

INHALED TREPROSTINIL Treatment Tracker



Stay in step with
your treatments

BREATHE IN

Here's a simple method for staying on top of your treatments

Whether you're just beginning your journey with Inhaled Treprostinil or have been taking it for a while, recording your treatment schedule can help you stay on track.

Think of this booklet as a journal for tracking doses and capturing notes. Be sure to bring it with you to medical appointments. Your doctor may want to review it with you, and you can share any questions you might have.

This document is approved by The Executive Directorate of Pharmacovigilance at Saudi Food and Drug Authority. Version no.00, approval date: May 2025.

DAILY DOSING ROUTINE

Take Inhaled Treprostinil 4x daily

It is important to take your medication as prescribed by your doctor. If a scheduled treatment session is missed or interrupted, therapy should be resumed as soon as possible at the usual dose. Since the device is cordless, you can use it at home or on the go.

A simple way to remember: count to 4 and add 1 more

- 1** Set up device **1x each morning**
- 2-3** Each treatment session takes about **2 to 3 minutes**
- 4** Take Treprostinil **4x daily** during waking hours
- +1** Clean device **1x each night**

Inhaled Treprostinil fits into your daily routine

It is important that you take your medication 4x daily in order to get the full benefit. Treatment sessions should be approximately every 4 waking hours and can be adjusted for planned activities. Working the doses into your routine can help you get used to your treatment schedule.



Waking



Lunch



Dinner



Bedtime

UNDERSTANDING TITRATION

Reaching your target maintenance dose

If you are just starting your treatment, your doctor will work with you to increase the number of breaths per treatment session until you reach your target dose, a process called “titration.” It’s important that you reach your target maintenance dose so that you can get the full benefit of the medicine.



IMPORTANT THINGS TO REMEMBER

- As you increase your breaths each week, you may experience side effects
- Talk to your nurse or doctor to help you manage side effects so that you can reach the target maintenance dose
- **DO NOT STOP** taking Inhaled Treprostinil without talking to your healthcare provider

HOW TO USE YOUR TRACKER

Use the tracker to record the day, time, and number of breaths you take for each treatment session. You may find it helpful to keep track with tally marks as you go along. Remember, your doctor will work with you to increase the number of breaths per session until you reach the target maintenance dose.

Example Tracker

1

2

3

4

5

Today, Monday, 11/23, I'm taking 5 breaths per treatment session.

Time	1 <u>8:15 AM</u>	2 <u>12:08 PM</u>	3 <u>4:00 PM</u>	4 <u>8:10 PM</u>
Breaths completed	<u> </u>	<u> </u>	<u> </u>	<u> </u>
Questions and notes				

- 1
- Note the day of the week and calendar date
- 2
- Write down the prescribed number of breaths per treatment session as instructed by your doctor
- 3
- Record the times of your treatment sessions, which should be about 4 hours apart and can be adjusted for planned activities
- 4
- Keep track of the number of breaths you complete
- 5
- Capture any thoughts or questions you'd like to remember to bring up with your doctor

You can find space for additional notes at the end of this booklet.

WEEK 1

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

WEEK 2

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

WEEK 3

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

WEEK 4

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

WEEK 5

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

Today, _____, I'm taking _____ breaths per treatment session.

Time	1	2	3	4
Breaths completed				
Questions and notes				

Notes

[illegible]

Notes

[illegible]

Stay in step with your **INHALED TREPROSTINIL** Treatment Tracker

Turn your treatment schedule into a simple routine

- ✓ **Record and refer back to your doctor's instructions for each week**
- ✓ **Ensure you complete all 4 daily treatment sessions per your doctor's recommended schedule**
- ✓ **Keep track of the total number of breaths you take during each treatment session**
- ✓ **Write down notes and questions to bring up with your doctor**

ONGOING SUPPORT

Questions? Reach out to your nurse at your doctor's office or your Specialty Pharmacy nurse for assistance.

**For additional information ,please contact us via email:
PSP@biologixpharma.com**

Please report any adverse reactions to
The National Pharmacovigilance Centre (NPC), SFDA:

- SFDA Call Center: 19999
- E-mail: npc.drug@sfda.gov.sa
- Fax: +966-11-205-7662

• Website:



Or

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