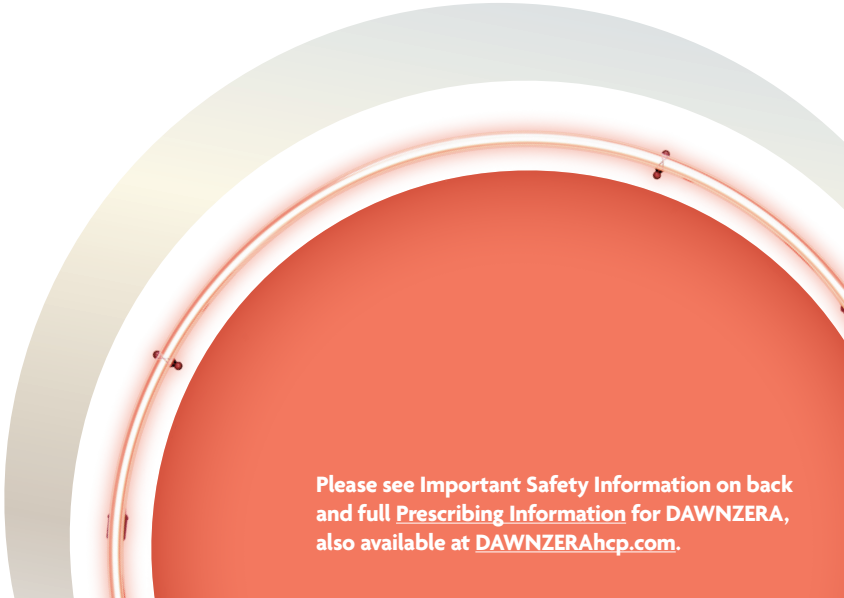
DAWNZERA™
(donidalorsen) 80 mg / 0.8 mL injection

Let's Get Your Patient Started

Quick Reference Card

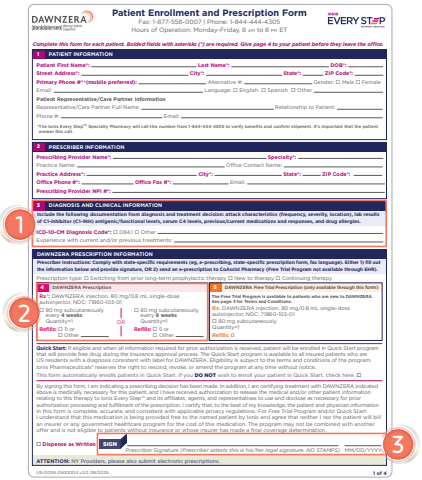


Please see Important Safety Information on back and full Prescribing Information for DAWNZERA, also available at DAWNZERAhcp.com.

STEP 1

Complete the prescription process and enroll patients in Ionis Every Step™

Ensure all sections are complete.


Patient Enrollment and Prescription Form

Fax: 1-877-558-0007 | Phone: 1-844-444-4305

Hours of Operation: Monday–Friday, 8 AM to 8 PM ET

Complete this form for each patient. Bolded fields with asterisks (*) are required. Give page 4 to your patient before they leave the office.

1 PATIENT INFORMATION

2 PRESCRIBER INFORMATION

3 DIAGNOSIS AND CLINICAL INFORMATION

DAWNZERA PRESCRIPTION INFORMATION

4 DAWNZERA Prescription

5 DAWNZERA Free Trial Prescription (only available through this form)

SIGN

Prescriber Signature (Prescriber attests this is his/her legal signature. NO STAMPS) MM/DD/YYYY

ATTENTION: NY Providers, please also submit electronic prescriptions.

1 of 4

1 2 3

Reminders

1. Check the diagnosis code in section 3
2. Complete the prescription in section 4
3. Ensure the prescriber signs and dates

Fax the completed form and supporting documents to **1-877-558-0007**

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STEP 2

Navigate patient insurance coverage (eg, exceptions, prior authorizations, reauthorizations)

Below is a list of possible criteria that may be required by an insurance plan when prescribing DAWNZERA.
Confirm the required information with the insurance plan, as criteria may vary plan to plan.

