

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 KYMRIA[®] (tisagenlecleucel), an autologous CAR-T cell therapy. Following Kymria[®] treatment, cytokine release syndrome can happen. It may include neurological toxicities. Treatment with Kymria[®] 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