

Use this calendar to keep track of your NINLARO[®] (ixazomib) regimen.

NINLARO is a prescription medicine used to treat multiple myeloma in combination with the medicines REVLIMID[®] (lenalidomide) and dexamethasone, in people who have received at least one prior treatment for their multiple myeloma.
































It is not known if NINLARO is safe and effective in children.

NINLARO is a capsule that you take once a week for 3 weeks of a 4-week cycle. NINLARO is taken along with 2 other medications, lenalidomide and dexamethasone, in 4-week cycles. This dosing calendar is a snapshot of the NINLARO regimen for a 28-day cycle.

- Taking too much NINLARO (overdose) can cause serious side effects, including death. If you take more NINLARO than instructed by your healthcare provider, call your healthcare provider immediately or go to the nearest hospital emergency room right away. Take your medicine pack with you

See the next page for more information on how to take NINLARO.

Start by filling in the dates from Day 1 up to Day 28. Then after you take your medication, check off the corresponding box to remember what you've taken that day.

 NINLARO	 Lenalidomide	 Dexamethasone				
Date: _____ Day 1    <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Date: _____ Day 2  <input type="checkbox"/>	Date: _____ Day 3  <input type="checkbox"/>	Date: _____ Day 4  <input type="checkbox"/>	Date: _____ Day 5  <input type="checkbox"/>	Date: _____ Day 6  <input type="checkbox"/>	Date: _____ Day 7  <input type="checkbox"/>
Date: _____ Day 8    <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Date: _____ Day 9  <input type="checkbox"/>	Date: _____ Day 10  <input type="checkbox"/>	Date: _____ Day 11  <input type="checkbox"/>	Date: _____ Day 12  <input type="checkbox"/>	Date: _____ Day 13  <input type="checkbox"/>	Date: _____ Day 14  <input type="checkbox"/>
Date: _____ Day 15    <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Date: _____ Day 16  <input type="checkbox"/>	Date: _____ Day 17  <input type="checkbox"/>	Date: _____ Day 18  <input type="checkbox"/>	Date: _____ Day 19  <input type="checkbox"/>	Date: _____ Day 20  <input type="checkbox"/>	Date: _____ Day 21  <input type="checkbox"/>
Date: _____ Day 22  <input type="checkbox"/>	Date: _____ Day 23 /	Date: _____ Day 24 /	Date: _____ Day 25 /	Date: _____ Day 26 /	Date: _____ Day 27 /	Date: _____ Day 28 /

Days 23-28: No dosing

Please read the Important Safety Information on the next page and Patient Information in the accompanying full Prescribing Information.

How should I take NINLARO® (ixazomib)?

- **Take NINLARO, REVLIMID® (lenalidomide) and dexamethasone** exactly as your healthcare provider tells you to take it
- **Take each dose of NINLARO** at about the same time of day each week
- **Take each dose of NINLARO** at least 1 hour before or at least 2 hours after food (swallow NINLARO whole with water)
- **Do not take NINLARO** at the same time as dexamethasone

Please read the [Patient Information in the accompanying NINLARO \(ixazomib\) full Prescribing Information](#) for more details on how to take NINLARO.

Important Safety Information for NINLARO

NINLARO may cause serious side effects, including:

- **Low platelet counts (thrombocytopenia)** are common with NINLARO and can sometimes be serious. You may need platelet transfusions if your counts are too low. Tell your healthcare provider if you have any signs of low platelet counts, including bleeding and easy bruising.
- **Stomach and intestinal (gastrointestinal) problems.** Diarrhea, constipation, nausea, and vomiting are common with NINLARO and can sometimes be severe. Call your healthcare provider if you get any of these symptoms and they do not go away during treatment with NINLARO. Your healthcare provider may prescribe medicine to help treat your symptoms.
- **Nerve problems** are common with NINLARO and may also be severe. Tell your healthcare provider if you get any new or worsening symptoms including: tingling, numbness, pain, a burning feeling in your feet or hands, or weakness in your arms or legs.
- **Swelling** is common with NINLARO and can sometimes be severe. Tell your healthcare provider if you develop swelling in your arms, hands, legs, ankles, or feet, or if you gain weight from swelling.
- **Skin Reactions.** Tell your healthcare provider if you get a new or worsening rash.
- **Thrombotic microangiopathy (TMA).** This is a condition involving blood clots and injury to small blood vessels that may cause harm to your kidneys, brain, and other organs, and may lead to death. Get medical help right away if you get any of the following signs or symptoms during treatment with NINLARO: fever, bruising, nose bleeds, tiredness, or decreased urination.
- **Liver problems.** Tell your healthcare provider if you get these signs of a liver problem: yellowing of your skin or the whites of your eyes; pain in your right upper-stomach area.

Other common side effects have occurred. Tell your healthcare provider if you get new or worsening back pain, skin rash and pain (shingles) as a result of reactivation of the chicken pox virus (herpes zoster), lowered white blood cells (neutropenia) that may increase the risk of infection, or vision conditions including blurred vision, dry eye, and pink eye (conjunctivitis).

These are not all the possible side effects of NINLARO. Talk to your healthcare provider for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

Before taking NINLARO, tell your healthcare provider about all your medical conditions, including if you:

- Have liver problems.
- Have kidney problems or are on dialysis.
- Are pregnant or plan to become pregnant. NINLARO can harm your unborn baby.

Females who are able to become pregnant:

- Avoid becoming pregnant during treatment with NINLARO. Your healthcare provider will do a pregnancy test before you start treatment with NINLARO. You should use effective non-hormonal birth control during treatment and for 90 days after your final dose of NINLARO. If using hormonal contraceptives (for example, birth control pills), you should also use an additional barrier method of contraception (for example, diaphragm or condom). Talk to your healthcare provider about birth control methods that may be right for you during this time. Tell your healthcare provider right away if you become pregnant or think you may be pregnant during treatment with NINLARO.

Males with female partners who are able to become pregnant:

- You should use effective birth control during treatment and for 90 days after your final dose of NINLARO. Tell your healthcare provider right away if your partner becomes pregnant or thinks she may be pregnant while you are being treated with NINLARO.
- Are breastfeeding or plan to breastfeed. It is not known if NINLARO passes into breast milk, if it affects an infant who is breastfed, or breast milk production. Do not breastfeed during treatment with NINLARO and for 90 days after your final dose of NINLARO.

Taking too much NINLARO (overdose) can cause serious side effects, including death. If you take more NINLARO than instructed by your healthcare provider, call your healthcare provider right away or go to the nearest hospital emergency room right away. Take your medicine pack with you.

Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements or before starting any new medicines.

Please read the [Patient Information in the accompanying NINLARO \(ixazomib\) full Prescribing Information](#).



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