understanding. I look forward to discussing this with you further.

Sincerely,

[Your Name]
[Your Date of Birth]