

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]

[Recipient's Name]
[Recipient's Title]
[Medical Facility/Practice Name]
[Facility Address]
[City, State, Zip Code]

Subject: Medical Malpractice Claim Regarding Vyvanse Prescription

Dear [Recipient's Name],

I am writing to formally address a matter of grave concern regarding the prescription of Vyvanse, which I received under your care.

1. ****Background Information****

- Patient Name: [Your Full Name]
- Date of Birth: [Your DOB]
- Medical History Relevant to Vyvanse Prescription: [Brief overview]

2. ****Incident Description****

- Date(s) of Prescription: [Date(s)]
- Nature of Symptoms Experienced: [Detailed description of symptoms or side effects]
- Actions Taken: [List any steps you took to address the situation, including discussions with the prescribing doctor]

3. ****Allegations of Malpractice****

- Failure to Obtain Informed Consent: [Explain how the prescribing physician did not adequately inform you of risks and side effects]
- Negligence in Diagnosis or Treatment: [Describe how the physician's actions fell below the standard of care]

4. ****Impact on Health and Well-being****

- [Discuss how the prescription and subsequent issues affected your physical, emotional, or financial well-being]

5. ****Desired Resolution****

- [State what you seek as a resolution, whether it be an apology, reimbursement, or another form of redress]

I believe it is essential to address this issue promptly to ensure that similar situations do not occur in the future. I appreciate your attention to this matter and look forward to your response.

Sincerely,

[Your Name]

[Your Signature (if sending a hard copy)]