

# ALERT CARD FOR PATIENTS WITH NON-ONCOLOGY DISEASES

***Ruxience***<sup>®</sup>  
*rituximab*



## Why have I been given this card?


This medicine may make you more likely to get infections. This card tells you:

- What you need to know before having Ruxience
- What the signs of an infection are
- What to do if you think you might be getting an infection

It also includes your name and doctor's name and phone number on the back.

## What should I do with this card?

- Keep this card with you all the time - such as in your wallet or purse.
- Show this card to any doctor, nurse or dentist you see - not just the specialist who prescribes your Ruxience.



**Keep this card with you for 2 years after your last dose of Ruxience. This is because side effects can develop several months after you have had treatment.**

## When should I not have Ruxience?


Do not have Ruxience if you have an active infection or a serious problem with your immune system.

Tell your doctor or nurse if you are taking or have previously taken medicines which may affect your immune system this includes chemo-therapy.

## What are the signs of getting an infection?

Look out for the following possible signs of infection:

- Fever or cough all the time
- Weight loss
- Pain without injuring yourself
- Feeling generally unwell or listless.



**If you get any of these, tell a doctor or nurse straight away.**

**You should also tell them about your Ruxience treatment.**

## What else do I need to know?

Rarely Ruxience can cause a serious brain infection, called “Progressive Multifocal Leukoencephalopathy” or PML. This can be fatal.

- Signs of PML include:
  - Confusion, memory loss or problems thinking
  - Loss of balance or a change in the way you walk or talk
  - Decreased strength or weakness on one side of your body
  - Blurred vision or loss of vision

If you get any of these, tell a doctor or nurse straight away. You should also tell them about your Ruxience treatment.

## Where can I get more information?

*See the Ruxience package leaflet for more information.*

### Treatment start date and contact details

Date of most recent infusion:

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Date of first infusion: \_\_\_\_\_

Patient's Name:

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Doctor's Name:

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Doctor's contact details:

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**Make sure you have a list of all your medicines when you see a health care professional.**

**Please talk to your doctor or nurse if you have any questions about the information in this card.**