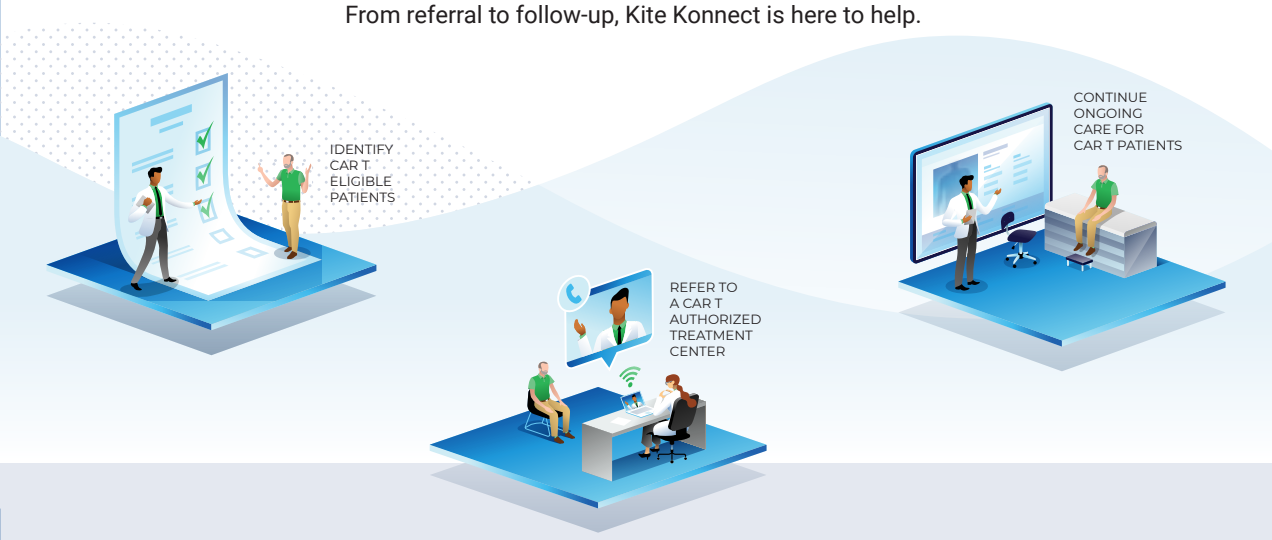
Collaborative Care

WITH KITE KONNECT®

You're at the center of your patient's CAR T Therapy journey.
From referral to follow-up, Kite Konnect is here to help.



INDICATION

Yescarta® (axicabtagene ciloleucel) is a CD19-directed genetically modified autologous T cell immunotherapy indicated for the treatment of adult patients with relapsed or refractory large B-cell lymphoma after two or more lines of systemic therapy, including diffuse large B-cell lymphoma (DLBCL) not otherwise specified, primary mediastinal large B-cell lymphoma, high grade B-cell lymphoma, and DLBCL arising from follicular lymphoma.

Limitation of Use: Yescarta® is not indicated for the treatment of patients with primary central nervous system lymphoma.

IMPORTANT SAFETY INFORMATION

BOXED WARNING: CYTOKINE RELEASE SYNDROME AND NEUROLOGIC TOXICITIES

- Cytokine Release Syndrome (CRS), including fatal or life-threatening reactions, occurred in patients receiving Yescarta®. Do not administer Yescarta® to patients with active infection or inflammatory disorders. Treat severe or life-threatening CRS with tocilizumab or tocilizumab and corticosteroids.
- Neurologic toxicities, including fatal or life-threatening reactions, occurred in patients receiving Yescarta®, including concurrently with CRS or after CRS resolution. Monitor for neurologic toxicities after treatment with Yescarta®. Provide supportive care and/or corticosteroids as needed.
- Yescarta® is available only through a restricted program under a Risk Evaluation and Mitigation Strategy (REMS) called the Yescarta® REMS.

Please see additional **IMPORTANT SAFETY INFORMATION** throughout this brochure.

Kite Konnect®

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HOW COLLABORATIVE CARE WORKS

CAR T Therapy for your patients is a journey that begins and ends with you. Along the way, collaboration between you, your patients, and the Authorized Treatment Center is key to your patients' success.

Four simple steps will keep you, your patients, and the CAR T team at an Authorized Treatment Center connected throughout your patients' CAR T Therapy journey.

