ANNOUNCER:

This is an urgent message regarding your discharge and your LOVENOX® prescription.

Your doctor has prescribed LOVENOX® for continued therapy at home, because it has been determined that you may be at increased risk for developing DVT or deep vein thrombosis – blood clots.

The risk may continue after discharge. Many hospitalized, acutely ill medical patients may develop a DVT or PE — that is, pulmonary embolism — as outpatients.

One reason that your risk for developing DVT blood clots may continue after discharge is that your hospital stay may have been shorter than the recommended duration of therapy with LOVENOX®. You may be leaving the hospital before the recommended length of therapy is completed.

IT’S VERY IMPORTANT THAT YOU CONTINUE YOUR LOVENOX® THERAPY!

DVT can be painful and may cause you to be readmitted to the hospital. It can even lead to a potentially fatal PE.

By continuing LOVENOX® therapy at home, you are helping to protect yourself against developing DVT blood clots.

Please fill your LOVENOX® prescription as soon as possible and continue therapy as prescribed.

Your Patient Discharge Kit, and this video, contain important information to support you as you continue LOVENOX® therapy at home. For more help, you can call the Patient Hotline at 1-800-633-1610.

Thank you.

ANNOUNCER:

Important Safety Information

If you are receiving epidural or spinal anesthesia or undergoing spinal puncture, and taking LOVENOX® (enoxaparin sodium injection), you may be at increased risk of developing a blood clot in or around the spine, which can result in long-term paralysis. Your risk may be further increased if you:

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• Take nonsteroidal anti-inflammatory drugs (NSAIDs), platelet inhibitors, or other anticoagulants, such as aspirin or blood thinners

• Have an indwelling epidural catheter

• Have a history of spinal trauma, or repeated spinal anesthesia or punctures

• Have a history of spinal deformities or spinal surgery

It is important to contact your doctor immediately if you experience symptoms such as tingling, numbness (especially in the lower limbs), and muscular weakness.

LOVENOX® should not be used in patients who are actively bleeding or who have a low count of blood cells called platelets, which aid in clotting. This is a condition called “thrombocytopenia.” LOVENOX® also should not be used in patients who are allergic or sensitive to LOVENOX® or enoxaparin, heparin, or pork products.

LOVENOX® must be used with care in patients who have any of the following: problems with clotting, uncontrolled high blood pressure, a recent ulcer, impaired vision due to diabetes, kidney problems, and excessive bleeding. Pregnant women with mechanical prosthetic (artificial) heart valves may be at higher risk for blood clots. These patients who are treated with LOVENOX® must be carefully monitored by their doctor.

Some patients on LOVENOX® can experience drops in their platelet counts, a condition called “thrombocytopenia.” Also, a serious but rare condition called “heparin-induced thrombocytopenia” can occur with LOVENOX®. If you have had this condition, you must notify your healthcare professional.

LOVENOX® alters the blood’s ability to clot. Excessive bleeding (hemorrhage), leading to death, has occurred with LOVENOX®. Bleeding can occur at any site with LOVENOX® use. The use of aspirin and other NSAIDs may enhance the risk of excessive bleeding. Be sure to tell all your doctors and dentist about all of the medications you are taking, including those you are taking without a prescription, such as aspirin or other NSAIDs. Also be sure to tell your doctor or dentist you are taking LOVENOX® before any surgery is scheduled and before any new drug is taken.

All patients should be carefully monitored by their doctor while taking LOVENOX®. Your doctor is likely to obtain blood tests that measure your blood count and check for signs of hidden bleeding while you are on LOVENOX®.

You should call your doctor immediately if you notice any of the following: unusual bleeding or bleeding that lasts a long...
time, unusual bruising, signs of thrombocytopenia (such as a rash or dark spots under the skin), tingling or numbness (especially in the lower limbs), and muscular weakness.

The most common side effects from the use of LOVENOX® are mild pain, irritation, bruising, or redness of the skin at the site of injection. Other common side effects include bleeding, anemia, diarrhea, and nausea.

Do not stop taking LOVENOX® without first talking to the doctor who prescribed it for you.

For specific questions about your health, you should always consult your doctor or a qualified healthcare professional who is responsible for your care.

**ANNOUNCER:**

This video does not take the place of the injection instructions for LOVENOX® you have received from your healthcare provider. If you have questions or don’t understand something that is covered in this video, please ask your healthcare provider.

