teva support solutions®

To enrol your patients in the
OCTREOTIDE PATIENT CARE PROGRAM℠
please complete this form and return it to:
Fax: 1.833.377.0557 Phone: 1.877.445.6984
Email: OctreotidePatientCare@teva-canada.com

PATIENT ENROLMENT AND CONSENT FORM

PATIENT INFORMATION

CLEAR SECTION

Last name:		First name:	
Patient health card:	Date of birth: YYYY | MM | DD	Gender: ◯ M ◯ F ◯ Other	
Address:		City:	Province:
Postal code:	Mobile phone number:	Alternate phone number:	Ok to leave VM: ◯ Yes ◯ No
Preferred time to call: ◯ A.M. ◯ P.M.		Email:	
Preferred method of contact: ◯ Phone ◯ Email ◯ Text		Preferred language: ◯ English ◯ French ◯ Other:	

Drug insurance coverage/plan: ◯ Private ◯ Public ◯ Unknown ◯ Drug plan paperwork submitted to payer—Date submitted: YYYY | MM | DD

PATIENT CONSENT

I have read, understand, and agree to the collection, use, and disclosure of my personal information by Teva Support Solutions® in accordance with its privacy policy, which I have had an opportunity to review and which is attached hereto. I expressly consent to the secure storage of my personal information outside Canada, including within the European Union, the USA, or Israel, in accordance with the attached privacy policy.

◯ Written consent Date: YYYY | MM | DD

◯ Verbal consent Date: YYYY | MM | DD

X Patient signature:

X HCP signature:

PRESCRIPTION R_x

[Pr]Octreotide for Injectable Suspension 10 mg, 20 mg or 30 mg Octreotide (as acetate) per vial.

Strength of vial (choose one) ◯ 10 mg ◯ 20 mg ◯ 30 mg Quantity _____

Directions:

INJECTION ADMINISTRATION

[Pr]Octreotide for Injectable Suspension will be administered by a nurse in a clinic setting.

Administration date requested: YYYY | MM | DD

PRESCRIBER INFORMATION

Prescriber consent (not required if enroled at the pharmacy)

I authorize Octreotide Patient Care Program℠ to be my designated agent to forward this prescription by fax or other mode of delivery to the pharmacy chosen by the above-named patient. This prescription represents the original prescription drug order for the patient. Any prior Octreotide prescription for this patient is being cancelled and has been securely filed and will not be transmitted. I confirm that this patient qualifies for treatment of Octreotide, in accordance with the Product Monograph and any contraindications, warnings and precautions described herein.

Last name:	First name:
Licence number:	Work phone:
Office fax:	
Office email:	
Address/clinic stamp:	

X Prescriber Signature

Date: YYYY | MM | DD

To enrol your patients in the **OCTREOTIDE PATIENT CARE PROGRAM℠**, follow these instructions:

1. Download and save the form to your desktop.
2. Complete the form fields and sign.
3. Save the form.

Fax completed form to **1.833.377.0557** or email **OctreotidePatientCare@teva-canada.com**

Octreotide for Injectable Suspension Indications:

Acromegaly: Indicated for acromegalic patients who are adequately controlled with octreotide acetate injection administered subcutaneously, including those in whom surgery, radiotherapy or dopamine agonist treatment is inappropriate or ineffective, or in the interim period until radiotherapy becomes fully effective.

In most patients, octreotide acetate for injectable suspension markedly reduces the clinical symptoms of the disease, such as headache, perspiration, paresthesia, fatigue, osteoarthralagia and carpal tunnel syndrome.

Carcinoid Tumours: Indicated for the treatment of the severe diarrhea and flushing episodes associated with carcinoid tumours in patients in whom symptoms are adequately controlled on subcutaneous treatment with octreotide acetate injection.

Vasoactive Intestinal Peptide Tumours (VIPomas): Indicated for the treatment of the profuse watery diarrhea associated with VIP-secreting tumours in patients in whom symptoms are adequately controlled on subcutaneous treatment with octreotide acetate injection.

In patients with carcinoid syndrome and VIPomas, the effect of octreotide acetate for injectable suspension on tumour size and rate of growth has not been determined. In patients with carcinoid syndrome and VIPomas, the effect of octreotide acetate for injectable suspension on development of metastases has not been determined.

Consult the product monograph for important information on contraindications, warnings, precautions, adverse reactions, interactions, dosing and conditions of clinical use at TevaCanada.com; or by calling 1.800.268.4127 ext. 3; or by email druginfo@tevacanada.com.

