Cutaquig®
Infusion Journal

A treatment for adults with primary immunodeficiency that comes with **complete care.**

INDICATIONS AND USAGE

Cutaquig® (Immune Globulin Subcutaneous (Human) - hipp) is a 16.5% immune globulin solution for subcutaneous infusion indicated for treatment of primary humoral immunodeficiency (PI) in adults.

WARNING: THROMBOSIS

See full prescribing information for complete boxed warning

Thrombosis may occur with immune globulin products, including cutaquig. Risk factors may include: advanced age, prolonged immobilization, hypercoagulable conditions, history of venous or arterial thrombosis, use of estrogens, indwelling vascular catheters, hyperviscosity, and cardiovascular risk factors.

For patients at risk of thrombosis, administer cutaquig at the minimum dose and infusion rate practicable. Ensure adequate hydration in patients before administration. Monitor for signs and symptoms of thrombosis and assess blood viscosity in patients at risk of hyperviscosity.

cutaquig®
Immune Globulin Subcutaneous (Human)-hipp, 16.5% solution

Please see full Important Safety Information on page 2 and accompanying full Prescribing Information for cutaquig, including BOXED WARNING and patient product information, in pocket.

IMPORTANT SAFETY INFORMATION

Contraindications

Cutaquig is contraindicated in patients who have had an anaphylactic or severe systemic reaction to the subcutaneous administration of human immune globulin or to any of the components of cutaquig such as Polysorbate 80, and in IgA-deficient patients with antibodies against IgA and a history of hypersensitivity.

Warnings and Precautions

Severe hypersensitivity reactions may occur with cutaquig, even in patients who tolerated previous treatment with human immune globulin. If a hypersensitivity reaction occurs, discontinue the cutaquig infusion immediately and initiate appropriate treatment. IgA-deficient patients with anti-IgA antibodies are at greater risk of severe reactions.

Thrombosis may occur following treatment with immune globulin products, including cutaquig. For patients at risk of thrombosis, administer cutaquig at the minimum dose and infusion rate practicable. Ensure adequate hydration in patients before administration. Monitor for signs and symptoms of thrombosis and assess blood viscosity in patients at risk for hyperviscosity.

Falsely elevated blood glucose readings may occur during and after the infusion of cutaquig with some glucometer and test strip systems. When administering cutaquig, measure blood glucose with a glucose-specific method.

Aseptic meningitis syndrome (AMS) can occur with cutaquig. AMS has been reported after the use of human immune globulin administered intravenously and subcutaneously and may occur within 2 days following treatment. Discontinuation of immunoglobulin treatment has resulted in remission within several days without sequelae.

Acute renal dysfunction/failure, acute tubular necrosis, proximal tubular nephropathy, osmotic nephrosis and death may occur with use of human immune globulin, especially those containing sucrose. cutaquig does not contain sucrose. Monitor patients for signs and symptoms of renal dysfunction. Monitor blood urea nitrogen, serum creatinine, and urine output in patients at risk of acute renal failure.

Monitor cutaquig recipients for clinical signs and symptoms of hemolysis, particularly patients with pre-existing anemia and/or cardiovascular or pulmonary compromise. Consider appropriate confirmatory laboratory testing if signs and symptoms of hemolysis are present after cutaquig infusion.

Non-cardiogenic pulmonary edema may occur in patients administered human immune globulin products. Monitor for pulmonary adverse reactions. If transfusion-related acute lung injury is suspected, perform appropriate tests for the presence of anti-neutrophil antibodies in both the product and patient's serum.

Cutaquig is made from human plasma and may carry a risk of transmitting infectious agents, e.g. viruses, the variant Creutzfeldt-Jakob disease (vCJD) agent, and, theoretically, the Creutzfeldt-Jakob disease (CJD) agent.

Drug Interactions

After infusion of cutaquig, the transitory rise of the various passively transferred antibodies in the patient's blood may yield false positive serological test results, with the potential for misleading interpretation.

Adverse Reactions

The most common adverse reactions (≥ 5% of study subjects) were local infusion site reactions (such as redness, swelling, itching), headache, fever, diarrhea, dermatitis, asthma, and skin abrasion.

This cutaquig Infusion Journal belongs to:

Name: _____ **Phone:** _____

Secondary Contact: _____ **Secondary Contact Phone:** _____

Health Care Provider Information:

Healthcare Provider: _____ **Healthcare Provider Phone:** _____

Hospital/Clinic: _____ **Specialty Pharmacy Phone:** _____

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Welcome to cutaquig

Cutaquig is used to treat adults with primary immunodeficiency (PI). Now that you've been trained by your healthcare provider, you have the option to self-administer cutaquig at home, work, or on the go.