STEP 1

Patient Identification

Early Identification is critical to patient outcomes. Know when it's time to consider CAR T Therapy for your patients.

STEP 2

Patient Referral

Once your patient has been identified as a potential candidate, follow our 4 simple steps on the back page to help facilitate their referral to an Authorized Treatment Center and track their treatment progress.

Patient's consent is required for submitting a Kite Konnect referral.

STEP 3

Treatment

Your patient will be assessed by the CAR T Therapy team at the Authorized Treatment Center and treatment will begin. You'll be able to see who your patient's treating physician is through the Kite Konnect Referral Portal.

STEP 4

Ongoing Care & Follow-up

By using the Kite Konnect Referral Portal, you can remain in contact with the Authorized Treatment Center and coordinate any necessary follow-up appointments.

HOW ELSE DO WE HELP?

Beyond serving as a tool for CAR T Therapy identification and referral, Kite Konnect® offers you and your patients helpful resources throughout the treatment journey.

Find Educational Resources

Access reimbursement information and education tools for guiding your patients throughout their Yescarta® CAR T Therapy.

Facilitate Communication With Other Clinicians

Communicate with the treating physician at the Authorized Treatment Center to stay informed and involved in your patient's progress.

Provide Ongoing Support for Your Patient

Search a directory of independent nationwide programs for patient assistance, including housing, transportation, and financial support. You can also start a Benefits Investigation request on behalf of your patient during the referral process.

IMPORTANT SAFETY INFORMATION, CONTINUED

CYTOKINE RELEASE SYNDROME (CRS): CRS occurred in 94% of patients, including 13% with ≥ Grade 3. Among patients who died after receiving Yescarta®, 4 had ongoing CRS at death. The median time to onset was 2 days (range: 1-12 days) and median duration was 7 days (range: 2-58 days). Key manifestations include fever (78%), hypotension (41%), tachycardia (28%), hypoxia (22%), and chills (20%). Serious events that may be associated with CRS include cardiac arrhythmias (including atrial fibrillation and ventricular tachycardia), cardiac arrest, cardiac failure, renal insufficiency, capillary leak syndrome, hypotension, hypoxia, and hemophagocytic lymphohistiocytosis/macrophage activation syndrome. Ensure that 2 doses of tocilizumab are available prior to infusion of Yescarta®. Monitor patients at least daily for 7 days at the certified healthcare facility following infusion for signs and symptoms of CRS. Monitor patients for signs or symptoms of CRS for 4 weeks after infusion. Counsel patients to seek immediate medical attention should signs or symptoms of CRS occur at any time. At the first sign of CRS, institute treatment with supportive care, tocilizumab or tocilizumab and corticosteroids as indicated.

Please see additional **IMPORTANT SAFETY INFORMATION** throughout this brochure.

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IMPORTANT SAFETY INFORMATION, CONTINUED

NEUROLOGIC TOXICITIES: Neurologic toxicities occurred in 87% of patients. Ninety-eight percent of all neurologic toxicities occurred within the first 8 weeks, with a median time to onset of 4 days (range: 1-43 days) and a median duration of 17 days. Grade 3 or higher occurred in 31% of patients. The most common neurologic toxicities included encephalopathy (57%), headache (44%), tremor (31%), dizziness (21%), aphasia (18%), delirium (17%), insomnia (9%) and anxiety (9%). Prolonged encephalopathy lasting up to 173 days was noted. Serious events including leukoencephalopathy and seizures occurred with Yescarta®. Fatal and serious cases of cerebral edema have occurred in patients treated with Yescarta®. Monitor patients at least daily for 7 days at the certified healthcare facility following infusion for signs and symptoms of neurologic toxicities. Monitor patients for signs or symptoms of neurologic toxicities for 4 weeks after infusion and treat promptly.

YESCARTA® REMS: Because of the risk of CRS and neurologic toxicities, Yescarta® is available only through a restricted program under a Risk Evaluation and Mitigation Strategy (REMS) called the Yescarta® REMS. The required components of the Yescarta® REMS are: Healthcare facilities that dispense and administer Yescarta® must be enrolled and comply with the REMS requirements. Certified healthcare facilities must have on-site, immediate access to tocilizumab, and ensure that a minimum of 2 doses of tocilizumab are available for each patient for infusion within 2 hours after Yescarta® infusion, if needed for treatment of CRS. Certified healthcare facilities must ensure that healthcare providers who prescribe, dispense or administer Yescarta® are trained about the management of CRS and neurologic toxicities. Further information is available at www.YESCARTAREMS.com or 1-844-454-KITE (5483).

