Truxima®
(rituximab-abbs)
Injection for intravenous use
500 mg/50 mL • 100 mg/10 mL

UNDERSTANDING TREATMENT WITH TRUXIMA

A GUIDE FOR GETTING STARTED

Please see the TRUXIMA full Prescribing Information, including BOXED WARNINGS and Medication Guide.

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GET TO KNOW

TRUXIMA

BEING DIAGNOSED WITH CANCER CAN BE OVERWHELMING. LEARNING MORE ABOUT WHAT CAN BE DONE TO TREAT IT MAY HELP YOU BE PREPARED.

Whether you are getting ready to start treatment for NHL or CLL with TRUXIMA or you are considering it, this guide can help you:

- **GET THE FACTS** about TRUXIMA and how it may help
- **UNDERSTAND** why your doctor may prescribe TRUXIMA
- **LEARN** what to expect from treatment with TRUXIMA
- **FIND OUT** about helpful resources

NHL=non-Hodgkin's lymphoma. CLL=chronic lymphocytic leukemia.

Approved Use

TRUXIMA is a prescription medicine used to treat adults with:

- Non-Hodgkin's Lymphoma (NHL): alone or with other chemotherapy medicines
- Chronic Lymphocytic Leukemia (CLL): with the chemotherapy medicines fludarabine and cyclophosphamide
- Rheumatoid Arthritis (RA): with another prescription medicine called methotrexate, to reduce the signs and symptoms of moderate to severe active RA, after treatment with at least one other medicine called a tumor necrosis factor (TNF) antagonist has been used and did not work well
- Granulomatosis with Polyangiitis (GPA) (Wegener's Granulomatosis) and Microscopic Polyangiitis (MPA): with glucocorticoids, to treat GPA and MPA
- **TRUXIMA is not indicated for treatment of children.**

IMPORTANT SAFETY INFORMATION

TRUXIMA can cause serious side effects that can lead to death, including:

- **Infusion-related reactions.** Infusion-related reactions are very common side effects of TRUXIMA treatment. Serious infusion-related reactions can happen during your infusion or within 24 hours after your infusion of TRUXIMA. Your healthcare provider should give you medicines before your infusion of TRUXIMA to decrease your chance of having a severe infusion-related reaction.

WHAT IS **TRUXIMA® (RITUXIMAB-ABBS) INJECTION?**

TRUXIMA is a prescription drug used in adults to treat NHL or CLL.
TRUXIMA is not chemotherapy, though it is sometimes used with chemotherapy.
See Approved Uses on previous page.

TRUXIMA IS A CD20 ANTIBODY THERAPY USED TO TREAT NHL AND CLL

- CD20 proteins live on the surface of cancer cells and some healthy blood cells.
- CD20 antibodies find and attack cancer cells by targeting and attaching to the CD20 proteins.

TRUXIMA MAY WORK TO TREAT NHL AND CLL IN THE FOLLOWING WAYS:

- By telling the immune system it's okay to destroy cancer cells
- By destroying cancer cells on its own

TRUXIMA may also harm some healthy cells in the body.
Talk to your doctor about any concerns you may have.

BIOLOGICS AND BIOSIMILARS

Biologics are complex drugs produced from living cells.

Biosimilars are FDA-approved biological products that are highly similar and have no clinically meaningful differences from existing FDA-approved biologic drugs.

TRUXIMA is a biosimilar to Rituxan® (rituximab) for NHL and CLL.

