Feraheme®
ferumoxytol injection

Dear Radiologist:

Feraheme® (ferumoxytol injection) is indicated for the treatment of iron deficiency anemia (IDA) in adult patients who have intolerance to oral iron or have had unsatisfactory response to oral iron or who have chronic kidney disease (CKD).

When scheduling and reviewing images of patients who have received Feraheme, please be aware that Feraheme is a superparamagnetic iron oxide. Administration of Feraheme may transiently affect the diagnostic ability of magnetic resonance (MR) imaging. If possible, conduct anticipated MR imaging studies prior to the administration of Feraheme. Alteration of MR imaging studies may persist for up to 3 months following the last Feraheme dose[1].

If MR imaging is required within 3 months after Feraheme administration:

- **Use T1- or proton density-weighted MR pulse sequences to minimize the Feraheme effects.**
- **MR imaging using T2-weighted pulse sequences should not be performed earlier than 4 weeks after the administration of Feraheme.**
- **Maximum alteration of vascular MR imaging is anticipated to be evident for 1 – 2 days following Feraheme administration[1].**

Feraheme will not interfere with X-ray, computed tomography (CT), positron emission tomography (PET), single photon emission computed tomography (SPECT), ultrasound or nuclear medicine imaging[1].

For additional information, please contact AMAG Pharmaceuticals, Inc. at **+1-877-411-2510** or **medinfoUS@covispharma.com**.

Feraheme® (ferumoxytol injection) Important Safety Information

WARNING: RISK FOR SERIOUS HYPERSENSITIVITY/ANAPHYLAXIS REACTIONS

Fatal and serious hypersensitivity reactions including anaphylaxis have occurred in patients receiving Feraheme. Initial symptoms may include hypotension, syncope, unresponsiveness, cardiac/cardiorespiratory arrest.

- **Only administer Feraheme as an intravenous infusion over at least 15 minutes and only when personnel and therapies are immediately available for the treatment of anaphylaxis and other hypersensitivity reactions.**
- **Observe for signs or symptoms of hypersensitivity reactions during and for at least 30 minutes following Feraheme infusion including monitoring of blood pressure and pulse during and after Feraheme administration.**
- **Hypersensitivity reactions have occurred in patients in whom a previous Feraheme dose was tolerated.**

Please see additional Important Safety Information on back and accompanying full Prescribing Information.

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Contraindications

Feraheme is contraindicated in patients with known hypersensitivity to Feraheme or any of its components or a history of allergic reaction to any intravenous iron product.

Warnings and Precautions

Hypersensitivity: In addition to the fatal and serious adverse reactions in the Boxed Warning, other adverse reactions associated with hypersensitivity have occurred (pruritis, rash, urticaria, and wheezing). Allergic reactions have occurred following the first dose or subsequent doses in patients in whom a previous dose was tolerated. Patients with a history of multiple drug allergies may have a greater risk of anaphylaxis with parenteral iron products. Carefully consider the potential risks and benefits before administering Feraheme to these patients. Elderly patients with multiple or serious co-morbidities who experience hypersensitivity reactions and/or hypotension following administration of Feraheme may have more severe outcomes.

Hypotension: Feraheme may cause clinically significant hypotension. Monitor patients for signs and symptoms of hypotension following each Feraheme administration.

Iron Overload: Excessive therapy with parenteral iron can lead to excess storage of iron with the possibility of iatrogenic hemosiderosis. Regularly monitor the hematologic response during parenteral iron therapy. Do not administer Feraheme to patients with iron overload.

Magnetic Resonance (MR) Imaging Test Interference: Administration of Feraheme may transiently affect the diagnostic ability of MR imaging. Alteration of MR imaging studies may persist for up to 3 months following the last Feraheme dose. Maximum alteration of vascular MR imaging is anticipated to be evident for 1 – 2 days following Feraheme administration.

Adverse Reactions

The most common adverse reactions (≥ 2%) are diarrhea, headache, nausea, dizziness, hypotension, constipation, and peripheral edema.

Please see additional Important Safety Information on reverse and accompanying full Prescribing Information, including Boxed Warning, also available at www.Feraheme.com.

Reference: 1. Feraheme [prescribing information]. AMAG Pharmaceuticals, Inc.; 6.2022 PI.

amag PHARMACEUTICALS

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Full Prescribing Information
attached here.
If missing, please visit
www.Feraheme.com