For your appropriate patients with type 2 diabetes

RYBELSUS® semaglutide tablets 7mg | 14mg

A FIRST-LINE OPTION to improve glycemic control in your adult patients with T2D as an adjunct to diet and exercise

START your patients on 3 mg for 30 days, then MOVE UP to the 7 mg dose[1]

STARTER DOSE ONLY

3 mg

Help patients adjust to therapy:

Start RYBELSUS® with 3 mg once daily for 30 days

3 mg dose is intended for treatment initiation, and **is not effective for glycemic control**

MAINTENANCE DOSES FOR EFFECTIVE GLYCEMIC CONTROL

7 mg

After 30 days on the 3 mg dose, increase the dose to 7 mg once daily

14 mg

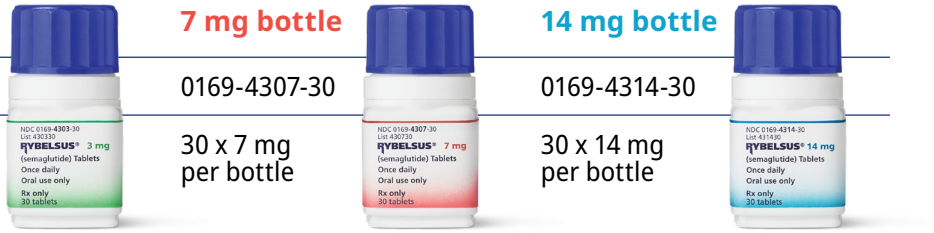
If additional glycemic control is needed after at least 30 days on the 7 mg dose, the prescriber may increase the dose to 14 mg once daily

If a patient misses a dose, the missed dose should be skipped, and the next dose should be taken the following day.

KEEPING THE BLUE CAP TIGHT helps the pills work right

Note to Pharmacist: Please dispense in the original bottle.

	3 mg bottle	7 mg bottle	14 mg bottle
Bottle NDC	0169-4303-30	0169-4307-30	0169-4314-30
Quantity	30 x 3 mg per bottle	30 x 7 mg per bottle	30 x 14 mg per bottle



T2D=type 2 diabetes

Indication and Usage

RYBELSUS® (semaglutide) tablets 7 mg or 14 mg is indicated as an adjunct to diet and exercise to improve glycemic control in adults with type 2 diabetes

Limitations of Use

- RYBELSUS® is not indicated for use in patients with type 1 diabetes

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 RYBELSUS® 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**
- **RYBELSUS® 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 RYBELSUS® and inform them of symptoms of thyroid tumors (e.g. 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 RYBELSUS®**

Contraindications

- RYBELSUS® is contraindicated in patients with a personal or family history of medullary thyroid carcinoma (MTC) or in patients with Multiple Endocrine Neoplasia syndrome type 2 (MEN 2), and in patients with a prior serious hypersensitivity reaction to semaglutide or to any of the excipients in RYBELSUS®. Serious hypersensitivity reactions including anaphylaxis and angioedema have been reported with RYBELSUS®

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 RYBELSUS®. Observe patients carefully for signs and symptoms of pancreatitis (including persistent severe abdominal pain, sometimes radiating to the back and which may or may not be accompanied by vomiting). If pancreatitis is suspected, discontinue RYBELSUS® and initiate appropriate management

novo nordisk®

Please see additional Important Safety Information on next page. Please click on paper clip icon for Prescribing Information, including Boxed Warning.

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Instructions for Patients

For once-daily RYBELSUS® to work as planned, patients should take as directed.

Storage instructions for RYBELSUS®[1]:

Store tablets in the closed RYBELSUS® bottle until ready to take one

Do not use a pill organizer or other container to store RYBELSUS® tablets

Swallow tablet whole. Do not cut, crush, or chew them

Important Note: The RYBELSUS® blue cap is equipped with a drying agent to help protect the tablets from moisture, which helps preserve RYBELSUS®. Tablets should be kept in the RYBELSUS® bottle with the blue cap on whenever the patient is not taking one.

Store at room temperature between 68°F-77°F (20°C-25°C). Store in a dry place away from moisture.

Saving on RYBELSUS®

Eligible patients may pay as little as $10 for a 30-, 60-, or 90-day supply.

Maximum savings of up to $300 per 30-day supply, $600 per 60-day supply, and $900 per 90-day supply. RYBELSUS® 3 mg strength is limited to a 30-day supply only. To qualify, commercial insurance coverage is required. Eligibility and other restrictions apply. Visit **Rybelsus.com** for full program details and eligibility requirements.

The RYBELSUS® Savings Offer is digital only. Patients can get the offer by texting **READY**[a] to **21848** or download the savings offer at **SaveOnR.com**.