Keep track of your cutaquig treatment

It's important that you make a record of each time you self-administer cutaquig. Use this journal to keep track of your infusions. Please remember to bring this journal to any appointments with your healthcare provider, so you can update them about your treatment.

Your cutaquig Infusion Journal can help you record key information including:

- Dates and times of infusions
- Dose
- Lot number information
- Side effects you may have experienced
- Questions and notes for your healthcare provider
- Any recent infections

How to use your cutaquig Infusion Journal

On the next page, you'll see a sample log entry. It's important to fill out every section for each infusion. This will help your healthcare provider monitor your treatment to make sure it is most effective.

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Cutaquig Infusion Journal sample entry

Infusion Date: May 15, 2019

Dose: 10 g

Needle size: 9 mm

Flow Rate Tubing Size: 24"

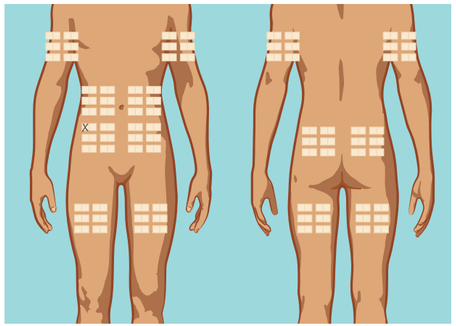
Infusion Start Time: 4:00 pm

Infusion Finish Time: 5:30 pm

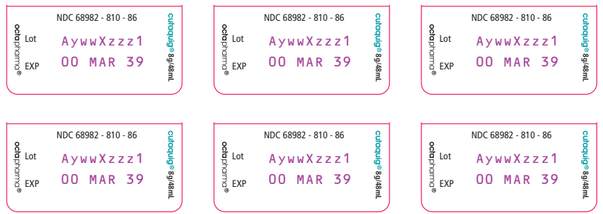
# of Needles: 3

Infusion Total Volume: 60 mL

Infusion Sites:



Lot Number (affix vial label here):



Since my last infusion, I:

Was sick for _____ day(s) Was sick with: _____

Started a new medication: No

Saw my doctor: No

Had infusion side effects: No

Had other side effects: No other side effects

During this infusion, I:

Took these medications: Ibuprofen

Had these side effects: None

After this infusion, I:

Had infusion-site reactions: No

Need to call my doctor about: Dosage questions

Need to order the following supplies: Sharps container

Need to call: Specialty pharmacy for prescription refill

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Cutaquig Infusion Journal entry

Infusion Date: _____

Dose: _____

Needle size: _____

Flow Rate
Tubing Size: _____

Infusion Start Time: _____

Infusion Finish Time: _____

# of Needles: _____

Infusion
Total Volume: _____

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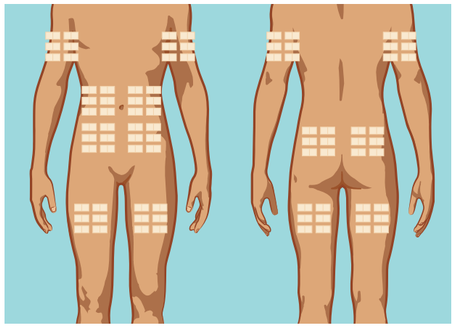

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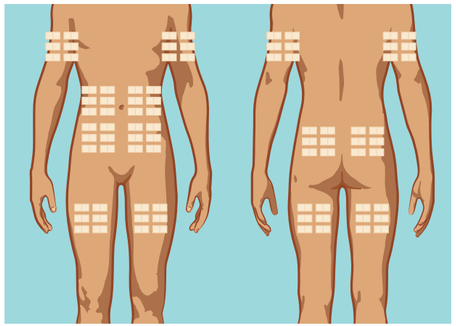

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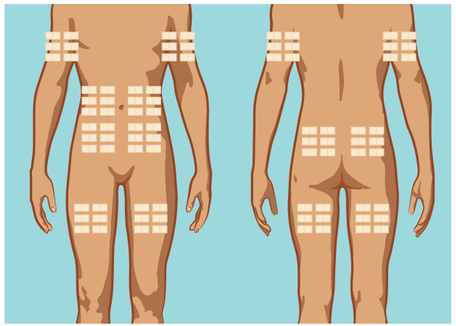

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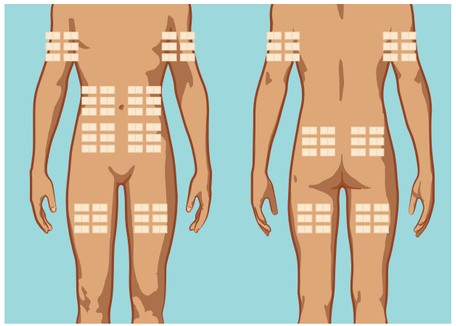

