

Patient Safety Card

You will receive a **Patient Safety Card** about the risk of serious meningococcal infection from your healthcare provider.

- If you are taking **ULTOMIRIS**, carry this card with you at all times during your treatment and for 8 months after your last ULTOMIRIS dose.
- If you are taking **SOLIRIS**, carry this card with you at all times during your treatment and for 3 months after your last SOLIRIS dose.
- Your risk of serious meningococcal infections may continue for several months after your last dose of ULTOMIRIS and SOLIRIS.
- **Show this card to any healthcare provider who treats you. This will help them diagnose and treat you quickly.**
- Get treatment right away for any signs and symptoms of meningococcal infection even if you do not have your card on you.

PATIENT SAFETY CARD



Important Safety Information for Patients Taking ULTOMIRIS (ravulizumab-cwvz) or SOLIRIS (eculizumab)

ULTOMIRIS® and SOLIRIS® can increase your chance of getting **serious meningococcal infections. These infections may quickly become life-threatening or cause death if not recognized and treated early.** If you experience any of the following signs and symptoms of serious meningococcal infection, you should **immediately call your healthcare provider or seek emergency medical care, preferably in a major emergency medical care center:**

What is the ULTOMIRIS and SOLIRIS REMS?

A Risk Evaluation and Mitigation Strategy (REMS) is a drug safety program that the US Food and Drug Administration (FDA) can require for certain medicines to ensure they are used safely. When there is a REMS, drug companies, healthcare providers, healthcare settings, and pharmacies must take extra steps to make sure the benefits of using the drug are greater than the risks.

ULTOMIRIS and SOLIRIS have a REMS because they can increase your chance of getting serious meningococcal infections. Meningococcal infections may quickly become life-threatening or cause death if not recognized and treated early.

ULTOMIRIS
(ravulizumab-cwvz)

SOLIRIS
(eculizumab)

ULTOMIRIS and SOLIRIS REMS

What You Need to Know About ULTOMIRIS and SOLIRIS

Patient Guide

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What are ULTOMIRIS and SOLIRIS?

ULTOMIRIS® and SOLIRIS® are medicines that affect your immune system. ULTOMIRIS and SOLIRIS can lower the ability of your immune system to fight infections.

ULTOMIRIS is indicated for the treatment of:

- Adult and pediatric patients one month of age and older with paroxysmal nocturnal hemoglobinuria (PNH).
- Adult and pediatric patients one month of age and older with atypical hemolytic uremic syndrome (aHUS) to inhibit complement-mediated thrombotic microangiopathy (TMA).
- Adult patients with generalized myasthenia gravis (gMG) who are anti-acetylcholine receptor (AChR) antibody positive.
- Adult patients with neuromyelitis optica spectrum disorder (NMOSD) who are anti-aquaporin-4 (AQP4) antibody positive.

SOLIRIS is indicated for the treatment of:

- Patients with paroxysmal nocturnal hemoglobinuria (PNH) to reduce hemolysis.
- Patients with atypical hemolytic uremic syndrome (aHUS) to inhibit complement-mediated thrombotic microangiopathy.
- Generalized myasthenia gravis (gMG) in adult patients who are anti-acetylcholine receptor (AChR) antibody positive.
- Neuromyelitis optica spectrum disorder (NMOSD) in adult patients who are anti-aquaporin-4 (AQP4) antibody positive.

Call your healthcare provider or get emergency medical care right away if you get any of these signs and symptoms of a serious meningococcal infection:

- Fever
- Fever and a rash
- Fever with high heart rate
- Headache with nausea or vomiting
- Headache and fever
- Headache with stiff neck or stiff back
- Confusion
- Eyes sensitive to light
- Muscle aches with flu-like symptoms

What are the serious risks of ULTOMIRIS and SOLIRIS?

ULTOMIRIS and SOLIRIS increase your chance of getting serious and life-threatening meningococcal infections.

Meningococcal infections may quickly become life-threatening or cause death if not recognized and treated early.

Getting Your Meningococcal Vaccines

- Complete or update your meningococcal vaccine(s) at least 2 weeks before your first dose of ULTOMIRIS or SOLIRIS.
- If you have not completed your meningococcal vaccines and ULTOMIRIS or SOLIRIS must be started right away, you should receive the required vaccine(s) as soon as possible.
- If you have not been vaccinated and ULTOMIRIS or SOLIRIS must be started right away, you should also receive antibiotics to take for as long as your healthcare provider tells you.
- If you had a meningococcal vaccine in the past, you might need additional vaccines before starting ULTOMIRIS or SOLIRIS. Your healthcare provider will decide if you need additional meningococcal vaccines.
- Meningococcal vaccines do not prevent all meningococcal infections.
- Keep your vaccination records in a safe place and notify your healthcare provider that you have been vaccinated.
- Your healthcare provider and the certified healthcare setting or pharmacy may contact you to verify your vaccination records before your medicine is provided for you.