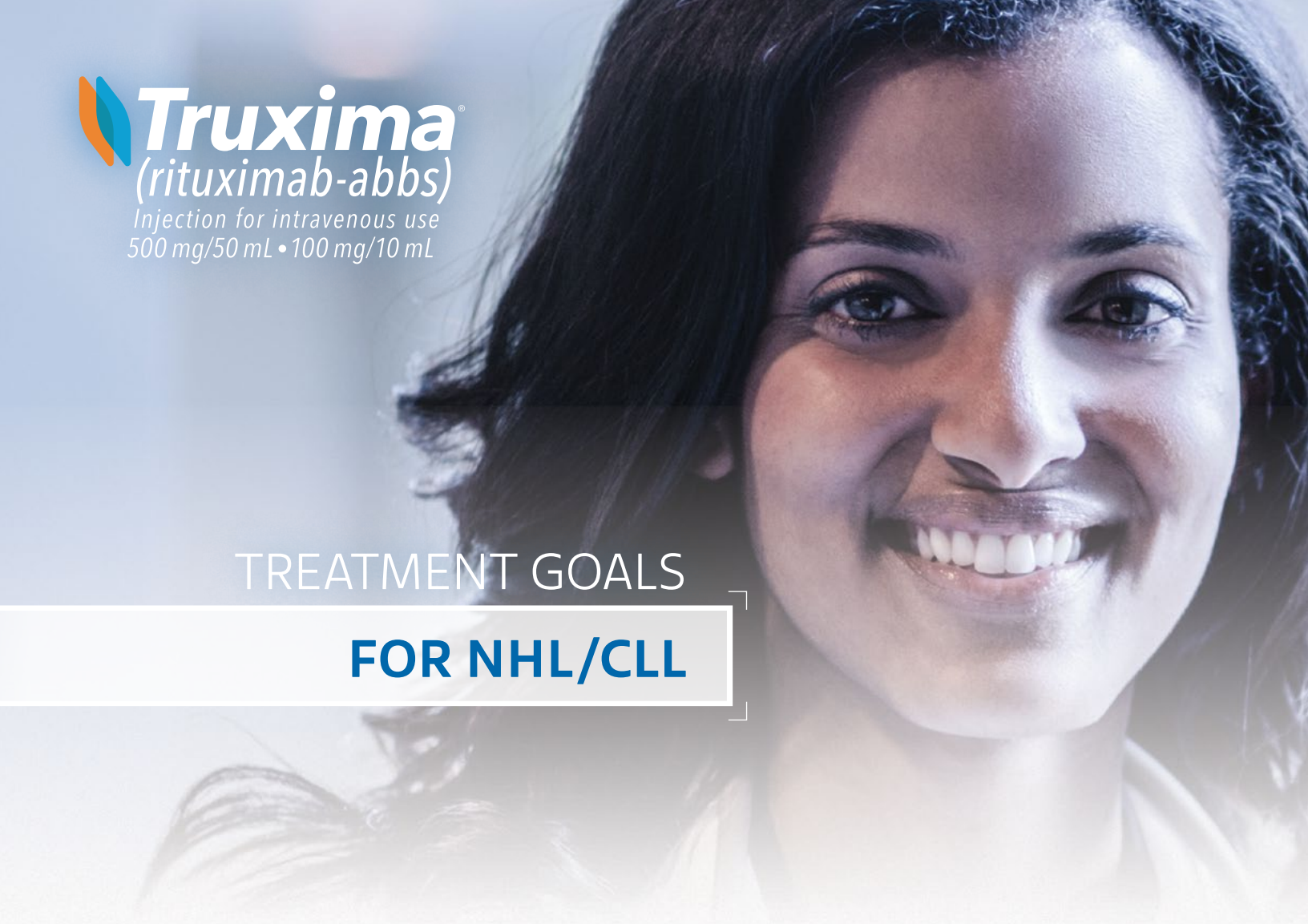
IMPORTANT SAFETY INFORMATION (CONTINUED)

Tell your healthcare provider or get medical help right away if you get any of these symptoms during or after an infusion of TRUXIMA:

- hives (red itchy welts) or rash
- shortness of breath, difficulty breathing or wheezing
- itching
- weakness
- swelling of your lips, tongue, throat, or face
- dizziness or feel faint
- sudden cough
- palpitations (feel like your heart is racing or fluttering)
- chest pain

Please see additional Important Safety Information throughout and the TRUXIMA full Prescribing Information, including BOXED WARNINGS and Medication Guide.

Visit AboutTruxima.com for more information.



