injectafer®
ferric carboxymaltose injection

DISCOVER INJECTAFER

Information for patients

Not an actual patient

Please see accompanying Full Prescribing Information, including important Risk Information.

GET TO KNOW INJECTAFER®, AN IV IRON TREATMENT FOR CERTAIN PATIENTS WITH IRON DEFICIENCY ANEMIA (IDA)

IV=intravenous.

SELECT IMPORTANT SAFETY INFORMATION

What is the most important information I should know about INJECTAFER?

INJECTAFER may cause serious side effects, including: Low blood phosphate levels (hypophosphatemia). Hypophosphatemia has happened after one or more doses of INJECTAFER and can be severe or serious, and lead to hospitalization, softening of your bones (osteomalacia), and broken bones (fractures). Hypophosphatemia can happen even if your blood phosphate levels were normal before treatment and you do not have any risk factors for hypophosphatemia. Your healthcare provider will check your blood phosphate levels before a repeat treatment with INJECTAFER if you are at risk for hypophosphatemia. If a repeat treatment is needed within 3 months of your last treatment, your healthcare provider will check your blood phosphate levels.

Tell your healthcare provider if you develop any of the following signs or symptoms of hypophosphatemia during treatment with INJECTAFER:

- tiredness
- muscle weakness or pain
- bone or joint pain
- broken bones

Your healthcare provider may permanently stop treatment with INJECTAFER if you develop severe hypophosphatemia with symptoms or if your blood phosphate levels remain low during treatment with INJECTAFER.

See **"What are the possible side effects of INJECTAFER?"** for more information about side effects.

Continued...

TAKE A LOOK INSIDE

Understanding IDA

Causes, symptoms, diagnosis, and a treatment option.

Getting to Your Iron Goal

How to know if you're getting enough iron from your iron supplement and, if not, how Injectafer might help if your doctor decides it is right for you.

Treatment With Injectafer

Where, when, and how Injectafer is administered, along with helpful tips on how to plan for treatment.

Savings & Support

If your doctor has prescribed Injectafer, find out if you're eligible and learn how to enroll.

What is INJECTAFER?

INJECTAFER is a prescription iron replacement medicine used for the treatment of:

- iron deficiency anemia (IDA) in:
  - adults and children 1 year of age and older who cannot tolerate iron taken by mouth (oral) or who have not responded well to oral iron
  - adults who have chronic kidney disease who are not on dialysis (non-dialysis-dependent chronic kidney disease)
- iron deficiency in adults with mild to moderate heart failure to improve the ability to exercise (improve exercise capacity)

It is not known if INJECTAFER is safe and effective in children with IDA who are under 1 year of age.

It is not known if INJECTAFER is safe and effective in children with iron deficiency and mild to moderate heart failure to improve exercise capacity.

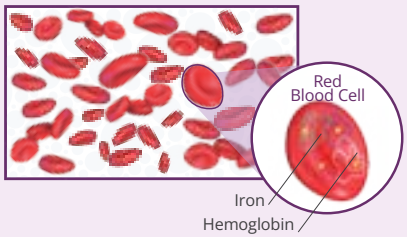
Please see accompanying Full Prescribing Information, including Important Risk Information.

injectafer® ferric carboxymaltose injection

UNDERSTANDING IDA

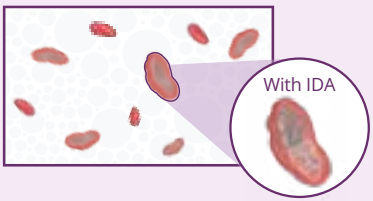
- **Iron deficiency anemia (IDA)** is a condition that interferes with the formation and function of red blood cells
- **Red blood cells contain hemoglobin (Hb)**, which is a protein that helps carry oxygen from the lungs to cells in the body

NORMAL RED BLOOD CELL COUNT WITH A HEALTHY LEVEL OF OXYGEN-CARRYING HEMOGLOBIN

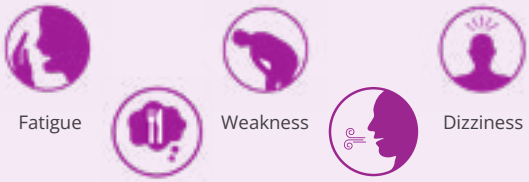


- When you don't have enough healthy red blood cells to carry oxygen throughout your body, that's **anemia**.