**NURSE VOICE-OVER:**

Welcome home! Now that you’ve been discharged from the hospital, you’re taking a very important step in your recovery.

**NURSE (ACTOR PORTRAYAL):**

By continuing your treatment with LOVENOX®, you’re able to reduce the risk of a serious health complication while you recuperate at home. Through this video and the educational materials in your “At Home with LOVENOX®” Kit, I’ll help you learn everything you need to know about continuing your LOVENOX® treatments on your own. It’s not as difficult as you might think — so, let’s get started.

**NURSE VOICE-OVER:**

As you’ve probably already learned, a DVT blood clot — also called Deep Vein Thrombosis — forms deep in the veins of your legs.

**NURSE:**

Hi, Mr. Hillman! How are you today?
PATIENT (ACTOR PORTRAYAL):
Pretty good!

NURSE VOICE-OVER:
Your risk for DVT is higher if you have certain health conditions, especially if you’ve been hospitalized or are spending an extended period of time off your feet to recover from an illness, injury or surgery. If a DVT blood clot breaks free and travels to your lungs, it can cause a Pulmonary Embolism, which can be potentially fatal.

NURSE:
LOVENOX® can help protect you against the risk of these complications — which is why it’s important to continue your LOVENOX® treatments just as your doctor prescribed. That means making sure you complete your full course of therapy by using all the syringes you’ve been given by your pharmacist.

This “At Home with LOVENOX®” Kit will help guide you through the steps for injecting LOVENOX® safely and easily at home. Please take a few minutes to read through the materials included in your kit and familiarize yourself with all the pieces.

WIFE (ACTOR PORTRAYAL):
Let’s see what’s in here.

Oh, good; everything’s listed right here.

PATIENT:
The nurse showed me this brochure in the hospital. Looks like everything I need to know is here. The doctor said I may be at risk for DVT blood clots in the future, like if I’m admitted to the hospital again.

WIFE:
Well, it’s always good to know about these things, isn’t it?

NURSE:
Let me take a moment to show you this helpful Daily Injection Record in the brochure.

NURSE VOICE-OVER:
Here, you’ll notice a place to keep a daily record of your injections, which will help you remember to alternate sides. There is also this illustration next to the tracking chart, which can help you visualize your abdomen. Use it to mark where your injection sites are located.

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In the back pocket of the brochure, you’ll also find a quick reference card. Once you’ve become more familiar with your LOVENOX® treatments, this can be your “cheat sheet.”

It’s important to take LOVENOX® at the same time each day, so there’s also a cling sticker that will adhere to any smooth surface — like a bathroom mirror — to remind you of your injection time each day.

Your kit also contains alcohol swabs for cleaning your injection areas and a container for the safe disposal of your syringes after you’re finished with each dose, called a sharps collector.

NURSE:
When you fill your LOVENOX® prescription, your pharmacist will give you the exact number of syringes your doctor has prescribed for you. If you have any questions about it, you should talk to your physician. If you’ve never given yourself injections before, it’s normal to be a bit nervous or apprehensive. But you can do it. Millions of other LOVENOX® patients just like you have, too.

NURSE VOICE-OVER:
Each LOVENOX® syringe comes prefilled, which means the medication for each dose is already inside the syringe and is ready to be used as directed by your physician.

NURSE:
LOVENOX® comes in different strengths, so your packaging and syringe may be a different color than this one.

NURSE VOICE-OVER:
You’ll notice that the needle is only about a 1/2 inch long, just enough so that the medication enters the layer of fatty tissue under your skin. The needle is also extremely thin to help minimize discomfort.

NURSE:
LOVENOX® is injected into that “inch of pinch” that’s to the right or left of your abdomen, here … or here. A great way to remember this is to think: LOVENOX®—“love handles.”

You can inject LOVENOX® yourself or have a family member or caregiver do it for you. The steps are simple, and they get easier with each treatment. You probably remember the nurses giving you these shots in the hospital, so you know that they’re not painful.

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NURSE VOICE-OVER:
You’ll be taking LOVENOX® once or twice daily, as your doctor has prescribed. It’s important to try to take each dose at the same time each day. Don’t skip any doses or take any more than prescribed. Continue the injections for exactly the number of days your doctor has specified.

