

In case of emergency, or if you find this card,  
please contact the doctor listed below:

Doctor's Name/Clinic, Centre or Hospital Name:

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Telephone contact:

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IMPORTANT  
MEDICAL INFORMATION  
INSIDE

**Daratumumab Patients: Provide this card to healthcare providers BEFORE blood transfusion and carry it for 6 months after treatment has ended.**

## Patient ID Card for Daratumumab

Name: \_\_\_\_\_

### I am taking the following medication:

- Darzalex® IV/SC for the treatment of multiple myeloma  
 Darzalex® SC for the treatment of light-chain(AL)amyloidosis

I stopped taking this medication on \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
DD MM YYYY

IV, intravenous; SC, subcutaneous

### Dear Healthcare Provider,

Daratumumab is associated with the risk of interference with pre-transfusion blood testing. The Indirect Coombs test (Indirect antiglobulin test [IAT]) may show positive results in patients taking daratumumab, even in the absence of antibodies to minor blood antigens in the patient's serum which may persist for up to 6 months after the last dose. The determination of a patient's ABO and Rh blood type are not impacted. If an emergency transfusion is required, non-cross-matched, ABO/RhD-compatible RBCs can be given per local blood bank practices.

*For more information, please refer to the local approved package insert, which is available on the Singapore Health Sciences Authority (HSA) website.*

**Before starting daratumumab my blood test results collected on \_\_\_\_ / \_\_\_\_ / \_\_\_\_ were:**  
DD MM YYYY

Blood type: A B AB O Rh+ Rh-

**Indirect Coombs test (antibody screen) was:**

Negative Positive for the following antibodies:

Other: \_\_\_\_\_

Contact details of institution where the blood tests were performed: \_\_\_\_\_