Patient information

- ☐ Demographic information
- ☐ Insurance plan information
- ☐ Family history of hereditary angioedema (HAE)
- ☐ Note when patient discontinued or plans to discontinue medications that can trigger HAE (eg, contraceptives)[1]

HAE diagnosis and history

- ☐ **Diagnosis**[1,2]
  - Type I: Documented C1-INH antigenic and serum C4 levels
  - Type II: Documented C1-INH functional levels and serum C4 levels
  - Type III (normal C1-INH levels): Genetic testing results may be required
- ☐ Baseline and current details on the **HAE attack characteristics** below
  - Frequency, severity, duration, and location
  - Number of emergency department visits, hospitalizations, and intubations
- ☐ **HAE medications**
  - Acute (current)
  - Long-term prophylaxis (LTP) (previous and current)
- ☐ Reasons for **discontinuation of previous medications** (eg, number of attacks, adverse events, breakthrough attacks, side effects)
- ☐ (If applicable) Documentation that attacks are **refractory to antihistamines**[1]
- ☐ (If applicable) Confirmation that all other **causes and treatable triggers** of HAE have been identified and managed (eg, infection)[1]

Additional documentation (as needed)

- ☐ Any plan-specific documents/forms
- ☐ Photos of a patient's HAE swells
- ☐ US Prescribing Information
- ☐ Relevant scientific literature supporting treatment
- ☐ Letter of Medical Necessity

Sample Letter of Medical Necessity

Complete online and upload other clinical documentation at DAWNZERAhcp.com/upload

OR

Download at DAWNZERAhcp.com and fax along with other clinical documentation to 1-877-558-0007

Contact Ionis Every Step with any questions about completing or submitting this letter.

Next steps after collecting documentation

- ☐ Send **documentation** to Ionis Every Step for the exception/prior authorization submission package
- ☐ Submit exception/prior authorization submission package to the insurance plan after receipt from Ionis Every Step
- ☐ **If the exception/PA is denied, fax the denial letter to Ionis Every Step at 1-877-558-0007 to initiate support with the appeals process**

Please see Important Safety Information on back and full Prescribing Information for DAWNZERA, also available at DAWNZERAhcp.com.

STEP 3

IONIS EVERY STEP™ SUPPORT SERVICES

Help your patient get DAWNZERA

Keep in mind after the patient consents to Ionis Every Step, the Free Trial dose shipment may be scheduled with the patient, typically within 1 business day.

Remind patients to answer calls from the Ionis Every Step Specialty Pharmacy to confirm shipment of DAWNZERA. Ionis Every Step offers a wide range of support and resources to help meet your patients' needs at each step of their DAWNZERA treatment journey.

For more support, scan the QR code

Call Ionis Every Step at

1-844-444-4305

Monday to Friday, 8 AM to 8 PM ET, for more support

*For eligibility, see terms and conditions at DAWNZERA.com/FreeTrialProgram. May not be billed back to the third-party payer or resold. Participating in the program does not impose an obligation to purchase in the future. Terms and conditions apply. Programs subject to change or discontinue without notice, including in specific states.

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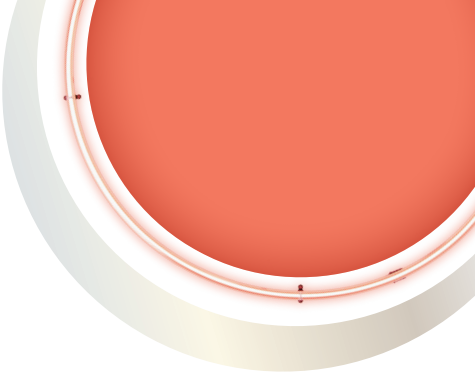

Indication and Important Safety Information

INDICATION

DAWNZERA (donidalorsen) is indicated for prophylaxis to prevent attacks of hereditary angioedema (HAE) in adult and pediatric patients 12 years of age and older.

SELECT IMPORTANT SAFETY INFORMATION

CONTRAINDICATIONS

DAWNZERA is contraindicated in patients with a history of serious hypersensitivity reactions, including anaphylaxis, to donidalorsen or any of the excipients in DAWNZERA.

WARNINGS AND PRECAUTIONS

Hypersensitivity Reactions

Hypersensitivity reactions, including anaphylaxis, have been reported in patients treated with DAWNZERA. If signs and symptoms of serious hypersensitivity reactions occur, discontinue DAWNZERA and institute appropriate therapy.

ADVERSE REACTIONS

Most common adverse reactions (incidence ≥ 5%) are injection site reactions, upper respiratory tract infection, urinary tract infection, and abdominal discomfort.

Please see accompanying full Prescribing Information for DAWNZERA, also available at DAWNZERAhcp.com.

References: 1. Maurer M, Magerl M, Betschel S, et al. The international WAO/EAACI guideline for the management of hereditary angioedema—the 2021 revision and update. *Allergy*. 2022;77(7):1961-1990. doi:10.1111/all.15214. **2.** Miranda AR, Ue AP, Sabbag DV, et al. Hereditary angioedema type III (estrogen-dependent) report of 3 cases and literature review. *An Bras Dermatol*. 2013;88(4):578-584. doi:10.1590/abd1806-4841.201318.18.

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