Choose the GLP-1 RA with the broadest range of indications for your patients with T2D[1]

Ozempic® Dosing Guide

#1 prescribed GLP-1 RA worldwide in patients with T2D[2,a]

[a]**Source:** Based on internal analysis by Novo Nordisk using data from the following source: IQVIA MIDAS® monthly volume sales data for 40 countries. Data period: Rolling 3-month time period is M07 2024 to M10 2024. Market definition: A10S in each case reflecting estimates of real-world activity. Copyright IQVIA. All rights reserved.[2]

GLP-1 RA=glucagon-like peptide-1 receptor agonist; T2D=type 2 diabetes.

Indications and Usage

Ozempic® (semaglutide) injection 0.5 mg, 1 mg, or 2 mg is indicated:

- as an adjunct to diet and exercise to improve glycemic control in adults with type 2 diabetes
- to reduce the risk of major adverse cardiovascular (CV) events (CV death, nonfatal myocardial infarction, or nonfatal stroke) in adults with type 2 diabetes and established CV disease
- to reduce the risk of sustained eGFR decline, end-stage kidney disease, and cardiovascular death in adults with type 2 diabetes and chronic kidney disease

Important Safety Information

WARNING: RISK OF THYROID C-CELL TUMORS

- **In rodents, semaglutide causes dose-dependent and treatment-duration-dependent thyroid C-cell tumors at clinically relevant exposures. It is unknown whether Ozempic® causes thyroid C-cell tumors, including medullary thyroid carcinoma (MTC), in humans as human relevance of semaglutide-induced rodent thyroid C-cell tumors has not been determined**
- **Ozempic® is contraindicated in patients with a personal or family history of MTC and in patients with Multiple Endocrine Neoplasia syndrome type 2 (MEN 2). Counsel patients regarding the potential risk for MTC with the use of Ozempic® and inform them of symptoms of thyroid tumors (eg, a mass in the neck, dysphagia, dyspnea, persistent hoarseness). Routine monitoring of serum calcitonin or using thyroid ultrasound is of uncertain value for early detection of MTC in patients treated with Ozempic®**

Please see additional Important Safety Information throughout. Please click here for Prescribing Information, including Boxed Warning.

ONCE-WEEKLY
OZEMPIC®
semaglutide injection 0.5mg, 1mg, 2mg

Ozempic® 2 mg—Max dose delivered max A1C benefit[1,3]

for patients who need additional glycemic control[3]

Gradual dose escalation designed to help patients adjust to therapy[1]

- Administer Ozempic® once weekly on the same day each week, at any time of day, with or without meals
- The maximum recommended dosage is 2 mg once weekly
- The day of weekly administration can be changed if necessary as long as the time between 2 doses is at least 2 days (>48 hours)
- If a dose is missed, administer Ozempic® as soon as possible within 5 days after the missed dose. If more than 5 days have passed, skip the missed dose and administer the next dose on the regularly scheduled day. In each case, patients can then resume their regular once-weekly dosing schedule

[a]The starting dose of 0.25 mg is a nontherapeutic dose.

Important Safety Information

Contraindications

- Ozempic® is contraindicated in patients with a personal or family history of MTC or in patients with MEN 2, and in patients with a hypersensitivity reaction to semaglutide or to any of the excipients in Ozempic®. Serious hypersensitivity reactions including anaphylaxis and angioedema have been reported with Ozempic®

Warnings and Precautions

- **Risk of Thyroid C-Cell Tumors:** Patients should be further evaluated if serum calcitonin is measured and found to be elevated or thyroid nodules are noted on physical examination or neck imaging
- **Acute Pancreatitis:** Acute pancreatitis, including fatal and non-fatal hemorrhagic or necrotizing pancreatitis, has been observed in patients treated with GLP-1 receptor agonists, including semaglutide. Observe patients carefully for signs and symptoms of pancreatitis (persistent severe abdominal pain, sometimes radiating to the back with or without vomiting). If pancreatitis is suspected, discontinue Ozempic® and initiate appropriate management
- **Diabetic Retinopathy Complications:** In a 2-year trial involving patients with type 2 diabetes and high cardiovascular risk, more events of diabetic retinopathy complications occurred in patients treated with Ozempic® (3.0%) compared with placebo (1.8%). The absolute risk increase for diabetic retinopathy complications was larger among patients with a history of diabetic retinopathy at baseline than among patients without a known history of diabetic retinopathy.

  Rapid improvement in glucose control has been associated with a temporary worsening of diabetic retinopathy. The effect of long-term glycemic control with semaglutide on diabetic retinopathy complications has not been studied. Patients with a history of diabetic retinopathy should be monitored for progression of diabetic retinopathy

ONCE-WEEKLY OZEMPIC® semaglutide injection 0.5 mg, 1 mg, 2 mg

Ozempic® was evaluated across clinical trials in a range of patients with type 2 diabetes[1,b]

NO DOSE ADJUSTMENTS

recommended in special populations with renal impairment, hepatic impairment, and those aged ≥65 years[1]

Actor portrayal.