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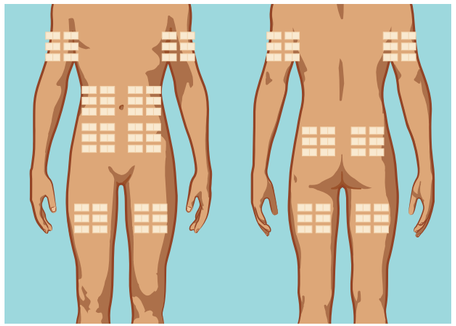

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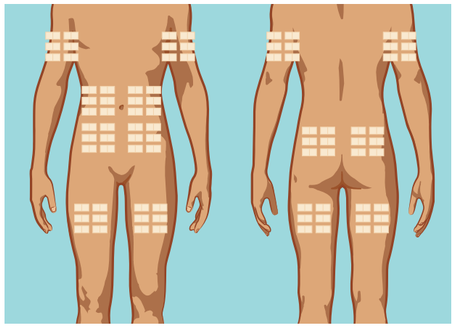

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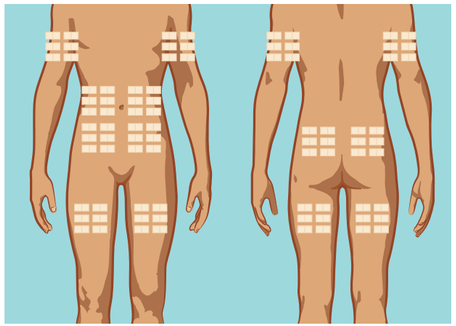

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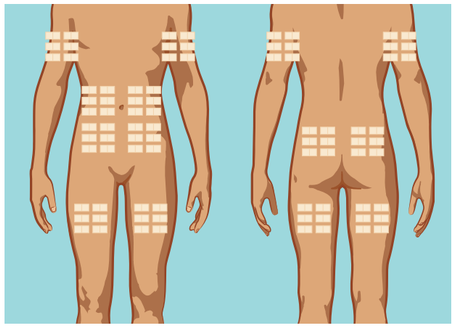

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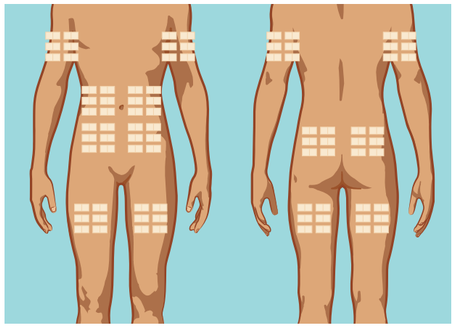

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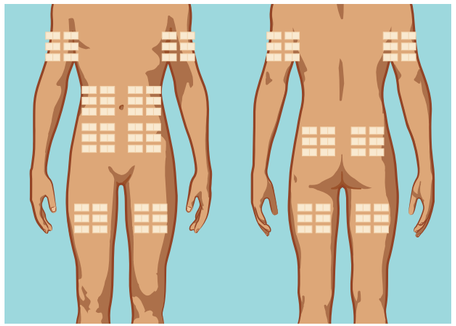

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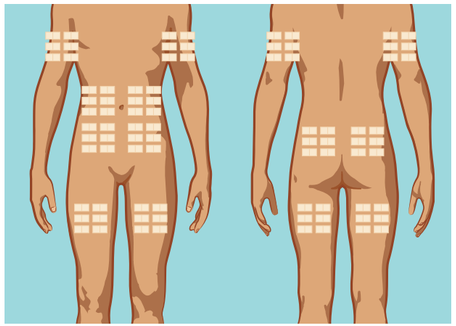

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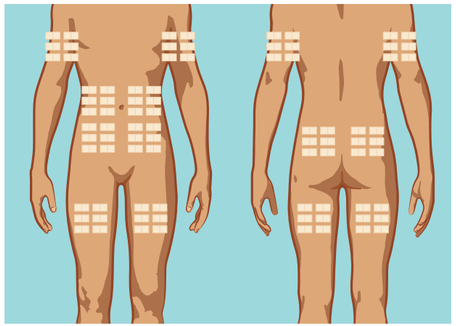

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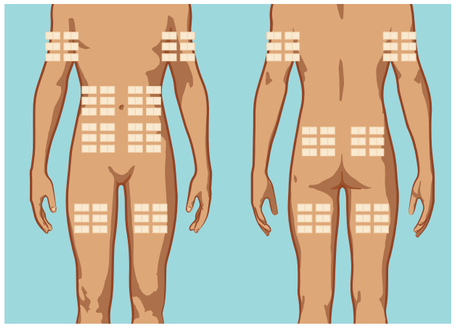