IDA IS A CONDITION IN WHICH YOU HAVE FEWER RED BLOOD CELLS AND LESS HEMOGLOBIN INSIDE EACH CELL



WHAT ARE SOME SYMPTOMS OF IDA?*



*Some people with IDA may not experience symptoms. Injectafer has not been studied or approved for treating symptoms of IDA.

SELECT IMPORTANT SAFETY INFORMATION

Who should not receive INJECTAFER?

You should not receive INJECTAFER if you are allergic to ferric carboxymaltose or any of the other ingredients in INJECTAFER. The active ingredient in INJECTAFER is ferric carboxymaltose, the inactive ingredients are: water for injection, sodium hydroxide, or hydrochloric acid.

WHAT CAUSES IDA?

1. Iron is either lower than it should be or not fully replaced due to causes such as **blood loss, lack of dietary iron, inability to absorb iron, or increased need for iron**.
2. **Low iron levels occur (iron deficiency)**, and you don't have enough iron to keep you in good health.
3. If iron deficiency gets worse, it may cause **IDA**, as **iron helps produce Hb**.

MANY DISEASES AND CONDITIONS MAY CAUSE OR LEAD TO IDA

Tell your healthcare provider about all of your medical conditions.

HOW IS IDA DIAGNOSED?

IDA is determined by testing 3 different lab markers in your blood: **Hb, ferritin, and transferrin saturation (TSAT)**.†

HOW IS IDA TREATED?

There are several reasons why iron supplements may not be suitable for some people with IDA:

- Iron supplements can cause hard-to-tolerate **side effects**
- **Poor absorption:** the digestive tract is only able to absorb a small portion of the iron in an iron supplement, so your body may not get the full dose of iron needed

†An additional test for total iron binding capacity (TIBC) values may be required to diagnose IDA.

GETTING TO YOUR GOAL

HOW DO I KNOW IF I'M GETTING ENOUGH IRON?

Next time you get a blood test, ask your doctor about your **Hemoglobin (Hb)** level

NORMAL ADULT Hb VALUES*
Male: 13.5 g/dL–17.5 g/dL
Female: 12.0 g/dL–15.5 g/dL

Hb is one indicator of your iron levels.† If you have low Hb, you may also have low iron. Your doctor can calculate how much iron you need based on your Hb and other levels.

I'M ALREADY TAKING IRON. WHY IS MY Hb LEVEL NOT AT GOAL?

- **If you're taking oral iron supplements:** Even in healthy people, it is possible that less than 10% of the iron in iron supplements is absorbed. With IV iron, an infusion delivers 100% of iron directly into the blood-stream through a vein
- **If you're currently on an IV iron treatment:** Your doctor will continue to monitor your iron levels and, if they are below normal, may decide if another IV iron treatment option is right for you

*Normal values can vary for many reasons, including conditions you may have or where your lab work was done. That's why it's important to discuss your lab results with your doctor to understand what they mean for you.

†If you would like to learn more about these blood tests, go to **Injectafer.com** and click on "I have been diagnosed with low iron levels."

This information is not intended to replace your healthcare provider's medical advice.

g/dL=grams per deciliter; IDA=iron deficiency anemia; IV=intravenous; kg=kilograms; lbs=pounds; mg=milligrams.

INJECTAFER® OFFERS THE MOST IRON OF ANY IV IRON TREATMENT

- For patients with IDA who **can't tolerate iron supplements** or who **don't respond well to them**
- Injectafer is the only **IV iron** that provides up to **1,500 mg of iron in 1 course of treatment**

Artist's rendering.