Patients with renal impairment[1]

- The efficacy of Ozempic® was not impacted by level of renal function impairment
- In patients with renal impairment, including kidney failure, no clinically relevant change in pharmacokinetics was observed
- Monitor renal function when initiating or escalating doses of Ozempic® in patients reporting severe adverse GI reactions

Please see Important Safety Information regarding Acute Kidney Injury below.

Patients aged ≥65 years[1]

- No overall differences in safety or efficacy were detected between these patients and younger patients, but greater sensitivity of some older individuals cannot be ruled out

[b]In addition to the CVOT (SUSTAIN 6), and glycemic control trials (SUSTAIN 1 through 5), and SUSTAIN FORTE, 2 Japanese trials are incorporated into the pool of safety data within the FDA-approved label. These trials evaluated the use of Ozempic® as monotherapy and add-on therapy to oral medications or insulin. CV safety was assessed in SUSTAIN 6. Occurrence of adverse reactions was evaluated in SUSTAIN 1-5 and 2 Japanese trials.

T2D=type 2 diabetes; CKD=chronic kidney disease; GI=gastrointestinal; CVOT=cardiovascular outcomes trial; CV=cardiovascular.

Important Safety Information

Warnings and Precautions (cont.)

- **Never Share an Ozempic® Pen Between Patients:** Ozempic® pens must never be shared between patients, even if the needle is changed. Pen-sharing poses a risk for transmission of blood-borne pathogens
- **Hypoglycemia:** Patients receiving Ozempic® in combination with an insulin secretagogue (e.g., sulfonylurea) or insulin may have an increased risk of hypoglycemia, including severe hypoglycemia. Inform patients using these concomitant medications of the risk of hypoglycemia and educate them on the signs and symptoms of hypoglycemia
- **Acute Kidney Injury Due to Volume Depletion:** There have been postmarketing reports of acute kidney injury, in some cases requiring hemodialysis, in patients treated with semaglutide. The majority of reported events occurred in patients who experienced gastrointestinal reactions leading to dehydration such as nausea, vomiting, or diarrhea. Monitor renal function in patients reporting adverse reactions to Ozempic® that could lead to volume depletion, especially during dosage initiation and escalation

Please see additional Important Safety Information throughout.
Please click here for Prescribing Information, including Boxed Warning.

ONCE-WEEKLY OZEMPIC® semaglutide injection 0.5 mg, 1 mg, 2 mg

Prescribe Ozempic® in your EHR system

List price is the same regardless of package.

	Ozempic® Pen that delivers 0.25 mg or 0.5 mg per injection		
Trade Pack			
NDC	0169-4181-13		
Day's Supply	**Sample or Initial** *(42 Days)*	**1 Month** *(28 Days)*	**3 Months** *(84 Days)*
Intent of Prescription	Sample or initial prescription for new starts	1-month prescription for maintenance on 0.5 mg. For patients with T2D and CKD, increase to the recommended maintenance dose of 1 mg after at least 4 weeks on .5 mg	3-month prescription for maintenance on 0.5 mg. For patients with T2D and CKD, increase to the recommended maintenance dose of 1 mg after at least 4 weeks on .5 mg
Strength	2 mg per 3 mL *(0.68 mg/mL)*		2 mg per 3 mL *(0.68 mg/mL)*
Dosage Form	Solution		Solution
SIG	**Sample or initial prescription:** Inject 0.25 mg SUBQ once weekly for 4 weeks, then 0.5 mg SUBQ once weekly for 2 weeks	**Maintenance prescription:** Inject 0.5 mg SUBQ once weekly for 4 weeks	**Maintenance prescription:** Inject 0.5 mg SUBQ once weekly for 12 weeks
Dispense Quantity	3 mL		9 mL
Needles	6 included		18 included
No. of Boxes	1 box		3 boxes

Important Safety Information

Warnings and Precautions (cont.)

- **Severe Gastrointestinal Adverse Reactions:** Use of Ozempic® has been associated with gastrointestinal adverse reactions, sometimes severe. In Ozempic® clinical trials, severe gastrointestinal adverse reactions were reported more frequently among patients receiving Ozempic® (0.5 mg 0.4%, 1 mg 0.8%) than placebo (0%). Ozempic® is not recommended in patients with severe gastroparesis
- **Hypersensitivity:** Serious hypersensitivity reactions (e.g., anaphylaxis, angioedema) have been reported in patients treated with Ozempic®. If hypersensitivity reactions occur, discontinue use of Ozempic®; treat promptly per standard of care, and monitor until signs and symptoms resolve. Use caution in a patient with a history of angioedema or anaphylaxis with another GLP-1 receptor agonist

List price is the same regardless of package.

