

[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 [Doctor's Name],

I hope this message finds you well. I am writing to confirm my follow-up appointment regarding my Vyvanse prescription and to discuss my progress and any concerns that may have arisen since our last meeting.

Please let me know the available dates and times for the appointment. I am looking forward to our discussion and appreciate your continued support in managing my treatment.

Thank you for your attention.

Sincerely,

[Your Name]