Patient Support

Text messaging

Text[a] **READY** to **21848** to get started.

One-on-One, Live Support

Call **1-833-ASK-A-CDE** Monday through Friday, 9:00 AM – 6:00 PM ET.

[a]Message and data rates may apply. Check with your mobile service provider. See Terms & Conditions of Use at Rybelsus.com.

Direct patients to read instructions with packaging or visit Rybelsus.com for more detailed information.

Pharmacy Connect Information

If you have any issue processing the offer, please call **1-800-433-4893** to speak directly with the Change Healthcare Pharmacy Health Desk.

Hours of operation: Monday – Friday, 8:00 AM – 8:00 PM ET (except holidays).

IMPORTANT SAFETY INFORMATION

Warnings and Precautions (cont'd)

- **Diabetic Retinopathy Complications:** In a pooled analysis of glycemic control trials with RYBELSUS®, patients reported diabetic retinopathy related adverse reactions during the trial (4.2% with RYBELSUS® and 3.8% with comparator). In a 2-year trial with semaglutide injection involving patients with type 2 diabetes and high cardiovascular risk, more events of diabetic retinopathy complications occurred in patients treated with semaglutide injection (3.0%) compared to 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. Patients with a history of diabetic retinopathy should be monitored for progression of diabetic retinopathy
- **Hypoglycemia:** Patients receiving RYBELSUS® 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:** There have been postmarketing reports of acute kidney injury and worsening of chronic renal failure, which may sometimes require hemodialysis, in patients treated with GLP-1 receptor agonists, including semaglutide. Some of these events have been reported in patients without known underlying renal disease. A majority of the reported events occurred in patients who had experienced nausea, vomiting, diarrhea, or dehydration. Monitor renal function when initiating or escalating doses of RYBELSUS® in patients reporting severe adverse gastrointestinal reactions
- **Severe Gastrointestinal Adverse Reactions:** Use of RYBELSUS® has been associated with gastrointestinal adverse reactions, sometimes severe. In clinical trials, severe gastrointestinal adverse reactions were reported more frequently among patients receiving RYBELSUS® (7 mg 0.6%, 14 mg 2%) than placebo (0.3%). RYBELSUS® is not recommended in patients with severe gastroparesis
- **Hypersensitivity:** Serious hypersensitivity reactions (e.g., anaphylaxis, angioedema) have been reported in patients treated with RYBELSUS®. If hypersensitivity reactions occur, discontinue use of RYBELSUS®, 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
- **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% of patients treated with RYBELSUS® 7 mg. Cholelithiasis was not reported in RYBELSUS® 14 mg or placebo-treated patients. If cholelithiasis is suspected, gallbladder studies and appropriate clinical follow-up are indicated
- **Pulmonary Aspiration During General Anesthesia or Deep Sedation:** RYBELSUS® 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 RYBELSUS®

Adverse Reactions

- Most common adverse reactions (incidence ≥5%) are nausea, abdominal pain, diarrhea, decreased appetite, vomiting and constipation

Drug Interactions

- RYBELSUS® stimulates insulin release in the presence of elevated blood glucose concentrations. When initiating RYBELSUS®, consider reducing the dose of concomitantly administered insulin secretagogue (such as sulfonylureas) or insulin to reduce the risk of hypoglycemia
- RYBELSUS® delays gastric emptying and has the potential to impact the absorption of other oral medications. Closely follow RYBELSUS® administration instructions when coadministering with other oral medications and consider increased monitoring for medications with a narrow therapeutic index, such as levothyroxine

Use in Specific Populations

- **Pregnancy:** Available data with RYBELSUS® are not sufficient to determine a drug associated risk for major birth defects, miscarriage, or other adverse maternal or fetal outcomes. Discontinue RYBELSUS® in women at least 2 months before a planned pregnancy due to the long washout period for semaglutide
- **Lactation:** A clinical lactation study reported semaglutide concentrations below the lower limit of quantification in human breast milk. However, salcaprozate sodium (SNAC) and/or its metabolites are present in human milk. Because of the unknown potential for serious adverse reactions in the breastfed infant due to the possible accumulation of SNAC, an absorption enhancer for RYBELSUS®, and because there are alternative formulations of semaglutide that do not contain SNAC that can be used during lactation, advise patients that breastfeeding is not recommended during treatment with RYBELSUS®
- **Pediatric Use:** Safety and effectiveness of RYBELSUS® have not been established in pediatric patients

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To learn more about RYBELSUS®, visit RybelsusPro.com or call 1-833-457-7455

Reference: 1. RYBELSUS® package insert. Plainsboro, NJ: Novo Nordisk Inc.

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