HCP: healthcare professional

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PATIENT ENROLMENT AND CONSENT FORM

PRIVACY POLICY FOR THE OCTREOTIDE PATIENT CARE PROGRAM℠ TEVA SUPPORT SOLUTIONS® (TSS)

Teva Support Solutions (TSS) respects your privacy and is strongly committed to protecting your personal information. This privacy policy explains the information we may collect and how we use and safeguard that information. If you have any questions, or if you would like more information about the manner in which we or our authorized service providers treat your personal information, or to access your personal information in our records, do not hesitate to contact us using the information provided below.

Why we ask you for personal information

In order for Teva Support Solutions to offer you the services you require, we may request that you provide us with your personal information, including personal health information, or we may obtain personal information from your referring physician, pharmacist, insurance company, public payer or any other healthcare professional or payer that may possess the requisite information. We will not access, collect, use, or disclose any of your personal information unless you have provided your consent. We will only ask for the personal information necessary to serve you, to comply with our pharmacovigilance commitments and obligations (which may apply even after you leave the TSS Patient Support Program), and to research, develop, and improve our products and services. Some of the services provided by TSS include:

- providing you with personalized services to meet your specific needs;
- determining the suitability of our services for your needs;
- determining your eligibility for our products and services;
- determining eligibility for reimbursement assistance;
- providing you with information about our products and services.

Access and use of information

The personal information you provide will be accessed and used only by TSS, our affiliates and authorized agents, and respective staff members, who are required to maintain the confidentiality of your personal information. By agreeing to provide your information in accordance with the terms of this privacy policy, you are giving your consent for us to disclose relevant information from your file to your referring physician, as well as to our affiliates and authorized third parties who assist us in providing services to you (i.e., only the information required for the execution of the service being required from the third party). Such third parties may include, but are not limited to:

- our healthcare professionals (for providing appointment reminders, coordinating appointments, offering advice about or follow-ups on your therapy);
- our service providers (for therapy coverage);
- our mailing house (responsible for sending printed information and publications); or
- potential payers or reimbursement organizations.

You consent to be contacted by TSS via phone, text or email and to the transfer of personal information by phone, fax or email between TSS, your insurer, and your healthcare provider(s) for the purpose of determining your eligibility for TSS and the delivery of TSS services. Email and text may be used during the course of your participation in TSS to inform you about your status in the TSS program, provide TSS services, and to provide notifications and reminders. You acknowledge that neither email nor text are secure methods of communication. Information in emails and texts has the potential to be accessed and read by a third party. Electronic communication is at your option and you may withdraw this option to communicate electronically at any time.

We may share information with external firms, which would be engaged by us to conduct pharmaceutical market research on our behalf, and which may contact you for the sole purpose of gathering market research information. We may also share information with affiliates and health authorities that collect certain information for the purposes of safety monitoring of marketed products, including information, if applicable, relating to the pregnancy of patients enroled in the TSS Patient Support Program.

Furthermore, your information may also be shared with others if explicitly authorized or required by applicable law. Any information which we might have shared with such third parties will be held on a confidential basis and will only be kept by them for as long as it is reasonably needed for the intended purpose of the services they are providing, after which the data in their possession will be securely destroyed.

At no time and under no circumstance will your information be sold to any third party for any reason. The data contained in your file will only be kept for as long as it is reasonably needed, and it will only be used for the purpose stated in your file. Once the purpose has been achieved, your file will be deleted unless you require further services, or unless we are required to maintain a copy under applicable law.

You may choose to withdraw your consent to our access, collection, use, or disclosure of some or all personal information at any time. However, please understand that your decision may prevent us from providing you with services and information that you request.

Protection

Your information will be stored on a confidential basis at the TSS offices and/or secure locations both inside and outside of Canada, including within the European Union, Israel or the USA. It is a condition of receiving services from TSS that you expressly consent to the secure storage of your personal information outside Canada. It is protected by various physical, technical and administrative security measures such as magnetic locks, data encryption, and a system of individual usernames and passwords for each staff member.

Contact on behalf of another person

Teva Support Solutions must deal directly and exclusively with you; therefore, it is not possible for others to contact TSS on your behalf. If you would like a family member, friend, or anyone else to receive services from us, please give him/her our phone number.

Keeping your information accurate

We are committed to keeping your personal information accurate as long as we need it for the purposes previously described. You play an important role in helping us achieve this goal. You may update your information by contacting us either by phone or email. Your prompt notification of any contact information changes will assist us in providing you with the requested services.

Changes to the privacy policy

TSS reserves the right to change, modify, or amend this policy at any time. However, when a significant change has been made, you will be notified within a reasonable time either by phone, mail, or email.

Teva Support Solutions® Privacy Officer (Generics)
30 Novopharm Court, Toronto, Ontario M1B 2K9, Canada
PrivacyOfficerCanada@tevacanada.com