

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Date]
[Recipient Name]
[Recipient Title]
[Recipient Organization]
[Address]
[City, State, Zip Code]

Dear [Recipient Name],

Subject: Withdrawal from Vyvanse Treatment

I hope this letter finds you well. I am writing to formally notify you of my decision to withdraw from my current Vyvanse treatment plan, effective [Insert Date].

After careful consideration and discussions with my healthcare provider, I believe that discontinuing Vyvanse is in my best interest for my health and well-being. I appreciate the support and guidance I've received during my treatment, and I am grateful for the understanding of my decision.

Please let me know if there are any further steps I need to take to finalize my withdrawal from the treatment program. I look forward to your confirmation of this request.

Thank you for your understanding.

Sincerely,

[Your Name]
[Your Contact Information]