

# Patient Card



Patient Name: .....

## TREATED EYE

Left Eye

Right Eye

Date of treatment

LUXTURNA®  
(voretigene neparvovec)  
Batch number

## Treating ophthalmologist

Name: .....

Phone number: .....

The information on this card is available as an audio file and can be found at  
[www.medhub.novartis.com.sg/ermp/luxturna](http://www.medhub.novartis.com.sg/ermp/luxturna)



## Information for patients:

You should rest lying on your back as much as possible for 24 hours after discharge. After receiving voretigene neparovec, avoid the following activities, unless advised by your doctor

- Air travel or other travel to high elevations
- Swimming
- Strenuous physical activity

Follow these precautions for 14 days after voretigene neparovec treatment

- Place used dressings and waste material with tears and nasal secretions in sealed bags before disposing of them
- Wear gloves during dressing changes and waste disposal, especially for those who are pregnant, breastfeeding or with a suppressed immune system

## Get immediate care from your doctor if you experience any of the following side effects:

- Your eye or eyes become red, painful, sensitive to light
- You see flashes or floaters in your vision
- Worsening or blurred vision

Do not donate blood, organs, tissues and cells for transplantation after you have been treated with voretigene neparovec.

Ensure that you attend all follow-up appointments and report any possible side effects to your doctor.

## Information for health care professionals:

The holder of this card has received LUXTURNA® (voretigene neparvovec), an adeno-associated virus vector based gene therapy. This patient should not donate blood, organs, tissues or cells. Before providing any treatment, please call their prescribing physician on the number provided on this card. Healthcare professionals are encouraged to report serious adverse events related to the use of voretigene neparvovec to Novartis at <https://psi.novartis.com> or to the Health Sciences Authority, Vigilance and Compliance Branch at Tel: 68661111, Fax: 64789069, or online at <https://www.hsa.gov.sg/adverse-events>.

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



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