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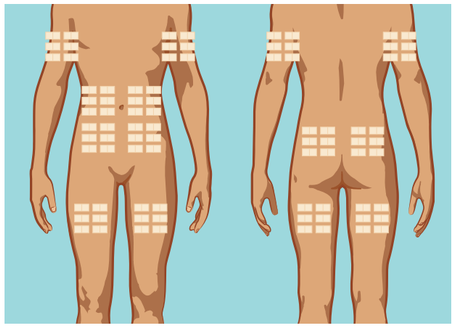

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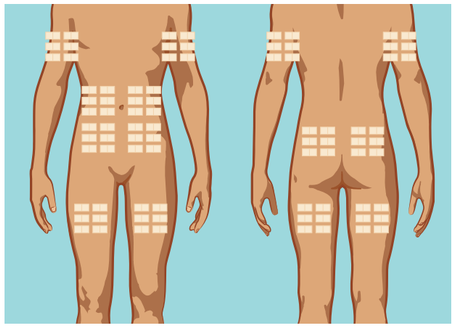

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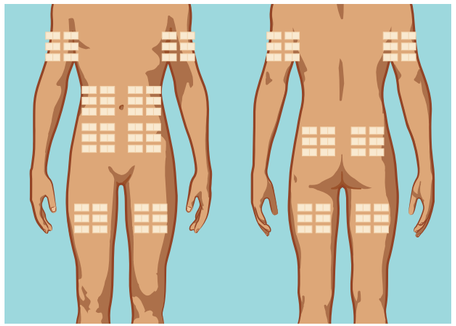

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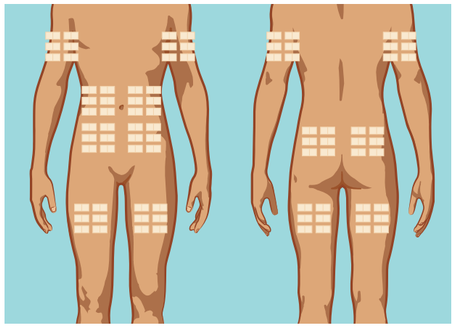

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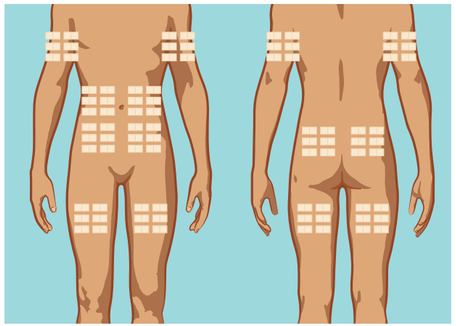

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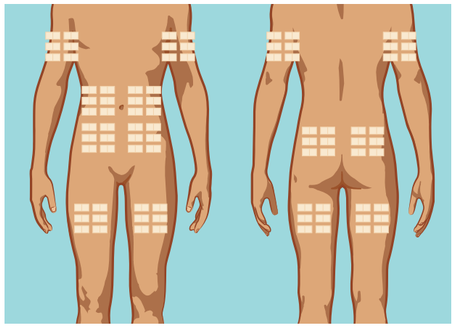

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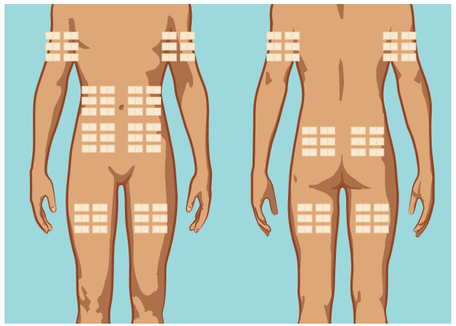

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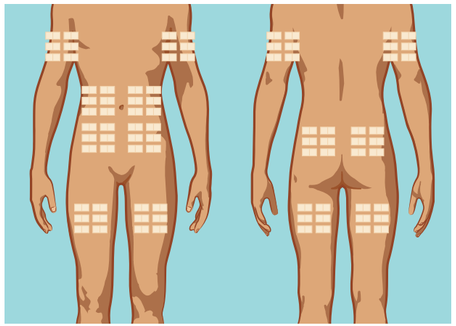

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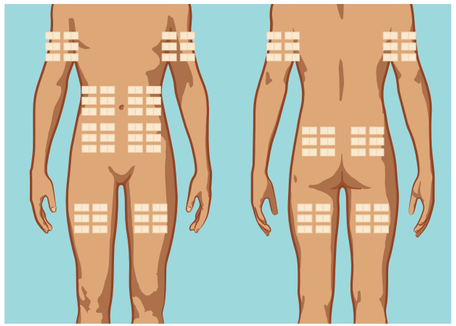

