forgingbridges™ | TRUSELTIQ™ (infigratinib) capsules

TRUSELTIQ Free Trial Program

Instructions: Please complete and fax this page to: 833-551-2223

Phone: 1-888-55BRIDGE (1-888-552-7434)
Fax: 833-551-2223
Web: TRUSELTIQ.com/hcp/forgingbridges
Hours: Monday-Friday, 8 AM-8 PM ET

PATIENT INFORMATION

First Name: _____ Last Name: _____ DOB: _____ (mm/dd/yyyy)

Street: _____

City: _____ State: _____ Zip: _____

US Resident? ☐ Yes ☐ No Gender: ☐ Male ☐ Female Email: _____

Preferred Phone: _____ Mobile Phone? ☐ Yes ☐ No

Alternate Shipping Address: _____ City: _____ State: _____ Zip: _____

PRESCRIBER INFORMATION

Prescriber Name: _____ Prescriber NPI #: _____

Facility Name: _____

Street: _____ City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Office Contact Name: _____ Office Contact Phone: _____

Office Contact Fax: _____ Office Contact Email: _____

DIAGNOSIS CODE

☐ C22.1 – Intrahepatic Bile Duct Carcinoma

☐ C24.0 – Malignant Neoplasm of Extrahepatic Bile Duct

Please see the Indication and Important Safety Information on pages 2 and 3 and click here for full Prescribing Information.

TRUSELTIQ FREE TRIAL PROGRAM

Free Trial Program Rx (New Patients)

I authorize the ForgingBridges | TRUSELTIQ Free Trial Program Pharmacy to dispense a free 1-time, 28-day supply of TRUSELTIQ.

The TRUSELTIQ Free Trial Program (FTP) provides up to a 21-day supply of TRUSELTIQ at no cost to patients who meet FTP eligibility requirements and who agree to the FTP terms and conditions by submitting a signed FTP enrollment form. (i) FTP is a free trial offer, intended solely to allow new patients to try TRUSELTIQ and to determine with their healthcare provider whether TRUSELTIQ is right for them. There is no obligation to continue use of TRUSELTIQ after the free trial has been completed; (ii) to be eligible, patient must: (1) reside in the United States or Puerto Rico and (2) be a new patient not currently using TRUSELTIQ or who previously received TRUSELTIQ through the FTP; (iii) TRUSELTIQ supplied through the FTP will be dispensed only through a pharmacy designated by QED Therapeutics up to the limits above; (iv) product may only be delivered to the patient's home address (no PO boxes) or the prescribing healthcare provider's office; (v) it is unlawful for any person to sell, purchase, trade, barter or export TRUSELTIQ supplied through the FTP or make an offer to do so; (vi) TRUSELTIQ supplied through the FTP may not be billed (in whole or part, directly or indirectly) to any patient or third-party payer, including Medicare, Medicaid, and commercial insurance plans; (vii) QED Therapeutics reserves the right to change or discontinue the FTP at any time without notice; (viii) the FTP is not health insurance; (ix) the FTP is not a discount, rebate, coupon, cost-sharing program, or other form of financial assistance and no portion of the value of the FTP product may count as a patient out-of-pocket expense under any health insurance program; (x) TRUSELTIQ supplied free of charge through the FTP is not contingent on continued use of TRUSELTIQ. To continue a patient on therapy, a separate prescription must be written by the healthcare provider; (xi) the FTP is void where prohibited by law and where use is prohibited by the patient's insurance provider.

☐ (No Refills) 125 mg by mouth daily x 21 days, (taken as one 100-mg capsule and one 25-mg capsule) (recommended starting dose)

☐ (No Refills) 100 mg by mouth daily x 21 days, (taken as one 100-mg capsule) for patients with mild hepatic impairment; patients with mild to moderate renal impairment

☐ (No Refills) 75 mg by mouth daily x 21 days, (taken as three 25-mg capsules) for patients with moderate hepatic impairment

SIGNATURE _____ Date

(Original signature required - *If required by applicable law, please attach copies of all prescriptions on official state prescription forms)

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PRESCRIBER CERTIFICATION

I certify that the information provided in this ForgingBridges | TRUSELTIQ Free Trial Program Form is complete and accurate to the best of my knowledge. I have prescribed TRUSELTIQ based on my judgment of medical necessity, and I will supervise the patient's medical treatment. I certify that I have obtained my patient's written authorization in accordance with applicable state and federal law, including the Health Insurance Portability and Accountability Act of 1996 and its implementing regulations to provide the individually identifiable health information on this form for coordination and dispensing of TRUSELTIQ. I authorize the forwarding of this prescription and information to a dispensing pharmacy for the ForgingBridges | TRUSELTIQ Free Trial Program. I understand that neither I as the prescriber, nor the patient receiving the Free Trial, should seek reimbursement for product received under this program.

PRESCRIBER SIGNATURE _____ (Original signature required - *If required by applicable law, please attach copies of all prescriptions on official state prescription forms)

Date _____

INDICATION

TRUSELTIQ is indicated for the treatment of adults with previously treated, unresectable, locally advanced or metastatic cholangiocarcinoma with a fibroblast growth factor receptor 2 (FGFR2) fusion or other rearrangement as detected by an FDA-approved test.