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TREATMENT GOALS FOR NHL/CLL

Approved Use

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- Rheumatoid Arthritis (RA): with another prescription medicine called methotrexate, to reduce the signs and symptoms of moderate to severe active RA, after treatment with at least one other medicine called a tumor necrosis factor (TNF) antagonist has been used and did not work well
- Granulomatosis with Polyangiitis (GPA) (Wegener's Granulomatosis) and Microscopic Polyangiitis (MPA): with glucocorticoids, to treat GPA and MPA
- **TRUXIMA is not indicated for treatment of children.**

IMPORTANT SAFETY INFORMATION (CONTINUED)

- **Severe skin and mouth reactions.** Tell your healthcare provider or get medical help right away if you get any of these symptoms at any time during your treatment with TRUXIMA:
  - painful sores or ulcers on your skin, lips, or in your mouth
  - blisters
  - peeling skin
  - rash
  - pustules

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YOUR DOCTOR MAY PRESCRIBE TRUXIMA® (RITUXIMAB-ABBS) INJECTION **TO TREAT YOUR NHL OR CLL**

WHAT IS NON-HODGKIN'S LYMPHOMA (NHL)?

NHL is a cancer of the immune system. NHL occurs in lymphocytes, a type of white blood cell that helps defend your body from infection.

When you have NHL, too many white blood cells build up in your lymph nodes, blood, and bone marrow. They may also build up in your spleen and cause swelling.

There are many different types of NHL, but they are divided into 2 main categories:

- Indolent NHL: slow-growing
  The most common type is follicular lymphoma

- Aggressive NHL: fast-growing
  The most common type is diffuse large B-cell lymphoma (DLBCL)

WHAT IS CHRONIC LYMPHOCYTIC LEUKEMIA (CLL)?

CLL is a type of blood cancer that involves lymphocytes. More people have CLL than any other type of leukemia.

In CLL, abnormal lymphocytes build up in both the blood and bone marrow. These abnormal cells crowd healthy cells over time, resulting in fewer healthy platelets and red and white blood cells. This can lead to excessive bruising and bleeding, anemia, and infection.

Abnormal lymphocytes may also build up in lymph nodes, the liver, or the spleen, leading to swelling of these organs.

IMPORTANT SAFETY INFORMATION (CONTINUED)

- **Hepatitis B virus (HBV) reactivation.** Before you receive your TRUXIMA treatment, your healthcare provider will do blood tests to check for HBV infection. If you have had hepatitis B or are a carrier of hepatitis B virus, receiving TRUXIMA could cause the virus to become an active infection again. Hepatitis B reactivation may cause serious liver problems including liver failure, and death. You should not receive TRUXIMA if you have active hepatitis B liver disease. Your healthcare provider will monitor you for hepatitis B infection during and for several months after you stop receiving TRUXIMA.

  Tell your healthcare provider right away if you get worsening tiredness or yellowing of your skin or white part of your eyes, during treatment with TRUXIMA.

Please see additional Important Safety Information throughout and the TRUXIMA full Prescribing Information, including BOXED WARNINGS and Medication Guide.

Visit AboutTruxima.com for more information.

FIGURING OUT YOUR **TREATMENT PLAN**

You may not have obvious symptoms when you are diagnosed with **NHL** or **CLL**. When this is the case, your doctor may decide to just keep a close eye on your health.

NHL

Indolent NHL may not require immediate treatment, but other types of NHL may require treatment sooner.

NHL can cause many different symptoms depending on where it is in the body.

NHL symptoms can include:

- Enlarged lymph nodes
- Chills/fever
- Weight loss
- Feeling tired
- Swollen belly, feeling full
- Chest pain or pressure
- Shortness of breath or cough
- Infections
- Easy bruising or bleeding

CLL

The stage of CLL is based on how many CLL cells you have and where they are in your body. The stage and the presence of symptoms will help your doctor determine when treatment is necessary.

CLL symptoms can include:

- Weakness/tiredness
- Weight loss
- Chills/fever
- Night sweats
- Swollen lymph nodes (felt as lumps)

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- Granulomatosis with Polyangiitis (GPA) (Wegener's Granulomatosis) and Microscopic Polyangiitis (MPA): with glucocorticoids, to treat GPA and MPA
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GOALS FOR TREATMENT

When treatment is needed, your healthcare team will talk with you about options and come up with a treatment plan that's right for you. Some goals when treating NHL and CLL may be to help:

- Relieve symptoms
- Keep the disease from advancing
- Put the disease into remission

IMPORTANT SAFETY INFORMATION (CONTINUED)

- **Progressive Multifocal Leukoencephalopathy (PML).** PML is a rare, serious brain infection caused by a virus that can happen in people who receive TRUXIMA. People with weakened immune systems can get PML. PML can result in death or severe disability. There is no known treatment, prevention, or cure for PML.