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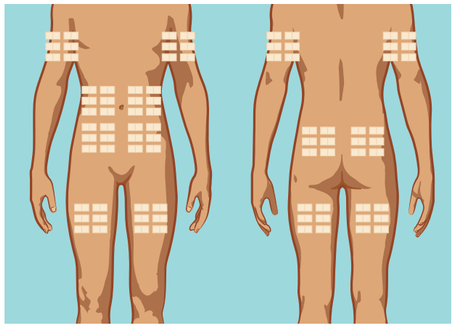

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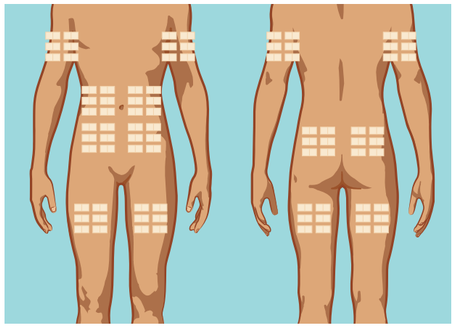

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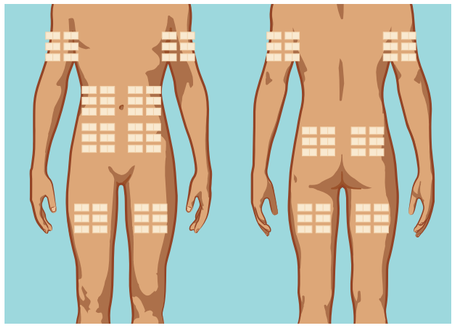

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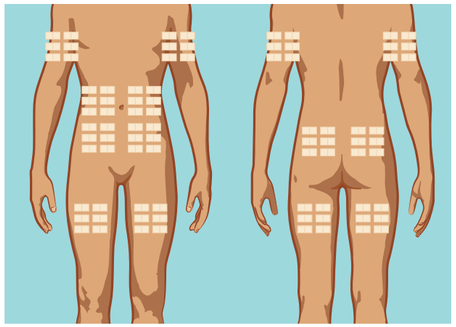

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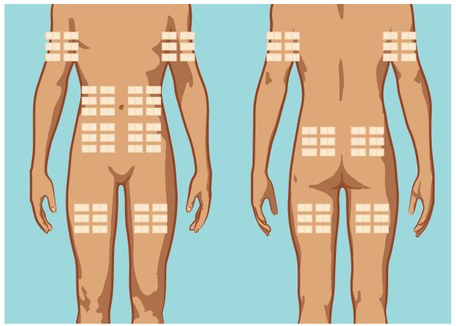

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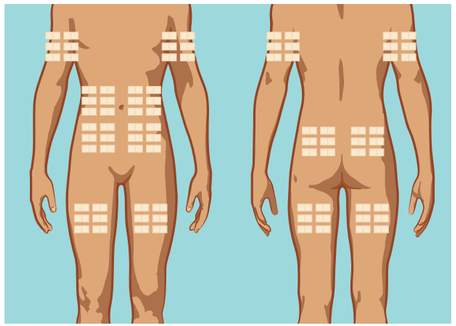

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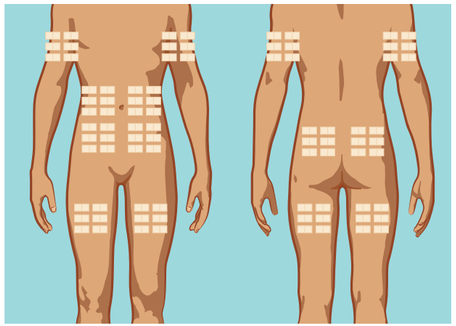

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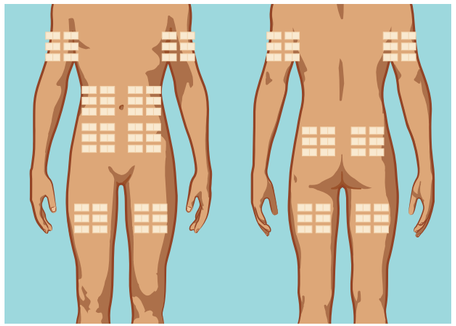

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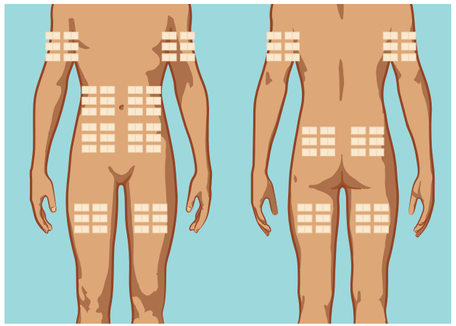

