



## Your <sup>Pr</sup>TEGSEDI<sup>®</sup> dosing and appointment tracker

For adult patients with hereditary transthyretin amyloidosis (hATTR) being treated for stage 1 or stage 2 polyneuropathy.

 <sup>Pr</sup>**Tegsedi**<sup>®</sup>  
(inotersen) injection  
204 mg/15 mL

 **AKCEA** **CONNECT**  
SUPPORT PROGRAM

## My information

Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Phone # \_\_\_\_\_ Email \_\_\_\_\_

## My key contacts

### Emergency contact

Name \_\_\_\_\_

Phone # \_\_\_\_\_ Email \_\_\_\_\_

### Caregiver

Name \_\_\_\_\_

Phone # \_\_\_\_\_ Email \_\_\_\_\_

### Primary physician

Name \_\_\_\_\_

Phone # \_\_\_\_\_ Email \_\_\_\_\_

### Akcea® Connect Nurse Case Manager

Name \_\_\_\_\_

Phone # \_\_\_\_\_ Email \_\_\_\_\_

### Prescribing physician

Name \_\_\_\_\_

Phone # \_\_\_\_\_ Email \_\_\_\_\_

### Other

Name \_\_\_\_\_

Phone # \_\_\_\_\_ Email \_\_\_\_\_

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## Welcome to the Akcea Connect Patient Support Program!

The Akcea Connect Patient Support Program is here to help you through your treatment journey with TEGSEDI.

This diary was made to help you navigate through your treatment with TEGSEDI. In it you can find the following:

- Dosing calendar
- Appointment tracker
- Discussion guide
- Resources

Be sure to keep in contact with your Akcea Connect Nurse Case Manager who is here to help you and provide support while you are taking TEGSEDI.



**AKCEA** <sup>®</sup> **CONNECT**  
SUPPORT PROGRAM

For more information on the Akcea Connect Patient Support Program, please contact us by:



1-833-327-0723



[support@akceaconnect.ca](mailto:support@akceaconnect.ca)

Or visit our website at [akceaconnect.ca](http://akceaconnect.ca)

# Dosing calendar

## Usual dose

- 284 mg/1.5 mL inotersen injected just below your skin once a week.
- Your doctor may change how often you inject your dose depending on the results of your platelet count.
- Each prefilled syringe contains one dose and is for one-time use only.
- Use the entire contents of the syringe.
- Choose the same day of the week to have your dose.
- Your doctor will recommend taking vitamin A while on TEGSEDI.

Month of \_\_\_\_\_

SUN	MON	TUES	WED
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Notes

Before using TEGSEDI, your healthcare provider should show you or your caregiver how to use it the right way. If you or your caregiver have any questions, ask your healthcare provider.

Your dosing calendar is meant to help you keep track of your weekly dosing with TEGSEDI and include comments on anything you may want to discuss with your healthcare professional.

An example of recording a completed injection is shown in the calendar below. Use this as a guide when filling in your own dosing calendar, as this example does not apply to all TEGSEDI patients and your dosing calendar may be different.

THUR	FRI	SAT	Comments
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Month of \_\_\_\_\_

