

PRESCRIBER CHECKLIST

PrNAT-TERIFLUNOMIDE

Teriflunomide Tablets 14 mg

At first prescription, the Prescriber/Healthcare Professional (HCP) should discuss with the patient the risks described below and provide the Patient Card. Please see the Product Monograph for full prescribing information, which is available on the Health Canada website https://health-products.canada.ca/dpd-bdpp/index-eng.jsp.

Patient's Name: First Visit Date: First Prescription Date:		Patient's Age:			
		Patient's Gender:	☐ Male	□ Female	
		Today's Date:			
La	boratory Tests (prior to initiation and during treatment)				
	Check blood pressure before initiation of treatment with Nathroughout treatment. Blood pressure should be appropria TERIFLUNOMIDE. Obtain a complete blood cell (CBC) count before initiation	tely managed during	treatment	t with NAT-	
	 and periodically during treatment. Further monitoring should be based on signs and symptoms suggestive of infection. Prior to initiating NAT-TERIFLUNOMIDE, screen patients for latent tuberculosis infection. Obtain serum transaminases and bilirubin levels within 6 months before initiation of treatment with NAT-TERIFLUNOMIDE. Monitor ALT levels at least monthly for at least six months after starting 				
	NAT-TERIFLUNOMIDE. Obtain a negative pregnancy test before initiation of treatments.	nent with NAT-TERIF	LUNOMIE	DE	
HE	PATIC EFFECTS:				
	riflunomide is contraindicated in patients with severe hepatic ease may be at increased risk of developing elevated serun				
per Blo	Discuss the risk of liver effects, and the need to conduct liveriodically during treatment as per Product Monograph. ood tests required to check patient's liver function: within 6 months before starting NAT-TERIFLUNOI every month, for 6 months after starting NAT-TER	MIDE. IFLUNOMIDE.			

dark urine, abdominal pain, nausea, vomiting, loss of appetite, weight loss, unusual tiredness.

starting NAT-TERIFLUNOMIDE.

doctor/HCP if these develop.

TERATOGENICITY:

Teriflunomide may cause major birth defects if used during pregnancy. Teriflunomide is contraindicated in women who are pregnant or in women of childbearing potential not using reliable contraception. Before

TERIFLUNOMIDE. Monitor alanine aminotransferase (ALT) levels at least monthly for six months after

The common symptoms of liver disorder as per product monograph are: Yellowing of the skin or eyes,

Educate the patient about signs and symptoms of liver disease, and about the need to contact their

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starting treatment with NAT-TERIFLUNOMIDE in women of childbearing potential, counsel patients fully on the potential for serious risk to the fetus and discuss reliable contraception methods.

In women of childbearing potential, exclude pregnancy and emphasise the need for effective

contraception before starting and during their treatment with NAT-TERIFLUNOMIDE because of potential serious risks to the fetus: ☐ Check the pregnancy status before starting NAT-TERIFLUNOMIDE treatment. Obtain a negative pregnancy test before initiation of treatment with NAT-TERIFLUNOMIDE. ☐ Advise the patient that she should contact the doctor/HCP immediately if she stops contraception, before changing contraceptive measures, if there is a delay in onset of menses or any other reason to suspect pregnancy. ☐ Advise the patient that if she becomes pregnant despite using contraceptive measures, she should stop using NAT-TERIFLUNOMIDE and contact her doctor/HCP immediately who should: consider and discuss with the patient an Accelerated Elimination Procedure encourage the patient to enrol in the Teriflunomide Enhanced Pharmacovigilance Pregnancy Active Surveillance Program ☐ For male patients: whose partner plans to become pregnant: patient should stop taking NAT-TERIFLUNOMIDE and undergo an Accelerated Elimination Procedure. Whose partner does not plan to become pregnant: patient and partner should use a reliable and effective method of birth control. Healthcare Professionals are encouraged to enroll pregnant women in the Teriflunomide Enhanced Pharmacovigilance Pregnancy Active Surveillance Program, or pregnant women may enroll themselves in the Teriflunomide Enhanced Pharmacovigilance Pregnancy Active Surveillance Program by calling 1-800-296-9329. Refer to the manufacturer's website – www.natcopharma.ca for more information. **HEMATOLOGICAL EFFECTS:** In patients with pre-existing anemia, leucopenia, and/or thrombocytopenia as well as in patients with impaired bone marrow function or those at risk of bone marrow suppression, the risk of hematological disorders is increased. ☐ Discuss the risk of decreased blood cell counts (affecting mainly white blood cells). Discuss the need for full blood counts before treatment and during treatment, and when signs and symptoms show/present. Obtain a complete blood cell (CBC) count before initiation of treatment with NAT-TERIFLUNOMIDE. Further monitoring should be based on signs and symptoms suggestive of infection. **HYPERTENSION:** ☐ Discuss the risk of blood pressure increase. Educate the patient to tell their doctor/HCP if they have hypertension and discuss the need for blood pressure checks and appropriate management, before and periodically during treatment. Check blood pressure before initiation of treatment with NAT-TERIFLUNOMIDE and periodically thereafter. Elevated blood pressure should be appropriately managed during treatment with NAT-TERIFLUNOMIDE. INFECTIONS/SERIOUS OPPORTUNISTIC INFECTIONS INCLUDING PML:

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☐ Discuss risk of infections/serious infections, including the need to contact their doctor/HCP in case of signs or symptoms of infection, or if the patient takes other medicines that affect the immune system.

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suspected side affects.



Teriflunomide is contraindicated in patients with severe immunodeficiency, bone marrow disease or severe, uncontrolled infections. Patients with active acute or chronic infections should not start treatment until the infection(s) is resolved. If serious infection occurs, an Accelerated Elimination Procedure may be considered.

Prior to initiating NAT-TERIELUNOMIDE screen patients for latent tuberculosis infection. Treat patients

testing positive in tuberculosis screening, prior to initiati	
INTERSTITIAL LUNG DISEASE	
☐ Discuss the risk of interstitial lung disease. Educate patients about potential symptoms of interstitia of pulmonary symptoms, such as persistent cough and	
Check if patient has a history of interstitial lung disease	t.
If discontinuation of the drug is necessary, an Accelera	ted Elimination Procedure may be considered
PATIENT CARD Please provide the patient with the Patient Card, signs to be aware of and to relay information to oth medical care (especially in case of medical emerge Please remind the patient to contact their doctor/H0 the Patient Card.	er doctors/HCPs involved with their incidental ncies and/or if new doctors/HCPs are involved)
The patient has been informed about and understands treatment. Female patients have been checked for pregadvised of the need for reliable contraception, informed Accelerated Elimination Procedure and the Teriflunomic Active Surveillance Program.	gnancy, all patients (male and female) have been about the option of the NAT-TERIFLUNOMIDE
At prescription renewal, adverse events are checked, or and checks are made to ensure adequate monitoring is	
Prescriber's Name:	Proscriber's Signature:
Prescriber's Name:	Prescriber's Signature:
Prescriber's Name:	Prescriber's Signature:

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monitoring of the benefit/risk balance of the drug product. Healthcare Professionals are asked to report any