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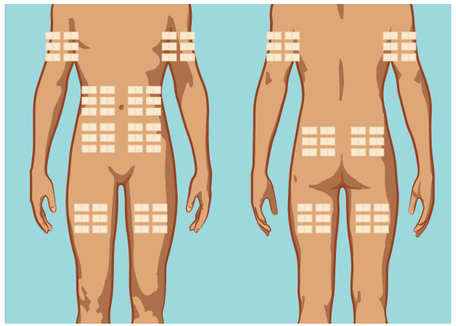

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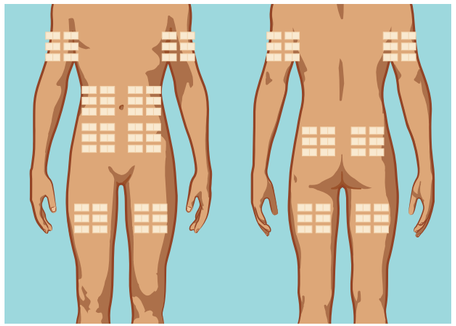

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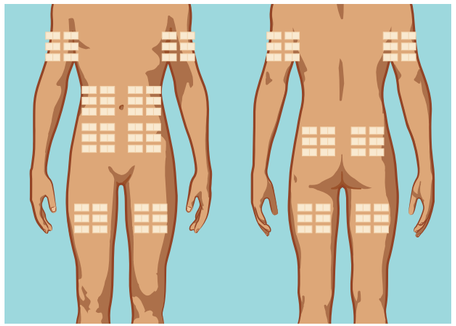

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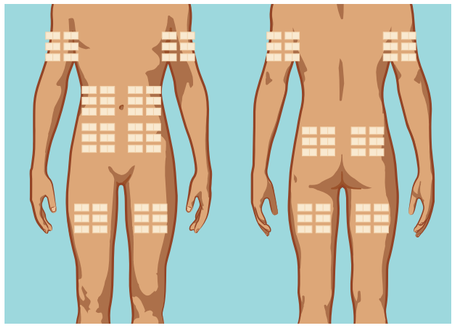

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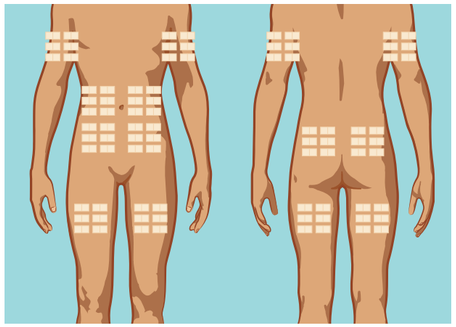

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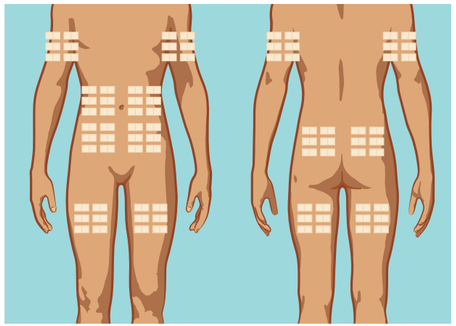

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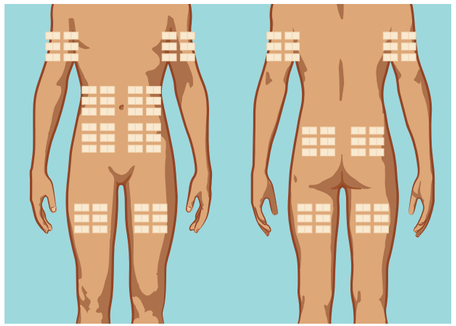

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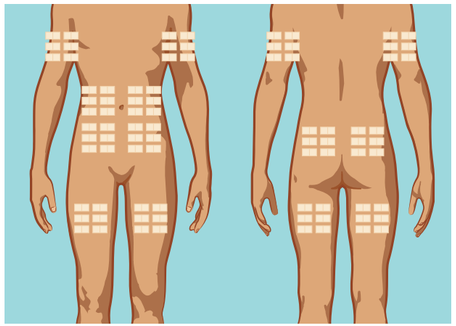

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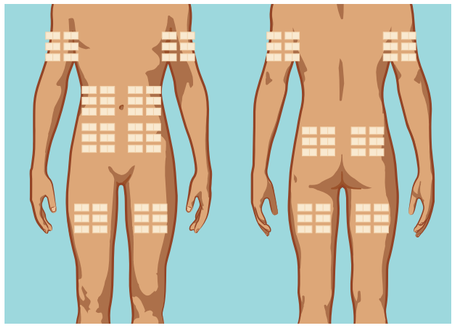

