To become a certified prescriber in the LEMTRADA REMS Program, you will need to answer ALL 8 questions correctly.

Complete the Knowledge Assessment, populate and sign the one-time LEMTRADA REMS Prescriber Enrollment Form. Fax your responses to the 8 Knowledge Assessment questions and the LEMTRADA REMS Prescriber Enrollment Form to 1-855-557-2478. You can also complete the Knowledge Assessment online at www.LemtradaREMS.com

You will receive correspondence from the LEMTRADA REMS Program via the preferred communication method (email or fax) selected on your enrollment form within two business days. Correspondence may include:

- How to retake the Knowledge Assessment, if necessary
- A confirmation of your enrollment and certification in the LEMTRADA REMS Program (which requires no further action)
QUESTION 1 (check one)
Which of the following laboratory tests are required prior to initiating LEMTRADA treatment and within 30 days of the first infusion?
- A. Complete blood count (CBC) with differential
- B. Serum creatinine and urinalysis with urine cell counts
- C. Thyroid function test
- D. All of the above

QUESTION 2 (check one)
My patient must have monthly blood and urine tests for:
- A. 12 months after their last infusion
- B. 24 months after their last infusion
- C. 36 months after their last infusion
- D. 48 months after their last infusion

QUESTION 3
I should assess my patient’s compliance with required lab testing on an ongoing basis and document their compliance on the LEMTRADA REMS Patient Status Form every 6 months.
- True
- False

QUESTION 4 (check one)
Which of the following symptoms could be associated with immune thrombocytopenia (ITP)?
- A. Headache, rash, pyrexia, nausea
- B. Easy bruising, petechiae, purpura, spontaneous mucocutaneous bleeding
- C. Weight gain, fatigue, constipation
- D. Pyrexia, chills, swollen glands

QUESTION 5 (check one)
Which of the following could be associated with glomerular nephropathy?
- A. Elevation in serum creatinine, hematuria, or proteinuria
- B. Easy bruising, petechiae, purpura, spontaneous mucocutaneous bleeding (e.g., epistaxis, hemoptysis), and heavier than normal or irregular menstrual bleeding
- C. Weight gain, fatigue, constipation
- D. Weight loss, tachycardia, nervousness

QUESTION 6 (check one)
Prior to enrolling a patient in the LEMTRADA REMS Program, you should:
- A. Provide What You Need to Know About LEMTRADA Treatment: A Patient Guide to the patient
- B. Counsel the patient on the serious risks associated with LEMTRADA and how to mitigate these risks through periodic monitoring
- C. Provide a LEMTRADA Patient Safety Information Card to the patient
- D. All of the above

QUESTION 7
The healthcare facility that will administer LEMTRADA infusions to my patient is not required to be REMS certified and enrolled.
- True
- False

QUESTION 8
LEMTARDA treatment should be administered in a setting that has the necessary equipment and personnel to manage serious infusion reactions (including anaphylaxis and cardiac and respiratory emergencies).
- True
- False

Please provide your prescriber name and NPI number so we can associate your progress with your stakeholder record. You can provide this information below.

Prescriber Name: _______________________
Prescriber NPI: _______________________

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RE: Prescriber LEMTRADA® (alemtuzumab) REMS Program Responsibilities Reminder

Dear Dr. [Provider Last Name],

This letter is to remind you of your responsibilities as a prescriber enrolled in the LEMTRADA REMS Program. Please remember that you must:

1. **Keep Track of Needed Lab Monitoring**: Prescribers are required to keep track of the laboratory monitoring status of all patients who have been infused with LEMTRADA (alemtuzumab) from first infusion until 48 months after the last infusion.

2. **Complete LEMTRADA REMS Status Forms**: For every patient who is infused with LEMTRADA, prescribers are required to complete a LEMTRADA REMS Patient Status Form 6 months after the first infusion, and then every subsequent 6 months until 48 months after the patient’s last infusion.

If you have any questions about requirements, please call the LEMTRADA REMS Program at 1-855-676-6326, Monday through Friday, 8:30 am to 8:00 pm Eastern Time.

Sincerely,

LEMTRADA REMS Program