

This material was developed by Dr. Reddy's Laboratories, as part of the risk minimization plan for Reddy-Lenalidomide and Reddy-Pomalidomide. This material is not intended for promotional use.

Keep a copy of this survey for your records.

Reddy-Lenalidomide RMP Program and Reddy-Pomalidomide RMP Program: PRESCRIBER SURVEY

Prescriber ID: Patient ID: Name of the treatment:

To make these Risk Management Educational Programs more effective, Dr. Reddy's Laboratories Canada Inc. is conducting this survey and your participation is requested:

- i) Have you counseled your patient on the teratogenic effects of their respective treatment (Reddy-Lenalidomide or Reddy-Pomalidomide)?
 - a) Yes
 - b) No
- ii) If this is the initial prescription, have you administered two serum pregnancy tests prior to writing the prescription?
 - a) Yes
 - b) No
 - c) Not Applicable
- iii) Were the results of the pregnancy tests negative?
 - a. Yes
 - b. No
- iv) What was the date of the patient's last negative pregnancy test?
- v) At the time of their initial visit, do you offer your patients a detailed discussion of educational material so that they understand the serious side effects?
 - a) Yes
 - b) No
 - c) I prefer not to answer
- vi) At the time of prescribing Reddy-Lenalidomide or Reddy-Pomalidomide, what teratogenic side effects in particular should you warn your patients about
 - a) Fetal abnormalities
 - b) Spontaneous abortion
 - c) Both of the above
 - d) None of the above
- vii) Prescriptions of Reddy-Lenalidomide or Reddy-Pomalidomide for women of childbearing potential must be:
 - a) Limited to 30 days of treatment
 - b) Limited to 45 days of treatment
 - c) No limitation throughout the course after one negative pregnancy test
 - d) Dispensed within 7 days of the medically supervised negative pregnancy test
 - e) a&d
 - f) c&d



For more information about Reddy-Lenalidomide and Reddy-Pomalidomide, and their respective Risk Management programs, please visit www.reddy2assist.com or call for assistance at 1-877-938-0670.

Return this form completed to Dr. Reddy's Laboratories Canada Inc. via email, fax or mail:

Attn: Reddy2Assist Program 5155 Spectrum Way, Unit 29, Mississauga ON L4W 5A1 Phone: 1-877-938-0670 Fax: 1-877-938-0807

Email: reddy2assist@drreddys.com Website: www.reddy2assist.com

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This Reddy-Lenalidomide RMP Program and Reddy-Pomalidomide RMP Program: PRESCRIBER SURVEY is downloaded from www.reddy2assist.com, where more information about Reddy-Lenalidomide (lenalidomide), and Reddy-Pomalidomide (pomalidomide) and their respective Risk Management Programs can be found.