



Patient Alert Card

Keep this card with you at all times
Present this card to every physician or dentist prior to treatment

What should I know about Banoriy®?

- Banoriv® thins the blood, which prevents you from getting dangerous blood clots.
- Banoriv® must be taken exactly as prescribed by your doctor. To ensure optimal protection from blood clots, never skip a dose.
 You must not stop taking Papariv® without first talking to your doctor as your rick of blood.
- You must not stop taking Banoriv® without first talking to your doctor as your risk of blood clots may increase.
- Tell your health care provider about any other medicines you are currently taking, took recently
 or intend to start taking Banoriv® before any surgery or invasive procedure.

When should I seek advice from my health care provider?

When taking a blood thinner such as Banoriv® it is important to be aware of its possible side effects. Bleeding is the most common side effect. Do not start taking Banoriv® if you know you are at risk of bleeding, without first discussing this with your doctor. You should contact your





doctor immediately if you experience any signs or symptoms of bleeding such as the following:

- Pain
- Swelling
- Headache or dizziness
- Unusual bruising, nose bleeding, bleeding in the gum, cuts that take a long time to stop bleeding
- Heavy menstrual bleeding that is heavier than normal
- Blood in your urine
- Coughing up blood

How do I take Banoriv®?

To ensure optimal protection, Banoriv®

- Banoriv® 2.5 mg can be taken with or without food
- Banoriv® 10 mg can be taken with or without food
- Banoriv® 15 mg can be taken with food
- Banoriv® 20 mg can be taken with food







Reporting of Side effects: If you get any side effects, talk to your doctor, pharmacist or nurse. Adverse events can also be reported to:

- SFDA-National Pharmacovigilance and Drug Safety Center
 - Email: npc.drug@sfda.gov.sa
 - Website: http://ade.sfda.gov.sa
 - Unified number: 19999
- SPIMACO Company
 - Email: GPV@spimaco.sa
 - Tel: +966 11 2523393

I am under anticoagulation tre	atment with Banoriv®
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Name of the patient:		
Address:		
Birthday:		
Weight:		
Other Medicine / Condition:	 	



In case of emergen														
Doctor's name:	 	 	 	 	 	 _		 		 	 		 	
Doctor's phone:	 	 	 	 	 	 		 _		 	 		 	_
Please also notify:														
Name:	 	 	 	 	 	 		 			 		 	_
Phone:	 	 	 	 	 	 	_	 	_	 	 	_	 	_
Relationship:	 	 	 	 	 	 	_	 		 	 		 	_

Information for Healthcare providers:

• INR values should not be used as they are not dependable measure of the anticoagulant activity of Banoriv®

*This document has been reviewed and approved by the Saudi Food and Drug Authority (SFDA). Version 1- Dec.2021