1st administration
750 mg of iron

2nd administration
750 mg of iron

For patients weighing less than 50 kg (110 lb), the recommended dosage is Injectafer 15 mg/kg body weight intravenously in 2 doses, separated by at least 7 days per course.

For patients weighing less than 50 kg (110 lb), the recommended dosage is Injectafer 15 mg/kg body weight intravenously in 2 doses, separated by at least 7 days per course.

For adult patients weighing 50 kg or more, an alternative dose of Injectafer 15 gm/kg body weight up to a maximum of 1,000 mg intravenously may be administered as a single dose.

Injectafer is well-studied and has been widely used to treat **more than 3 million people** in the US alone.

Injectafer may cause serious side effects, including low blood phosphate levels (hypophosphatemia).

ASK YOUR DOCTOR ABOUT INJECTAFER IF YOU'RE NOT GETTING TO GOAL ON YOUR IRON SUPPLEMENT

SELECT IMPORTANT SAFETY INFORMATION

What should I tell my healthcare provider before receiving INJECTAFER?

Before recieving INJECTAFER, tell your healthcare provider about all of your medical conditions, including if you:

- have a history of trouble absorbing certain vitamins or phosphate in your body
- have inflammatory bowel disease
- have hyperparathyroidism

Please see accompanying Full Prescribing Information, including Important Risk Information.

injectafer® ferric carboxymaltose injection

GETTING YOUR INJECTAFER® INFUSIONS

If your doctor has prescribed Injectafer for you, they think it may be an effective way to replenish the iron you need.

WHERE INJECTAFER IS GIVEN

- **Injectafer is usually given at an infusion center**, and admistered by a healthcare professional
- Infusion centers are medical facilities equipped and staffed for **administering infusions**

Find an infusion center that may provide Injectafer by using the Injectafer Infusion Center Locator at injectafer.com/iron-infusion-center

BEFORE YOUR FIRST INJECTAFER INFUSION

- **Call ahead** to confirm that the infusion center can provide Injectafer intravenous (IV) iron
- **Dress comfortably** and bring a book or magazine
- **Bring your insurance card, photo identification**, and any other information your doctor has asked you to bring
- **Tell your healthcare provider** about all other medications you are taking

SELECT IMPORTANT SAFETY INFORMATION

What should I tell my healthcare provider before receiving INJECTAFER? (Cont'd)

Before recieving INJECTAFER, tell your healthcare provider about all of your medical conditions, including if you: (Cont'd)

- have low vitamin D levels
- have hereditary telangiectasia (HHT) or Osler-Weber-Rendu syndrome
- have had an allergic reaction to iron given into your vein
- have previously received INJECTAFER
- have high blood pressure (hypertension)
- are pregnant or plan to become pregnant. INJECTAFER may harm your unborn baby. Tell your healthcare provider right away if you become pregnant or think you are pregnant during treatment with INJECTAFER

FOR EACH INFUSION

Each Injectafer infusion may take about **15 minutes**

The usual dosage is 750 mg given in two doses, separated by at least 7 days, for a total of 1,500 mg. Your dosage may vary based on your weight.

AFTER EACH INFUSION

- Afterward, your healthcare provider will **monitor you for about 30 minutes**
- **Your iron stores are replenished over time**, so it's important for you to follow up with your doctor as directed. A blood test will usually be taken to check your levels to see how injectafer is working for you.

SELECT IMPORTANT SAFETY INFORMATION

What should I tell my healthcare provider before receiving INJECTAFER? (Cont'd)

Before recieving INJECTAFER, tell your healthcare provider about all of your medical conditions, including if you: (Cont'd)

- are breastfeeding or plan to breastfeed. INJECTAFER passes into your breast milk. It is not known if INJECTAFER will harm your baby. Talk to your healthcare provider about the best way to feed your baby during treatment with INJECTAFER

Tell your healthcare provider about all the medications you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements.