  Tell your healthcare provider right away if you have any new or worsening symptoms or if anyone close to you notices these symptoms:

  – confusion
  – decreased strength or weakness on one side of your body
  – dizziness or loss of balance
  – vision problems
  – difficulty walking or talking

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TREATMENT **OPTIONS**

In NHL or CLL, your doctor may combine 2 types of treatment:

- **ANTIBODY THERAPY**
  Such as TRUXIMA® (rituximab-abbs) injection

and/or

- **CHEMOTHERAPY**
  Your doctor will discuss with you what chemotherapy regimen may be appropriate

Please talk to your doctor about these and other treatment options.

THE APPROPRIATE TREATMENT FOR YOU DEPENDS ON:

- **How fast the cancer is growing**
- **The stage of the cancer**
- **Your personal characteristics**
  such as age and overall health

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- Chronic Lymphocytic Leukemia (CLL): with the chemotherapy medicines fludarabine and cyclophosphamide
- Rheumatoid Arthritis (RA): with another prescription medicine called methotrexate, to reduce the signs and symptoms of moderate to severe active RA, after treatment with at least one other medicine called a tumor necrosis factor (TNF) antagonist has been used and did not work well
- Granulomatosis with Polyangiitis (GPA) (Wegener's Granulomatosis) and Microscopic Polyangiitis (MPA): with glucocorticoids, to treat GPA and MPA
- **TRUXIMA is not indicated for treatment of children.**

IMPORTANT SAFETY INFORMATION (CONTINUED)

Before you receive TRUXIMA, tell your healthcare provider about all of your medical conditions, including if you:

- have had a severe reaction to TRUXIMA or a rituximab product
- have a history of heart problems, irregular heart beat or chest pain
- have lung or kidney problems
- have an infection or weakened immune system
- have or have had any severe infections including:
  - Hepatitis B virus (HBV)
  - Hepatitis C virus (HCV)
  - Cytomegalovirus (CMV)
  - Herpes simplex virus (HSV)
  - Parvovirus B19
  - Varicella zoster virus (chickenpox or shingles)
  - West Nile virus

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IMPORTANT SAFETY INFORMATION (CONTINUED)

- have had a recent vaccination or are scheduled to receive vaccinations. You should not receive certain vaccines before or during treatment with TRUXIMA
- are pregnant or plan to become pregnant. Talk to your healthcare provider about the risks to your unborn baby if you receive TRUXIMA during pregnancy

Females who are able to become pregnant:

– Your healthcare provider should do a pregnancy test to see if you are pregnant before starting TRUXIMA

– You should use effective birth control (contraception) during treatment with TRUXIMA and for **12 months** after your last dose of TRUXIMA. Talk to your healthcare provider about effective birth control

– Tell your healthcare provider right away if you become pregnant or think that you are pregnant during treatment with TRUXIMA

- are breastfeeding or plan to breastfeed. TRUXIMA may pass into your breast milk. Do not breastfeed during treatment and for **6 months** after your last dose of TRUXIMA

Please see additional Important Safety Information throughout and the TRUXIMA full Prescribing Information, including BOXED WARNINGS and Medication Guide.

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STARTING TRUXIMA

STARTING TREATMENT FOR NHL OR CLL CAN LEAVE YOU WONDERING WHAT QUESTIONS TO ASK NEXT. THE INFORMATION IN THIS SECTION MAY HELP YOU GET THE ANSWERS YOU NEED.

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TRUXIMA is a prescription medicine used to treat adults with:

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- Granulomatosis with Polyangiitis (GPA) (Wegener's Granulomatosis) and Microscopic Polyangiitis (MPA): with glucocorticoids, to treat GPA and MPA
- **TRUXIMA is not indicated for treatment of children.**

IMPORTANT SAFETY INFORMATION (CONTINUED)

Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements. Especially tell your doctor if you take or have taken:

- a TNF inhibitor medicine
- a Disease Modifying Anti-Rheumatic Drug (DMARD)

If you are not sure if your medicine is one listed above, ask your healthcare provider.