HYPERSENSITIVITY REACTIONS: Allergic reactions may occur. Serious hypersensitivity reactions including anaphylaxis may be due to dimethyl sulfoxide (DMSO) or residual gentamicin in Yescarta®.

SERIOUS INFECTIONS: Severe or life-threatening infections occurred. Infections (all grades) occurred in 38% of patients, and in 23% with ≥ Grade 3. Grade 3 or higher infections with an unspecified pathogen occurred in 16% of patients, bacterial infections in 9%, and viral infections in 4%. Yescarta® should not be administered to patients with clinically significant active systemic infections. Monitor patients for signs and symptoms of infection before and after Yescarta® infusion and treat appropriately. Administer prophylactic anti-microbials according to local guidelines. Febrile neutropenia was observed in 36% of patients and may be concurrent with CRS. In the event of febrile neutropenia, evaluate for infection and manage with broad spectrum antibiotics, fluids and other supportive care as medically indicated. Hepatitis B virus (HBV) reactivation, in some cases resulting in fulminant hepatitis, hepatic failure and death, can occur in patients treated with drugs directed against B cells. Perform screening for HBV, HCV, and HIV in accordance with clinical guidelines before collection of cells for manufacturing.

PROLONGED CYTOPENIAS: Patients may exhibit cytopenias for several weeks following lymphodepleting chemotherapy and Yescarta® infusion. Grade 3 or higher cytopenias not resolved by Day 30 following Yescarta® infusion occurred in 28% of patients and included thrombocytopenia (18%), neutropenia (15%), and anemia (3%). Monitor blood counts after Yescarta® infusion.

HYPOGAMMAGLOBULINEMIA: B-cell aplasia and hypogammaglobulinemia can occur. Hypogammaglobulinemia occurred in 15% of patients. Monitor immunoglobulin levels after treatment and manage using infection precautions, antibiotic prophylaxis and immunoglobulin replacement. The safety of immunization with live viral vaccines during or following Yescarta® treatment has not been studied. Vaccination with live virus vaccines is not recommended for at least 6 weeks prior to the start of lymphodepleting chemotherapy, during Yescarta® treatment, and until immune recovery following treatment.

SECONDARY MALIGNANCIES: Patients may develop secondary malignancies. Monitor life-long for secondary malignancies. In the event that a secondary malignancy occurs, contact Kite at 1-844-454-KITE (5483) to obtain instructions on patient samples to collect for testing.

EFFECTS ON ABILITY TO DRIVE AND USE MACHINES: Due to the potential for neurologic events, including altered mental status or seizures, patients are at risk for altered or decreased consciousness or coordination in the 8 weeks following Yescarta® infusion. Advise patients to refrain from driving and engaging in hazardous occupations or activities, such as operating heavy or potentially dangerous machinery, during this initial period.

ADVERSE REACTIONS: The most common adverse reactions (incidence ≥ 20%) include CRS, fever, hypotension, encephalopathy, tachycardia, fatigue, headache, decreased appetite, chills, diarrhea, febrile neutropenia, infections-pathogen unspecified, nausea, hypoxia, tremor, cough, vomiting, dizziness, constipation, and cardiac arrhythmias.

Please see additional **IMPORTANT SAFETY INFORMATION** throughout this brochure.

HOW TO GET STARTED WITH KITE KONNECT®

Follow these steps to register and submit a Kite Konnect referral for your patient to a Yescarta® Authorized Treatment Center.

1. Register for an account in the Kite Konnect Referral Portal.
2. Download the Patient Consent form and collect your patient's signature.
3. Enter your patient's personal details into your Kite Konnect account.
4. Help your patient identify an Authorized Treatment Center that meets their needs.

In addition, Kite Konnect can assist your patient in contacting an Authorized Treatment Center and scheduling an appointment.

SUBMIT A KITE KONNECT® REFERRAL TODAY

Call **1-844-454-KITE**, visit **kitekonnectrefer.com**, or **scan the QR code** to create your account and begin submitting a Kite Konnect referral.

Please see full Prescribing Information, including **BOXED WARNING** and Medication Guide.

Kite Konnect®