How will I receive INJECTAFER?

- INJECTAFER is given into your vein by intravenous (IV) infusion by your healthcare provider.
- INJECTAFER is usually given in 2 doses at least 7 days apart for iron deficiency anemia or 6 weeks apart for iron deficiency with mild to moderate heart failure to improve exercise capacity.

Please see accompanying Full Prescribing Information, including Important Risk Information.

injectafer® ferric carboxymaltose injection

WHAT SIDE EFFECTS COULD OCCUR IN THE DAYS FOLLOWING AN IV INFUSION?

- Some patients experience nausea, skin redness, high blood pressure, low blood phosphate levels, flushing, dizziness, and injection site reactions
- Tell your healthcare provider if you develop any of the following signs or symptoms of hypophosphatemia during treatment with INJECTAFER:
  - tiredness
  - muscle weakness or pain
  - bone or joint pain
  - broken bones
- These are not all of the possible side effects of Injectafer®. Call your doctor for medical advice about any side effects during or after treatment with Injectafer.

SEEK MEDICAL ATTENTION IF MORE SERIOUS SIDE EFFECTS ARISE

Serious side effects may include, but are not limited to:

low blood pressure, feeling dizzy or lightheaded, loss of consciousness, trouble breathing, swelling, fast heartbeat, cold or clammy skin, feet or hands turn blue, itching, rash, hives, wheezing

SELECT IMPORTANT SAFETY INFORMATION

How will I receive INJECTAFER? (Cont'd)

- If your healthcare provider decides it is right for you, INJECTAFER may be given intravenously by your healthcare provider as a single-dose treatment.
- INJECTAFER treatment may be repeated if your healthcare provider decides it is needed.
- INJECTAFER can cause discoloration or staining of your skin if leaking happens at your infusion site. Tell your healthcare provider if you notice any leaking from the infusion site during your infusion.

BE SURE TO COMPLETE YOUR INJECTAFER COURSE OF TREATMENT

REMEMBER, INJECTAFER IS USUALLY GIVEN IN 2 DOSES

- Remember to schedule or confirm your next appointment
- Come back for your second dose as instructed by your doctor after at least 7 days
- Track your treatments using the tables on page 12 of this brochure

750 mg + 750 mg = **1,500 mg**

COMMIT 100% TO COMPLETING YOUR COURSE OF IV IRON TREATMENT, WHICH DELIVERS 100% OF ITS IRON DIRECTLY INTO YOUR BLOODSTREAM

The information included in this brochure is specifically related to the treatment of IDA with Injectafer. Injectafer is also indicated for the treatment of ID in certain patients with mild to moderate heart failure (HF) to improve exercise capacity.

To learn more about treatment for ID in HF, please visit www.injectafer.com/iron-deficiency-in-heart-failure.

ID=iron deficiency; IDA=iron deficiency anemia; IV=intravenous; mg=milligrams.

Please see accompanying Full Prescribing Information, including Important Risk Information.

injectafer® ferric carboxymaltose injection

INJECTAFER® (ferric carboxymaltose injection) TREATMENT REMINDERS

	Dose #1	Dose #2
Date		
Time		
Infusion center location		

Doctor follow-up:	
Date:	Time:
Location:	

Baseline iron levels:

Date	Hb	TSAT	Ferritin

Iron levels at follow-up:

Date	Hb	TSAT	Ferritin

GET THE LATEST INFORMATION ABOUT IDA AND INJECTAFER

- To learn more about IDA and Injectafer, visit **injectafer.com**

Hb=hemoglobin; IDA=iron deficiency anemia; TSAT=transferrin saturation.

SELECT IMPORTANT SAFETY INFORMATION

What are the possible side effects of INJECTAFER?