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WHAT YOU SHOULD TELL YOUR DOCTOR BEFORE STARTING TRUXIMA® (RITUXIMAB-ABBS) INJECTION

Before receiving TRUXIMA tell your doctor if you:

- Have had a severe reaction to TRUXIMA or another rituximab product
- Have a history of heart problems, irregular heart beat, or chest pain
- Have lung or kidney problems
- Have an infection or weakened immune system
- Have or have had any severe infections, including:
  - Hepatitis B virus (HBV)
  - Hepatitis C virus (HCV)
  - Cytomegalovirus (CMV)
  - Herpes simplex virus (HSV)
  - Parvovirus B19
  - Varicella zoster virus (chickenpox or shingles)
  - West Nile virus
- Have had a recent vaccination or are scheduled to receive vaccinations. You should not receive certain vaccines before or during treatment with TRUXIMA
- Are pregnant or planning to become pregnant. Talk to your healthcare provider about the risks to your unborn baby if you receive TRUXIMA during pregnancy. **Females who are able to become pregnant:**
- Your healthcare provider should do a pregnancy test to see if you are pregnant before starting TRUXIMA
- You should use effective birth control (contraception) during treatment with TRUXIMA and for **12 months** after your last dose of TRUXIMA. Talk to your healthcare provider about effective birth control
- Tell your healthcare provider right away if you become pregnant or think that you are pregnant during treatment with TRUXIMA
- Are breastfeeding or plan to breastfeed. TRUXIMA may pass into your breast milk. Do not breastfeed during treatment and for **6 months** after your last dose of TRUXIMA

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

Tell your healthcare provider if you take or have taken:

- A Tumor Necrosis Factor (TNF) inhibitor medicine
- A Disease Modifying Anti-Rheumatic Drug (DMARD)

If you are not sure if your medicine is one listed above, ask your healthcare provider.

IMPORTANT SAFETY INFORMATION (CONTINUED)

TRUXIMA can cause serious side effects, including:

- **Tumor Lysis Syndrome (TLS).** TLS is caused by the fast breakdown of cancer cells. TLS can cause you to have:
  - kidney failure and the need for dialysis treatment
  - abnormal heart rhythm

Please see additional Important Safety Information throughout and the TRUXIMA full Prescribing Information, including BOXED WARNINGS and Medication Guide.

Visit AboutTruxima.com for more information.

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HOW WILL YOU RECEIVE TRUXIMA?

- TRUXIMA is given by infusion through a needle placed in a vein (intravenous infusion) in your arm.
- Talk to your healthcare provider about how you will receive TRUXIMA, such as in a doctor's office or an infusion center.

WILL YOU HAVE TO TAKE ANY MEDICINE BEFORE YOU RECEIVE TRUXIMA?

- Your healthcare provider may prescribe medicines before each infusion of TRUXIMA to reduce infusion side effects such as fever and chills.
- Taking the suggested medication before treatment may reduce the chance of having a severe reaction during the first TRUXIMA infusion.
- Be sure to ask your doctor or nurse about what you should take before TRUXIMA treatment.

IMPORTANT SAFETY INFORMATION (CONTINUED)

TLS (continued)

TLS can happen within 12 to 24 hours after an infusion of TRUXIMA. Your healthcare provider may do blood tests to check you for TLS. Your healthcare provider may give you medicine to help prevent TLS.

Tell your healthcare provider right away if you have any of the following signs or symptoms for TLS:

- nausea
- vomiting
- diarrhea
- lack of energy

HOW WILL YOUR DOCTOR CHECK UP ON YOU DURING TREATMENT?

- Your doctor should do blood tests regularly to check for side effects to TRUXIMA.
- Before each TRUXIMA treatment, your healthcare provider will ask you questions about your general health. Tell your healthcare provider about any new symptoms.

Please see additional Important Safety Information throughout and the TRUXIMA full Prescribing Information, including BOXED WARNINGS and Medication Guide.

Visit AboutTruxima.com for more information.

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HOW CAN YOU GET READY FOR YOUR TRUXIMA® (RITUXIMAB-ABBS) INJECTION INFUSION?

Use this list to help prepare yourself before every infusion:

1 PLAN TRANSPORTATION TO AND FROM YOUR INFUSION APPOINTMENT

You may feel exhausted after your infusion, so having someone else drive you home after treatments is a good idea.

