

PATIENT ALERT CARD Have This Card With You At All Times

My name is: _____

I have been treated with KYMRIA[®], an immunocellular therapy containing genetically modified autologous T cells.

Batch ID: _____

Date of treatment: _____

KYMRIA[®] treating physician's name and contact details: _____

Before providing any treatment, please call my treating doctor at the number above. When reporting possible side effects, please include the individual Batch ID printed above. I should not donate blood, organs, tissues, or cells.



Patient Information

Kymriah may cause side effects that are severe or life-threatening.

Tell your doctor immediately or go to the hospital's emergency department if you experience any of the following side effects:

- Difficulty breathing
- Fever (38°C or higher)
- Chills or shivering
- Confusion
- Headache
- Severe nausea, vomiting, diarrhoea
- Severe muscle or joint pain
- Very low blood pressure
- Dizziness or lightheadedness



INFORMATION FOR THE HEALTHCARE PROVIDER

Healthcare professionals are encouraged to report serious adverse events related to the use of Kymriah to Novartis at <https://www.novartis.com/report> or by calling Novartis at 6019 6483, or to the local Health Authority at Vigilance and Compliance Branch, Health Products Regulation Group, Health Sciences Authority at Tel: 6866 1111, or report online at <https://www.hsa.gov.sg/adverse-events>.

When reporting possible adverse events, please include the individual Batch ID printed on the front of this card.



INFORMATION FOR THE HEALTHCARE PROVIDER

This patient has received KYMRIAH (tisagenlecleucel), an autologous CAR-T cell therapy. Following Kymriah treatment, cytokine release syndrome can happen. It may include neurological toxicities. Treatment with Kymriah may result in a false-positive HIV test result. This patient should not donate blood, organs, tissues, or cells. Patient may develop secondary malignancies, including those of T-cell origin. In such an event, healthcare professionals are encouraged to contact Novartis at 6019 6483 or patientsafety.sg@novartis.com to obtain instructions to collect patient samples for testing.

Before providing any treatment, call the treating physician at the number on the front of the card.



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This document has been approved by HSA as of 14 Mar 2025