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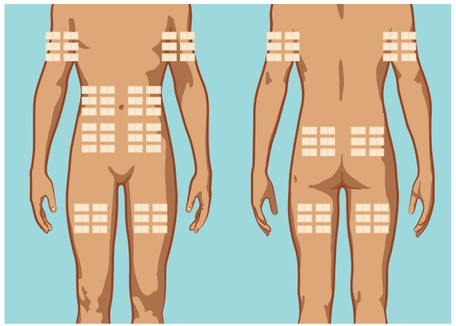

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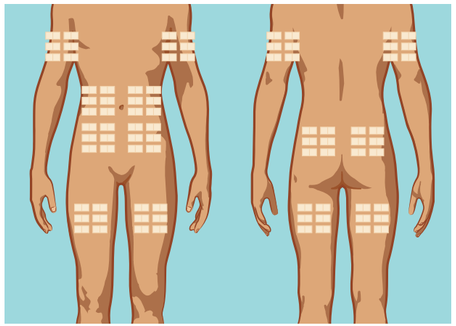

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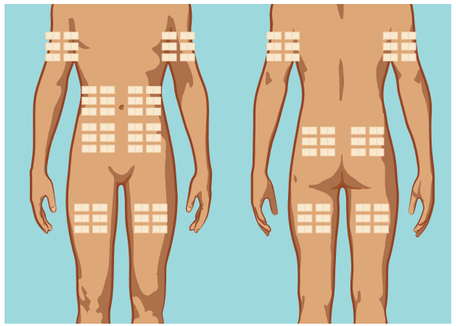

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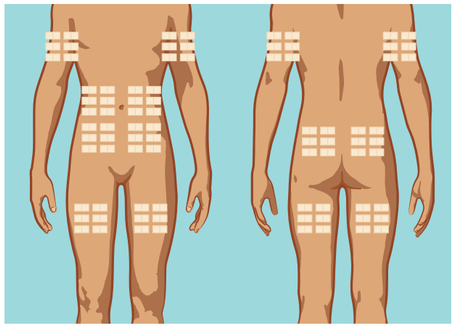

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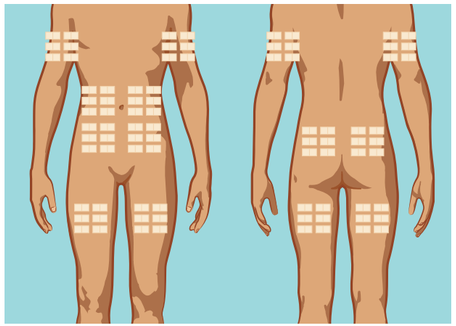

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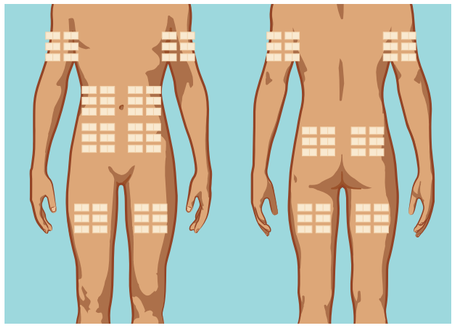

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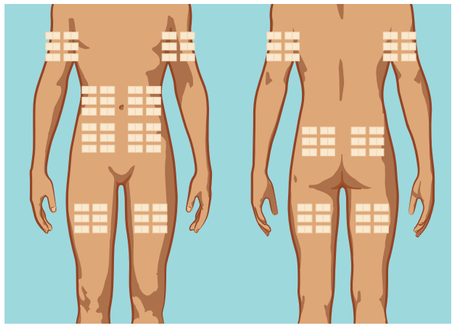

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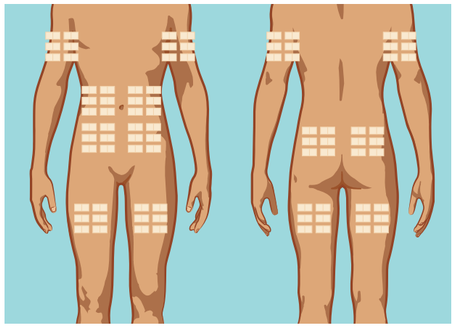

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Immune Globulin Subcutaneous (Human)-hipp, 16.5% solution

