# REGISTERED PATIENTS



Female patients of childbearing potential (FCBP)

Male patients/Female patients not of childbearing potential (FNCBP)

### **BEFORE TREATMENT**

- **Sign** a Patient Information/Informed Consent (for all patients) form for treatment
- Sign a second Patient Information/Informed Consent About Birth Defects (for female patients who can get pregnant) form
- Get a screening urine/blood pregnancy test
- Receive patient ID card
- Choose 2 effective forms of birth control
- **Start** using the 2 forms of birth control simultaneously for at least 1 month
- Get a second pregnancy test within the first 5 days of your menstrual period (patient with irregular cycle please check with your prescriber) in an approved lab
- Access\* the iPLEDGE system to answer questions and to enter the 2 chosen forms of birth control
- **Get** a prescription for a maximum 30-day supply

- **Sign** a Patient Information/Informed Consent (for all patients) form for treatment
- Receive patient ID card
- **Get** a prescription for a maximum 30-day supply

## **EACH MONTH DURING THERAPY**



- Use the 2 forms of birth control simultaneously
- See your doctor for a monthly pregnancy test in an approved lab
- Access\* the iPLEDGE system to answer questions and confirm the 2 forms of birth control
- Get a prescription for a maximum 30-day supply

- See your doctor to get a prescription
- **Get** a prescription for a maximum 30-day supply



## **AFTER TREATMENT**



- Get a pregnancy test in an approved lab after the last dose
- Continue to use the 2 forms of birth control simultaneously for 1 month after the last dose
- Do not donate blood for 1 month after the last dose
- **Get** a final pregnancy test 1 month after last dose

• Do not donate blood for 1 month after your last dose