INJECTAFER can cause serious side effects, including:

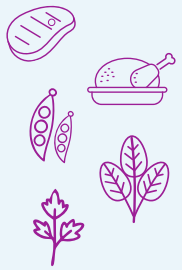
- See **"What is the most important information I should know about INJECTAFER?"**
- **Allergic reactions.** Serious life-threatening allergic reactions that can lead to death have happened in people who receive INJECTAFER.

  Your healthcare provider will watch you during and for at least 30 minutes after you receive INJECTAFER.

DISCUSS DIET AND LIFESTYLE TIPS WITH YOUR DOCTOR

YOUR DOCTOR MAY SUGGEST YOU INCLUDE THESE IRON-RICH FOODS, WHICH CAN HELP MAINTAIN HEALTHY IRON LEVELS

- Red meat: beef, pork, lamb
- Liver
- Poultry, especially dark meat
- Dark, leafy greens: broccoli, kale, turnip greens, collard greens
- Legumes: beans, peas
- Iron-enriched grains: pasta, rice, cereal



REDUCE ALCOHOL CONSUMPTION

Alcohol may reduce the body's ability to make red blood cells and may shorten the lifespan of red blood cells.

KEEP ACTIVE

Remember to speak to your healthcare provider before you begin any fitness program.

RELAX

Don't be afraid to ask for help, understanding, and patience when needed.

The tips included in this brochure are meant to aid, not replace, conversations with your doctor. Please talk to a healthcare professional to determine the best health advice for you.

Please see accompanying Full Prescribing Information, including Important Risk Information.

injectafer® ferric carboxymaltose injection

TWO WAYS TO HELP YOU PAY FOR INJECTAFER® TREATMENTS

1

IF INJECTAFER IS COVERED BY YOUR COMMERCIAL INSURANCE, BUT YOU HAVE A CO-PAY:

INJECTAFER SAVINGS PROGRAM*

The Injectafer Savings Program may help eligible patients with their Injectafer prescription out-of-pocket responsibility.

PATIENTS MAY PAY AS LITTLE AS $50 PER DOSE

For eligible patients:

- Assistance of up to $500 per dose
- Enrollment is valid for 2 courses of treatment per 12-month period

How to enroll:

Ask your doctor to enroll you prior to recieving Injectafer treatment. If your doctor cannot enroll you, you can enroll by visiting injectafercopay.com or calling AR Assist® at 1-877-448-4766.

*The Injectafer Savings Program is only available for patients 1 year of age or older who are commercially insured. Insurance out-of-pocket cost must be over $50 per dose. Additional restrictions may apply. Please see full Terms and Conditions on page 16.

2

IF YOU DO NOT HAVE INSURANCE TO COVER TREATMENT OR ARE COMMERCIALLY UNDERINSURED:

PATIENT ASSISTANCE PROGRAM

The Patient Assistance Program was created to help patients who lack health insurance or are commercially underinsured and cannot afford therapy.

AR Assist®

AR Assist
1-877-448-4766
is available Monday–Friday,
8:00 am – 6:00 pm ET
Excludes holidays

Eligibility requirements for the Patient Assistance Program:

To be eligible for the program, you must:

- Meet established income limits
- Lack health insurance completely or be commercially underinsured
- Be a resident of the US or its territories, including Puerto Rico
- Have your provider (eg, physician, infusion center) apply on your behalf

Please see accompanying Full Prescribing Information, including Important Risk Information.

