

TEPEZZA Patient Enrollment Form Checklist

Quick Reference Guide to Ensure a Seamless Path to Treatment For Your Patients

Enrolling Patients

- Complete the Patient Enrollment Form (PEF) to initiate your patient's enrollment in Amgen By Your Side
 - The PEF must be dated and signed by **both the physician and the patient**
 - Patient needs to check the **"I consent"** box in order to be enrolled into Amgen By Your Side
 - Include a copy of the patient's insurance card (front and back)
 - Consider adding the patient demographic sheet
 - If applicable, fill out the co-managing/referring physician section of the PEF so that we can ensure they are part of the patient's care team

Submit all 4 pages of the PEF and insurance card via fax: 1-833-469-8333 or TEPEZZAABYS@amgen.com

- Initiate collection of clinical documentation needed for Prior Authorization process
 - Work with your Patient Access Liaison (PAL) to review and understand your patient's payor medical policy
 - Common criteria may include prior treatments for Thyroid Eye Disease (TED); thyroid labs (T3, T4, TSH, TSI, TBII); or documentation of common inflammatory signs and symptoms that suggest Thyroid Eye Disease (TED), such as: eye pain or pressure behind the eyes, swelling or redness of the eyelids, bulging or swelling of the eyes, double vision, persistent redness in or around the eyes, and excess dryness or irritation.
 - Please note: Clinical Documentation should NOT be submitted with the Patient Enrollment form**

Links to additional resources for the Prior Authorization process on back.

Educating Patients

- Use TEPEZZA patient educational materials to set patient expectations around getting started on TEPEZZA and the importance of completing the full course of therapy. Visit TEPEZZA.com.
- Have your patients watch the **Getting Started Video** and provide them with the **TEPEZZA Education Brochure** that was provided to your office



Getting Started Video

A video to help your patients understand how to get started on TEPEZZA.

Connecting Patients with their Amgen By Your Side PAL

The Patient Access Liaison (PAL) is a dedicated support partner who helps investigate, explain, and educate on the steps in your patient's treatment experience. They are your patient's point of contact and champion while your patient is accomplishing their treatment goals.

- Make sure the patient is aware their PAL will be calling them in the next few days to provide information on next steps, the infusion process, and getting started on TEPEZZA
- Have the patient save their PAL's contact in their phone
 - It is important that a patient answers the PAL's call**

PAL Name: _____ **Phone Number:** _____

Additional Resources:



Patient Enrollment Form

The Patient Enrollment Form is a tool that captures patient and HCP information to initiate enrollment in Amgen By Your Side.



Letter of Medical Necessity

Templates to use when communicating with payors regarding PAs or denials.



Clinical Documentation Guide

Document the signs and symptoms of TED to support treatment initiation and clinical information required for Prior Authorization.



Payor Appeal

Templates to use when communicating with payors regarding a PA denial.

INDICATION

TEPEZZA is indicated for the treatment of Thyroid Eye Disease regardless of Thyroid Eye Disease activity or duration.

IMPORTANT SAFETY INFORMATION

WARNINGS AND PRECAUTIONS

Infusion Reactions: TEPEZZA may cause infusion reactions. Infusion reactions have been reported in approximately 4% of patients treated with TEPEZZA. Reported infusion reactions have usually been mild or moderate in severity. Signs and symptoms may include transient increases in blood pressure, feeling hot, tachycardia, dyspnea, headache, and muscular pain. Infusion reactions may occur during an infusion or within 1.5 hours after an infusion. In patients who experience an infusion reaction, consideration should be given to premedicating with an antihistamine, antipyretic, or corticosteroid and/or administering all subsequent infusions at a slower infusion rate.

Inflammatory Bowel Disease: TEPEZZA may cause an exacerbation of inflammatory bowel disease (IBD). IBD has been reported in some patients without a prior diagnosis of IBD. Monitor patients for signs and symptoms of IBD. If IBD exacerbation is suspected, discontinue use of TEPEZZA.

Hyperglycemia: Increased blood glucose or hyperglycemia may occur in patients treated with TEPEZZA. In clinical trials, 10% of patients (two-thirds of whom had preexisting diabetes or impaired glucose tolerance) experienced hyperglycemia. Hyperglycemic events should be controlled with medications for glycemic control, if necessary. Assess patients for elevated blood glucose and symptoms of hyperglycemia prior to infusion and continue to monitor while on treatment with TEPEZZA. Ensure patients with hyperglycemia or preexisting diabetes are under appropriate glycemic control before and while receiving TEPEZZA.

Hearing Impairment Including Hearing Loss: TEPEZZA may cause severe hearing impairment including hearing loss, which in some cases may be permanent. Assess patients' hearing before, during, and after treatment with TEPEZZA and consider the benefit-risk of treatment with patients.

Adverse Reactions

The most common adverse reactions (incidence $\geq 5\%$ and greater than placebo) are muscle spasm, nausea, alopecia, diarrhea, fatigue, hyperglycemia, hearing impairment, dysgeusia, headache, dry skin, ear discomfort, weight decreased, nail disorders, and menstrual disorders.

Please see [Full Prescribing Information](#) or visit [TEPEZZAhcp.com](https://www.tepezzahcp.com) for more information.

