

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]
[Recipient's Name]
[Recipient's Title]
[Medical Facility/Practitioner's Name]
[Address]
[City, State, Zip Code]

Dear [Recipient's Name],

I hope this letter finds you well. I am writing to formally inform you of my decision to discontinue the use of Vyvanse, prescribed to me for [reason for prescription, e.g., ADHD, etc.]. After careful consideration and upon discussions with my healthcare provider, I believe that it is in my best interest to pursue alternative treatment options.

I would like to express my gratitude for the support and guidance you have provided during my treatment. However, I have been experiencing [briefly explain any side effects or issues you are facing], which have led me to this decision.

I understand the importance of a structured withdrawal plan, and I would appreciate your assistance in creating one to manage any potential withdrawal symptoms effectively. Please let me know a suitable time for us to discuss this further.

Thank you for your understanding and support. I look forward to your prompt response.

Sincerely,
[Your Name]