injectafer® ferric carboxymaltose injection

INJECTAFER® SAVINGS PROGRAM TERMS AND CONDITIONS

1. This offer is only valid for commercially insured patients. Uninsured and cash-paying patients are NOT eligible for this program.
2. Depending on insurance coverage, eligible patients may pay no more than $50 per dose for up to four doses per calendar year. There is a maximum savings limit of $500 per dose, subject to an annual dollar limit. Check with your pharmacist or healthcare provider for your copay discount. Patient out-of-pocket expenses may vary.
3. This offer is not valid for patients enrolled in Medicare Part B or Medicare Part D, Medicaid, or other federal or state healthcare programs, or private indemnity or HMO insurance plans that reimburse you for the entire cost of your prescription drugs. Patients may not use this card if they are Medicare-eligible and enrolled in an employer-sponsored health plan or medical or prescription drug benefit program for retirees.
4. An explanation of benefits (EOB) statement must be faxed, uploaded to the portal, or mailed in prior to transacting on the account numbers for copay assistance.
5. Offer is invalid for claims or transactions more than 180 days from the date on the EOB.
6. Patients will be automatically re-enrolled in the next calendar year. If there is no copay claim activity for 18 months, the enrollment will be canceled.
7. American Regent, Inc.® reserves the right to rescind, revoke, or amend this offer without notice. Offer good only in the US, including Puerto Rico, at participating pharmacies or healthcare providers.
8. Void if prohibited by law, taxed, or restricted.
9. This account number is not transferable. The selling, purchasing, trading, or counterfeiting of this account number is prohibited by law.
10. This account number is not insurance.
11. By redeeming this account number, you acknowledge that you are an eligible patient and that you understand and agree to comply with the Terms and Conditions of this offer.
12. Qualified patients receiving Injectafer will be allowed a 180-day retroactive enrollment period from the date of the EOB form to receive benefits under the program rules.

IMPORTANT SAFETY INFORMATION

What is the most important information I should know about INJECTAFER?

INJECTAFER may cause serious side effects, including: Low blood phosphate levels (hypophosphatemia). Hypophosphatemia has happened after one or more doses of INJECTAFER and can be severe or serious, and lead to hospitalization, softening of your bones (osteomalacia), and broken bones (fractures). Hypophosphatemia can happen even if your blood phosphate levels were normal before treatment and you do not have any risk factors for hypophosphatemia. Your healthcare provider will check your blood phosphate levels before a repeat treatment with INJECTAFER if you are at risk for hypophosphatemia. If a repeat treatment is needed within 3 months of your last treatment, your healthcare provider will check your blood phosphate levels.

Tell your healthcare provider if you develop any of the following signs or symptoms of hypophosphatemia during treatment with INJECTAFER:

- tiredness
- muscle weakness or pain
- bone or joint pain
- broken bones

Your healthcare provider may permanently stop treatment with INJECTAFER if you develop severe hypophosphatemia with symptoms or if your blood phosphate levels remain low during treatment with INJECTAFER.

See **"What are the possible side effects of INJECTAFER?"** for more information about side effects.

What is INJECTAFER?

INJECTAFER is a prescription iron replacement medicine used for the treatment of:

- iron deficiency anemia (IDA) in:
  - adults and children 1 year of age and older who cannot tolerate iron taken by mouth (oral) or who have not responded well to oral iron
  - adults who have chronic kidney disease who are not on dialysis (non-dialysis-dependent chronic kidney disease)
- iron deficiency in adults with mild to moderate heart failure to improve the ability to exercise (improve exercise capacity)

It is not known if INJECTAFER is safe and effective in children with IDA who are under 1 year of age.

It is not known if INJECTAFER is safe and effective in children with iron deficiency and mild to moderate heart failure to improve exercise capacity.

Continued on the next page...

IMPORTANT SAFETY INFORMATION (Cont'd)

Who should not receive INJECTAFER?

You should not receive INJECTAFER if you are allergic to ferric carboxymaltose or any of the other ingredients in INJECTAFER. The active ingredient in INJECTAFER is ferric carboxymaltose, the inactive ingredients are: water for injection, sodium hydroxide, or hydrochloric acid.

What should I tell my healthcare provider before receiving INJECTAFER?