NURSE:
Now, let’s review the procedure. This would be a good time to view this video with a family member or caregiver if they will be assisting you with your LOVENOX® injection.

NURSE VOICE-OVER:
First, wash your hands well with soap and warm water and dry them thoroughly.

NURSE:
Now, you’ll need a place to sit or lie down. It’s important that you can relax comfortably with your body firmly supported, yet still easily see your abdomen and where you will be injecting.

NURSE VOICE-OVER:
Your sharps collector should be within easy reach.

Remove the lid to have it open and ready.

The injection can be given on either the left or right side of your stomach — as long as it’s at least two inches away from your belly button and out toward your waist.

NURSE:
Again, think “love handles” — it’s a simple way to remember.

NURSE VOICE-OVER:
Whether you choose the right or left side to begin your treatments at home, you should alternate sides with each shot. Be sure to avoid injecting bruised or scarred areas.

Use one of the alcohol swabs in your kit to clean the area you are about to inject and let it dry.

Firmly pull the cap off of the syringe.
**NURSE:**
Do not twist the cap, because this can bend the needle.

**NURSE VOICE-OVER:**
Now, discard the needle cap into the sharps container.

**NURSE:**
Do not put the needle down or allow it to touch anything — this will help to keep it sterile.

**NURSE VOICE-OVER:**
You will notice that each syringe has a bubble inside. It’s OK for you to inject this bubble into your skin. Don’t try to squirt the bubble out, as you may lose some of the drug and not get the full dose.

**NURSE:**
If your physician has prescribed less than a full syringe, hold the syringe with the needle pointing down but close enough so that you can read the writing.

**NURSE VOICE-OVER:**
Then expel the excess portion and tap it off…

**NURSE:**
…until the contents align with the dosage that the physician has prescribed.

**NURSE VOICE-OVER:**
Now place the syringe in the hand you write with and hold it like a pencil.

With your other hand, gently pinch the cleansed area between your thumb and your forefinger to make a fold in your skin.

**NURSE:**
You will need to hold the skin fold throughout the injection. This way, the needle enters soft, fatty tissue and not muscle. It is important not to inject your muscle, as this can cause bleeding or bruising. Fortunately, most of us don’t have any trouble finding an “inch of pinch” on our stomach!

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NURSE VOICE-OVER:
Now insert the full length of the needle straight up and down, at a 90-degree angle into the fold of skin.

NURSE:
Don’t worry — it will enter easily.

NURSE VOICE-OVER:
When the needle is all the way in, press down on the plunger with your finger. Keep holding the fold of skin until the syringe is empty. Then pull the needle straight out…

NURSE:
…keeping your finger on the plunger rod. To avoid bruising, do not rub the injection site. You’re almost done. The final step is to dispose of the syringe. All LOVENOX® syringes feature a safety system that covers the needle after the injection.

NURSE VOICE-OVER:
Pointing the needle downwards and away from yourself and others, activate the LOVENOX® safety device by firmly pushing the plunger rod.

NURSE:
The protective sleeve will automatically cover the needle, and you’ll hear a click confirming that the shield has activated.

NURSE VOICE-OVER:
Now, place the empty syringe into the sharps collector with the needle point facing down.

NURSE:
If you are unable to physically activate the safety system, carefully insert the used needle, with the needle point facing down, into the sharps collector for disposal.

NURSE VOICE-OVER:
Be sure to replace and tighten the lid on your sharps collector. And, remember to store your prefilled syringes, as well as your sharps collector, in a safe place, out of the reach of children.

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NURSE:
When the sharps collector is full, contact your healthcare professional or pharmacist for disposal instructions. That’s all there is to it. If you have any questions at all, talk to your healthcare provider.

NURSE VOICE-OVER:
Continue using LOVENOX® as prescribed by your doctor for as long as your doctor indicated. This is critical to help ensure LOVENOX® works the way it was intended. You should also follow your doctor’s instructions regarding your other medications and any laboratory testing your physician may have ordered. If you experience any side effects, be sure to contact your healthcare provider immediately. For more information about the use of LOVENOX® or the proper technique for self injection, call your doctor or the 800 number on your screen.

NURSE:
On behalf of sanofi-aventis…

NURSE VOICE-OVER:
…best wishes for your speedy recovery.

PATIENT TO WIFE:
What a beautiful day for a walk.