2 BRING SOMETHING TO PASS THE TIME

A day at the clinic can be long. Reading magazines, completing a word search, or enjoying a similar activity can help you occupy the time.

3 BRING FOOD AND BEVERAGES

You may be at the clinic for most of the day, so pack some snacks or a light meal and bring a water bottle.

4 TELL YOUR DOCTOR OR NURSE ABOUT MEDICINES YOU ARE TAKING

If you take any other medicines, tell your doctor or nurse. Do not start any new medications without talking to your doctor. Your doctor may give you special instructions for your infusion day.

5 SPEAK UP

Tell your doctor or nurse about any concerns you have.

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QUESTIONS FOR **YOUR DOCTOR**

IT CAN BE DIFFICULT TO KNOW THE RIGHT QUESTIONS to ask your doctor after being diagnosed with NHL or CLL or being prescribed TRUXIMA. While you may have already talked with your doctor about some of these topics, the questions that follow can be a good way to start or continue conversations with your doctor.

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EXAMPLE QUESTIONS TO ASK YOUR DOCTOR

ABOUT **NHL** and **CLL**:

WHAT STAGE OF NHL/CLL DO I HAVE?

WHAT ARE MY TREATMENT OPTIONS?

WHAT ARE THE POSSIBLE RISKS AND SIDE EFFECTS OF MY NHL/CLL TREATMENT OPTIONS?

WHAT IS MY TREATMENT PLAN?

WHERE CAN I GET MORE INFORMATION ABOUT MY TREATMENT OPTIONS AND NHL OR CLL?

ABOUT **TRUXIMA®** **(RITUXIMAB-ABBS) INJECTION**:

WHY HAVE I BEEN PRESCRIBED TRUXIMA?

WHAT ARE THE SIDE EFFECTS OF TRUXIMA?

WHAT ARE THE POSSIBLE RISKS AND BENEFITS OF TRUXIMA?

HOW LONG WILL I NEED TO TAKE TRUXIMA?

WHICH PROGRAMS CAN HELP ME SAVE ON THE COST OF TRUXIMA?

IMPORTANT SAFETY INFORMATION (CONTINUED)

- **Serious infections.** Serious infections can happen during and after treatment with TRUXIMA, and can lead to death. TRUXIMA can increase your risk of getting infections and can lower the ability of your immune system to fight infections. Types of serious infections that can happen with TRUXIMA include bacterial, fungal, and viral infections. After receiving TRUXIMA, some people have developed low levels of certain antibodies in their blood for a long period of time (longer than 11 months). Some of these people with low antibody levels developed infections. People with serious infections should not receive TRUXIMA. Tell your healthcare provider right away if you have any symptoms of infection:
  - fever
  - cold symptoms, such as runny nose or sore throat that do not go away
  - flu symptoms, such as cough, tiredness, and body aches
  - earache or headache
  - pain during urination
  - cold sores in the mouth or throat
  - cuts, scrapes, or incisions that are red, warm, swollen, or painful

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SUPPORT AND SAVINGS FOR TRUXIMA

TEVA SHARED SOLUTIONS® FOR BIOSIMILARS CAN HELP YOU GET STARTED

IMPORTANT SAFETY INFORMATION (CONTINUED)

- **Heart problems.** TRUXIMA may cause chest pain, irregular heartbeats, and heart attack. Your healthcare provider may monitor your heart during and after treatment with TRUXIMA if you have symptoms of heart problems or have a history of heart problems. Tell your healthcare provider right away if you have chest pain or irregular heartbeats during treatment with TRUXIMA.
- **Kidney problems,** especially if you are receiving TRUXIMA for NHL. TRUXIMA can cause severe kidney problems that lead to death. Your healthcare provider should do blood tests to check how well your kidneys are working.
- **Stomach and serious bowel problems that can sometimes lead to death.** Bowel problems, including blockage or tears in the bowel, can happen if you receive TRUXIMA with chemotherapy medicines. Tell your healthcare provider right away if you have any severe stomach-area (abdomen) pain or repeated vomiting during treatment with TRUXIMA.

HAVING AN ILLNESS IS HARD.

Figuring out insurance benefits and financial assistance can make it harder. With Teva **Shared Solutions® for Biosimilars**, we can help you understand your insurance benefits and may help you find financial assistance for your treatment.