SUN	MON	TUES	WED

Notes



THUR	FRI	SAT	Comments
L	L	L	
L	L	L	
L	L	L	
L	L	L	
L	L	L	

Month of \_\_\_\_\_

SUN	MON	TUES	WED

Notes

THUR	FRI	SAT	Comments
L	L	L	
L	L	L	
L	L	L	
L	L	L	
L	L	L	

Month of \_\_\_\_\_

SUN	MON	TUES	WED

Notes

THUR	FRI	SAT	Comments
L	L	L	
L	L	L	
L	L	L	
L	L	L	
L	L	L	

Month of \_\_\_\_\_

SUN	MON	TUES	WED

Notes

THUR	FRI	SAT	Comments
L	L	L	
L	L	L	
L	L	L	
L	L	L	
L	L	L	

Month of \_\_\_\_\_

SUN	MON	TUES	WED

Notes



THUR	FRI	SAT	Comments
L	L	L	
L	L	L	
L	L	L	
L	L	L	
L	L	L	

Month of \_\_\_\_\_

SUN	MON	TUES	WED

Notes

THUR	FRI	SAT	Comments
L	L	L	
L	L	L	
L	L	L	
L	L	L	
L	L	L	

Month of \_\_\_\_\_

SUN	MON	TUES	WED

Notes

THUR	FRI	SAT	Comments
L	L	L	
L	L	L	
L	L	L	
L	L	L	
L	L	L	

Month of \_\_\_\_\_

SUN	MON	TUES	WED

Notes

THUR	FRI	SAT	Comments
L	L	L	
L	L	L	
L	L	L	
L	L	L	
L	L	L	

Month of \_\_\_\_\_

SUN	MON	TUES	WED

Notes



THUR	FRI	SAT	Comments
L	L	L	
L	L	L	
L	L	L	
L	L	L	
L	L	L	

Month of \_\_\_\_\_

SUN	MON	TUES	WED

Notes

THUR	FRI	SAT	Comments
L	L	L	
L	L	L	
L	L	L	
L	L	L	
L	L	L	

Month of \_\_\_\_\_

SUN	MON	TUES	WED

Notes

THUR	FRI	SAT	Comments
L	L	L	
L	L	L	
L	L	L	
L	L	L	
L	L	L	

Month of \_\_\_\_\_

SUN	MON	TUES	WED

Notes

THUR	FRI	SAT	Comments
L	L	L	
L	L	L	
L	L	L	
L	L	L	
L	L	L	

## Appointment tracker

The following pages can help you track any upcoming appointments during the course of your treatment with TEGSEDI.

Your own tracker may be different but use the examples below to help guide you in filling out your appointment tracker.

Date	Time	Location



With	Notes

<b>Date</b>	<b>Time</b>	<b>Location</b>

<b>With</b>	<b>Notes</b>

<b>Date</b>	<b>Time</b>	<b>Location</b>

<b>With</b>	<b>Notes</b>

<b>Date</b>	<b>Time</b>	<b>Location</b>

<b>With</b>	<b>Notes</b>

<b>Date</b>	<b>Time</b>	<b>Location</b>



<b>With</b>	<b>Notes</b>

<b>Date</b>	<b>Time</b>	<b>Location</b>

<b>With</b>	<b>Notes</b>

## Discussion guide

This section of your diary can help guide discussions between you and your doctor or your Akcea Connect Nurse Case Manager. Use the following pages to write down any important questions you may want to bring up during your next appointments. Here are a few frequently asked questions to help you get the most out of your appointments:

- What are the instructions for the administration of TEGSEDI?
- Will someone help me with my first self-injection?
- How will I be monitored during my treatment with TEGSEDI?



**Please see the Patient Medication Information leaflet that came with your medication for more detailed answers to the questions listed above.**

**If you feel you are experiencing a medical emergency, please call 911 or go to your nearest Emergency Department.**

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**For all non-emergency questions, please call the Akcea Connect Patient Support Program at 1-833-327-0723 from Monday to Friday between 8 AM and 8 PM EST.**

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## My questions



## My questions

## My questions



## My questions



## My questions

## Available resources for Canadians with hATTR

There are resources available to you that give you access to support and educational information for patients diagnosed with hATTR.

The Canadian Amyloidosis Support Network

[www.thecasn.org](http://www.thecasn.org)

Canadian Organization for Rare Disorders

[www.raredisorders.ca](http://www.raredisorders.ca)

Orphanet (Canada Page)

[www.orpha.net/national/CA-EN/index/homepage/](http://www.orpha.net/national/CA-EN/index/homepage/)

Regroupement québécois des maladies orphelines (RQMO)

[www.rqmo.org](http://www.rqmo.org)

Please consult the Patient Medication Information leaflet that came with your medication for more information on TEGSEDI. This leaflet is only a summary and will not tell you everything about this drug. Talk to your healthcare providers about your medical condition and treatment and ask if there is any new information about TEGSEDI.



Questions? Ask us.

For more information on the Akcea Connect Patient Support Program, please contact us by:



1-833-327-0723



[support@akceaconnect.ca](mailto:support@akceaconnect.ca)

Or visit our website at [akceaconnect.ca](http://akceaconnect.ca)



*Pr* **Tegsedi**<sup>®</sup>  
(inotersen) *injection*  
284 mg/1.5 mL



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