Cutaquig Infusion Journal entry

Infusion Date: _____

Dose: _____

Needle size: _____

Flow Rate
Tubing Size: _____

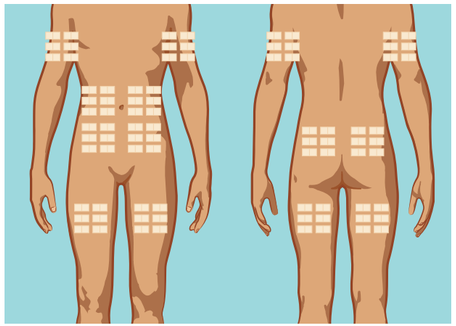
Infusion Start Time: _____

Infusion Finish Time: _____

# of Needles: _____

Infusion
Total Volume: _____

Infusion Sites:



Lot Number (affix vial label here):

Affix vial label here	Affix vial label here	Affix vial label here
Affix vial label here	Affix vial label here	Affix vial label here

Since my last infusion, I:

Was sick for _____ day(s) Was sick with: _____

Started a new medication: _____

Saw my doctor: _____

Had infusion side effects: _____

Had other side effects: _____

During this infusion, I:

Took these medications: _____

Had these side effects: _____

After this infusion, I:

Had infusion-site reactions: _____

Need to call my doctor about: _____

Need to order the following supplies: _____

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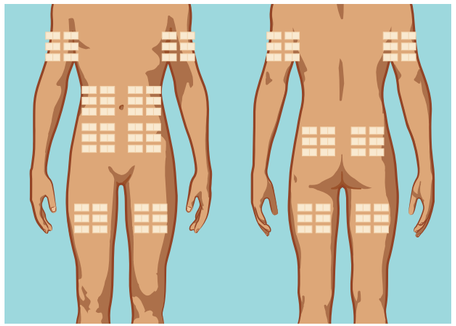

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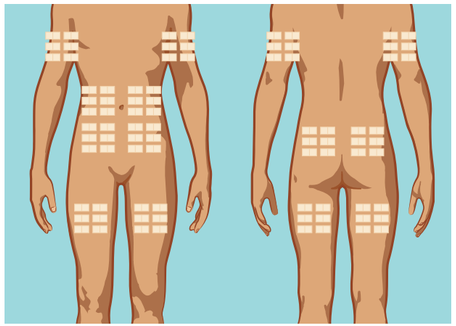

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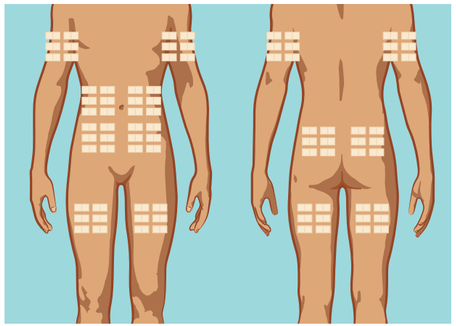

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Visit your healthcare provider regularly to discuss your treatment progress

To get the best results from your cutaquig therapies, it's important to meet with your healthcare provider regularly. Keep in mind the following:

- Remember to bring your cutaquig Infusion Journal to every appointment
- Share your cutaquig Infusion Journal notes and information with your healthcare provider to help you stay on track
- Contact your healthcare provider if you're experiencing any difficulties with your infusions or are experiencing any side effects

Mark your calendar for upcoming appointments with your healthcare provider.

Record your infusions and more with the IgCares mobile app

With the IgCares mobile app, you can record your cutaquig infusions to share with your healthcare provider. The IgCares mobile app also lets you:

- Track your treatment progress
- Set reminders for self-infusions
- Note symptoms and side effects
- Watch helpful videos

To learn more about the IgCares mobile app, please visit IgCares.com

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Our patient support program and its many benefits

Living with primary immunodeficiency (PI) poses many challenges. The IgCares program was designed—in collaboration with PI patients—to provide an experience to help you face the challenges at every step in your journey.

IgCares™

The IgCares program is designed to inspire you with initiatives, including:

Care for your self

Exclusive access to educational and informational resources for PI patients

Care for your spirit

Personal connections to peers, the PI community, and patient advocates

IgCares™

Care for your causes

A special initiative that lets you help support the PI community

Care for your world

A safety and sustainability service that transforms your infusion supplies into energy

The IgCares program is completely free to you.

IgCares™

Join the IgCares program today at **IgCares.com**

Cutaquig is a treatment for adult primary immunodeficiency that comes with **complete care.** We invite you to experience everything that cutaquig has to offer.

To learn more about cutaquig, visit **cutaquigus.com**

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Join the IgCares program today at **IgCares.com**

IgCares™

The IgCares Support Center: 1-833-382-7686

octapharma®
For the safe and optimal use of human proteins

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Date of preparation: 05/2019. CUTA-0112-PRC

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