	Ozempic® Pen that delivers 1 mg per injection		Ozempic® Pen that delivers 2 mg per injection	
Trade Pack				
NDC	0169-4130-13		0169-4772-12	
Day's Supply	**1 Month** *(28 Days)*	**3 Months** *(84 Days)*	**1 Month** *(28 Days)*	**3 Months** *(84 Days)*
Intent of Prescription	1-month prescription for maintenance on 1 mg	3-month prescription for maintenance on 1 mg. For patients with T2D and CKD, increase to the recommended maintenance dose of 1 mg	1-month prescription for maintenance on 2 mg	3-month prescription for maintenance on 2 mg
Strength	4 mg per 3 mL *(1.34 mg/mL)*	4 mg per 3 mL *(1.34 mg/mL)*	8 mg per 3 mL *(2.68 mg/mL)*	8 mg per 3 mL *(2.68 mg/mL)*
Dosage Form	Solution	Solution	Solution	Solution
SIG	**Maintenance prescription:** Inject 1 mg SUBQ once weekly for 4 weeks	**Maintenance prescription:** Inject 1 mg SUBQ once weekly for 12 weeks	**Maintenance prescription:** Inject 2 mg SUBQ once weekly for 4 weeks	**Maintenance prescription:** Inject 2 mg SUBQ once weekly for 12 weeks
Dispense Quantity	3 mL	9 mL	3 mL	9 mL
Needles	4 included	12 included	4 included	12 included
No. of Boxes	1 box	3 boxes	1 box	3 boxes

EHR=electronic health record; NDC=National Drug Code; T2D=type 2 diabetes; CKD=chronic kidney disease; SUBQ=subcutaneous.

Important Safety Information

Warnings and Precautions (cont.)

- **Acute Gallbladder Disease:** Acute events of gallbladder disease such as cholelithiasis or cholecystitis have been reported in GLP-1 receptor agonist trials and postmarketing. In placebo-controlled trials, cholelithiasis was reported in 1.5% and 0.4% of patients treated with Ozempic® 0.5 mg and 1 mg, respectively, and not reported in placebo-treated patients. If cholelithiasis is suspected, gallbladder studies and appropriate clinical follow-up are indicated
- **Pulmonary Aspiration During General Anesthesia or Deep Sedation:** Ozempic® delays gastric emptying. There have been rare postmarketing reports of pulmonary aspiration in patients receiving GLP-1 receptor agonists undergoing elective surgeries or procedures requiring general anesthesia or deep sedation who had residual gastric contents despite reported adherence to preoperative fasting recommendations. Instruct patients to inform healthcare providers prior to any planned surgeries or procedures if they are taking Ozempic®

Start your patients with a FREE starter kit

Free 6-week starter kit, including 1 sample of 1 pen that delivers doses of 0.25 mg and 0.5 mg.

More Ozempic®. Same co-pay.

Pay as little as $25[a] for up to a 3 month prescription

To receive offer, prescription must be for a 1-month, 2-month, or 3-month supply.

This offer is valid for all doses of Ozempic®.

[a]Eligible commercially insured patients with coverage may pay as little as $25 for either a 1-month, 2-month, or 3-month supply with the Ozempic® savings offer. Month is defined as 28 days. Maximum savings is $100 for a 1-month, $200 for a 2-month, or $300 for a 3-month supply. Offer is good for up to 48 months. Eligibility and restrictions apply. For details, see NovoCare.com.

Important Safety Information

Adverse Reactions

- The most common adverse reactions, reported in ≥5% of patients treated with Ozempic® are nausea, vomiting, diarrhea, abdominal pain, and constipation

Drug Interactions

- When initiating Ozempic®, consider reducing the dose of concomitantly administered insulin secretagogue (such as sulfonylureas) or insulin to reduce the risk of hypoglycemia
- Ozempic® causes a delay of gastric emptying and has the potential to impact the absorption of concomitantly administered oral medications, so caution should be exercised

Use in Specific Populations

- There are limited data with semaglutide use in pregnant women to inform a drug-associated risk for adverse developmental outcomes. Discontinue Ozempic® in women at least 2 months before a planned pregnancy due to the long washout period for semaglutide

Please click here for Prescribing Information, including Boxed Warning.

References: 1. Ozempic. Prescribing information. Novo Nordisk Inc. **2.** Data on file. Novo Nordisk Inc; Plainsboro, NJ. **3.** Frías JP, Auerbach P, Bajaj HS, et al. Efficacy and safety of once-weekly semaglutide 2.0 mg versus 1.0 mg in patients with type 2 diabetes (SUSTAIN FORTE): a double-blind, randomised, phase 3B trial. *Lancet Diabetes Endocrinol*. 2021;9(9):563-574. doi:10.1016/S2213-8587(21)00174-1

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