IMPORTANT SAFETY INFORMATION (CONTINUED)

Your healthcare provider will stop treatment with TRUXIMA if you have severe, serious, or life-threatening side effects.

The most common side effects of TRUXIMA include:

– infusion-related reactions
– infections (may include fever, chills)
– body aches
– tiredness
– nausea

The most common side effects of TRUXIMA in adults with GPA or MPA include:

– low white and red blood cells
– swelling
– diarrhea
– muscle spasms

Other side effects with TRUXIMA include:

– aching joints during or within hours of receiving an infusion
– more frequent upper respiratory tract infection

These are not all of the possible side effects with TRUXIMA.

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teva | Shared Solutions for Biosimilars

- Benefits verification and coverage determination
- Support for prior authorization

Eligible patients pay as little as $0

TERMS AND CONDITIONS

The Cost Support Program for TRUXIMA® (rituximab-abbs) injection (the "Program") helps commercially insured patients in the United States (including the United States territories) who are prescribed TRUXIMA for covered indications pay for their eligible out-of-pocket costs. Terms may vary by indication. See complete Terms and Conditions below. Eligible patients must have commercial insurance coverage for TRUXIMA. Uninsured and cash-paying patients are NOT eligible for the Program. Patients enrolled in any state or federally funded healthcare program are NOT eligible for the Program, nor are patients with commercial insurance coverage that does not provide coverage for TRUXIMA. Call for more information: 1-888-587-3263.

See full Oncology Terms and Conditions for eligibility and restrictions.

SEE IF YOU ARE ELIGIBLE TO SAVE ON TRUXIMA.

To learn more

CALL

1-888-587-3263

Monday–Friday, 9 AM–7 PM (ET)

or VISIT

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HELPFUL **RESOURCES**

CANCER ORGANIZATIONS

AMERICAN CANCER SOCIETY
1-800-ACS-2345 (1-800-227-2345)
www.cancer.org

CANCER*CARE*
1-800-813-HOPE (1-800-813-4673)
www.cancercare.org

NATIONAL CANCER INSTITUTE
1-800-4-CANCER (1-800-422-6237)
www.cancer.gov

LYMPHOMA/LEUKEMIA ORGANIZATIONS

THE LEUKEMIA & LYMPHOMA SOCIETY
1-800-955-4572
www.lls.org

LYMPHOMA RESEARCH FOUNDATION
1-800-500-9976
www.lymphoma.org

SUPPORT ORGANIZATIONS

CANCER HOPE NETWORK
1-877-HOPENET (1-877-467-3638)
www.cancerhopenetwork.org

PATIENT ADVOCATE FOUNDATION
1-800-532-5274
www.patientadvocate.org

This is a list of sources that you may find helpful. Please note that this information was accurate at the time of publication, but is subject to change without notice. Ask your healthcare team to recommend additional resources.

IMPORTANT SAFETY INFORMATION (CONTINUED)

Call your doctor for medical advice about side effects.

You may report side effects to FDA at 1-800-FDA-1088. You may also report side effects to Teva at 1-888-483-8279.

This information does not take the place of talking with your doctor for medical advice about your condition or treatment.

Please see additional Important Safety Information throughout and the TRUXIMA full Prescribing Information, including BOXED WARNINGS and Medication Guide.

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YOUR GUIDE TO **TREATMENT WITH TRUXIMA**

THIS BROCHURE CONTAINS IMPORTANT INFORMATION FOR YOUR TREATMENT.

Be sure to check out AboutTruxima.com for potential savings on TRUXIMA.

IMPORTANT SAFETY INFORMATION

TRUXIMA can cause serious side effects that can lead to death, including:

- **Infusion-related reactions.** Infusion-related reactions are very common side effects of TRUXIMA treatment. Serious infusion-related reactions can happen during your infusion or within 24 hours after your infusion of TRUXIMA. Your healthcare provider should give you medicines before your infusion of TRUXIMA to decrease your chance of having a severe infusion-related reaction.

Please see additional Important Safety Information throughout and the TRUXIMA full Prescribing Information, including BOXED WARNINGS and Medication Guide.

Models appearing in all images within this brochure depict an actor portrayal.

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