Accelerated approval was granted based on overall response rate and duration of response. Continued approval for this indication may be contingent upon verification of clinical benefit in confirmatory trial(s).

IMPORTANT SAFETY INFORMATION

Warnings and precautions

- **Ocular toxicity:** Retinal pigment epithelial detachment (RPED), which may cause blurred vision, occurred in 11% of 351 patients treated with TRUSELTIQ, including patients with asymptomatic RPED, with a median onset of 26 days. Perform comprehensive ophthalmological exam including optical coherence tomography prior to initiating, at 1 month, at 3 months, and then every 3 months during treatment with TRUSELTIQ. Urgently evaluate patients for onset of visual symptoms and follow up every 3 weeks until resolved or TRUSELTIQ is discontinued. Withhold TRUSELTIQ as recommended. Dry eye occurred in 29% of 351 patients; treat with ocular demulcents as needed
- **Hyperphosphatemia and soft tissue mineralization:** Hyperphosphatemia, which can lead to soft tissue mineralization, cutaneous calcinosis, non-uremic calciphylaxis, vascular calcification, and myocardial calcification, occurred in 82% of 351 patients treated with TRUSELTIQ, with a median time to onset of 8 days (range 1-349); 83% of 351 patients treated with TRUSELTIQ received phosphate binders. Monitor for hyperphosphatemia throughout treatment. Initiate phosphate-lowering therapy for serum phosphate >5.5 mg/dL; withhold TRUSELTIQ and initiate phosphate-lowering therapy for serum phosphate >7.5 mg/dL; withhold, reduce the dose, or permanently discontinue TRUSELTIQ based on duration and severity of hyperphosphatemia
- **Embryo-fetal toxicity:** TRUSELTIQ can cause fetal harm. Advise pregnant women of the potential risk to the fetus; advise females of reproductive potential and men who are partnered with women of reproductive potential to use effective contraception during treatment with TRUSELTIQ and for 1 month after the final dose

Adverse reactions

- **Most common adverse reactions** (incidence ≥20%, all grades): nail toxicity, stomatitis, dry eye, fatigue, alopecia, palmar-plantar erythrodysesthesia syndrome, arthralgia, dysgeusia, constipation, abdominal pain, dry mouth, eyelash changes, diarrhea, dry skin, decreased appetite, blurred vision, and vomiting

Please see additional Important Safety Information on following page and click here for full Prescribing Information.

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IMPORTANT SAFETY INFORMATION (CONT)

Adverse reactions (cont)

- **Most common laboratory abnormalities** (incidence ≥20%, all grades): increased creatinine, increased phosphate, decreased phosphate, increased alkaline phosphatase, decreased hemoglobin, increased alanine aminotransferase, increased lipase, increased calcium, decreased lymphocytes, decreased sodium, increased triglycerides, increased aspartate aminotransferase (AST), increased urate, decreased platelets, decreased leukocytes, decreased albumin, increased bilirubin, and decreased potassium

Drug interactions

- **CYP3A inhibitors:** Avoid use with strong and moderate CYP3A inhibitors
- **CYP3A inducers:** Avoid use with strong and moderate CYP3A inducers
- **Gastric acid–reducing agents:** Avoid coadministration with proton pump inhibitors, histamine-2 receptor antagonists (H2RA), and locally acting antacids. If coadministration of H2RA or locally acting antacids cannot be avoided, separate TRUSELTIQ administration
  - H2RA: Take TRUSELTIQ 2 hours before or 10 hours after
  - Locally-acting antacid: Take TRUSELTIQ 2 hours before or 2 hours after

Dosage and administration

- **Prior to initiating TRUSELTIQ:** Confirm FGFR2 fusion or rearrangement; perform comprehensive ophthalmic exam including OCT; confirm negative pregnancy test in females of reproductive potential
- **Starting dose:** Take TRUSELTIQ orally once daily on Days 1-21 of 28-day cycles; continue treatment until disease progression or unacceptable toxicity. Take TRUSELTIQ on an empty stomach with a glass of water at least 1 hour before or 2 hours after food
  - No renal or hepatic impairment
    - 125 mg (one 100 mg capsule and one 25 mg capsule)
  - Mild and moderate renal impairment (creatinine clearance 30-89 mL/min)
    - 100 mg (one 100 mg capsule)
  - Mild hepatic impairment (total bilirubin >upper limit of normal [ULN] to 1.5 x ULN or AST > ULN)
    - 100 mg (one 100 mg capsule)
  - Moderate hepatic impairment (total bilirubin >1.5 to 3 x ULN with any AST)
    - 75 mg (three 25 mg capsules)
- **Dose modification:** Consult the TRUSELTIQ full Prescribing Information for dose modifications and monitoring recommendations for RPED, hyperphosphatemia, and other Grades 3-4 adverse reactions

Please click here for full Prescribing Information.

Reference: TRUSELTIQ Prescribing Information. Brisbane, CA: QED Therapeutics, Inc.; May 2021.

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