Before recieving INJECTAFER, tell your healthcare provider about all of your medical conditions, including if you:

- have a history of trouble absorbing certain vitamins or phosphate in your body
- have inflammatory bowel disease
- have hyperparathyroidism
- have low vitamin D levels
- have hereditary telangiectasia (HHT) or Osler-Weber-Rendu syndrome
- have had an allergic reaction to iron given into your vein
- have previously received INJECTAFER
- have high blood pressure (hypertension)
- are pregnant or plan to become pregnant. INJECTAFER may harm your unborn baby. Tell your healthcare provider right away if you become pregnant or think you are pregnant during treatment with INJECTAFER
- are breastfeeding or plan to breastfeed. INJECTAFER passes into your breast milk. It is not known if INJECTAFER will harm your baby. Talk to your healthcare provider about the best way to feed your baby during treatment with INJECTAFER

Tell your healthcare provider about all the medications you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements.

How will I receive INJECTAFER?

- INJECTAFER is given into your vein by intravenous (IV) infusion by your healthcare provider.
- INJECTAFER is usually given in 2 doses at least 7 days apart for iron deficiency anemia or 6 weeks apart for iron deficiency with mild to moderate heart failure to improve exercise capacity.
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- INJECTAFER treatment may be repeated if your healthcare provider decides it is needed.
- INJECTAFER can cause discoloration or staining of your skin if leaking happens at your infusion site. Tell your healthcare provider if you notice any leaking from the infusion site during your infusion.

What are the possible side effects of INJECTAFER?

INJECTAFER can cause serious side effects, including:

- See **"What is the most important information I should know about INJECTAFER?"**
- **Allergic reactions.** Serious life-threatening allergic reactions that can lead to death have happened in people who receive INJECTAFER. Your healthcare provider will watch you during and for at least 30 minutes after you receive INJECTAFER. Tell your healthcare provider right away if you develop any of the following signs or symptoms of allergic reactions during or after treatment with INJECTAFER:
  - low blood pressure
  - feeling dizzy or lightheaded
  - loss of consciousness
  - trouble breathing
  - swelling
  - fast heartbeat
  - cold or clammy skin
  - feet or hands turn blue
  - itching
  - rash
  - hives
  - wheezing
- **High blood pressure.** High blood pressure, sometimes with redness and warmth of the face (facial flushing), dizziness, or nausea, has happened during treatment with INJECTAFER. Your healthcare provider will check your blood pressure and check for any signs and symptoms of high blood pressure after you receive INJECTAFER.

The most common side effects of INJECTAFER include:

In adults:

- nausea
- high blood pressure
- flushing
- injection site reactions
- skin redness
- low blood phosphate levels
- dizziness

In children:

- low blood phosphate levels
- injection site reactions
- rash
- headache
- vomiting

This is the most important information to know about INJECTAFER, but not all the possible side effects. Call your doctor for medical advice about side effects.

You are encouraged to report Adverse Drug Events to American Regent, Inc.® at 1-800-734-9236 or to the FDA by visiting www.fda.gov/medwatch or calling 1-800-FDA-1088.

Please see the Full Prescribing Information, including Important Risk Information, for INJECTAFER.

REF-2888 2.0 08/2026

injectafer®
ferric carboxymaltose injection

BE SURE TO COMPLETE YOUR INJECTAFER COURSE OF TREATMENT

REMEMBER, INJECTAFER IS USUALLY GIVEN IN 2 DOSES

- Remember to schedule or confirm your next appointment
- Come back for your second dose as instructed by your doctor after at least 7 days
- Track your treatments using the tables on page 12 of this brochure

750 mg + 750 mg = **1,500 mg**

COMMIT 100% TO COMPLETING YOUR COURSE OF IV IRON TREATMENT, WHICH DELIVERS 100% OF ITS IRON DIRECTLY INTO YOUR BLOODSTREAM

IV=intravenous; mg=milligrams.

Please see accompanying Full Prescribing Information, including Important Risk Information, and see the Important Safety Information throughout and on pages 17–19.

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