

## EPIPEN 2-PAK® EPIPEN Jr 2-PAK®

(Epinephrine) Auto-Injectors 0.3/0.15mg

### WEEKENDS HAPPEN. Be Prepared.

#### BEING PREPARED MEANS HAVING A PLAN TO:

- Avoid known allergens
- Know what symptoms to watch for
- Use an EpiPen® (epinephrine) Auto-Injector if a life-threatening (severe) allergic reaction occurs
- Get emergency medical help right away

#### SPECIAL OFFER COUPON:

Eligible patients can get up to 6 EpiPen Auto-Injectors for free! Restrictions apply.\* See details and terms and conditions below.

### LIFE HAPPENS. Be Prepared.™

ASK YOUR HEALTH CARE PROFESSIONAL IF EPIPEN AUTO-INJECTORS SHOULD BE PART OF YOUR PLAN.

#### INDICATIONS

EpiPen® (epinephrine) 0.3 mg and EpiPen Jr® (epinephrine) 0.15 mg Auto-Injectors are for the emergency treatment of life-threatening allergic reactions (anaphylaxis) caused by allergens, exercise, or unknown triggers; and for people who are at increased risk for these reactions. EpiPen and EpiPen Jr are intended for immediate self administration as emergency supportive therapy only. Seek immediate emergency medical treatment after use.

#### IMPORTANT SAFETY INFORMATION

EpiPen Auto-Injectors contain a single dose of epinephrine, which you inject into your outer thigh. **DO NOT INJECT INTO YOUR VEIN, BUTTOCK, FINGERS, TOES, HANDS OR FEET.** In case of accidental injection, please seek immediate medical treatment. Epinephrine should be used with caution if you have heart disease or are taking certain medicines that can cause heart-related (cardiac) symptoms.

Tell your doctor if you have certain medical conditions such as asthma, depression, thyroid disease, Parkinson's disease, diabetes, high blood pressure and heart disease, have any other medical conditions, are pregnant or plan to become pregnant, or

#### IMPORTANT SAFETY INFORMATION

(continued)

are breastfeeding or plan to breastfeed. Be sure to also tell your doctor all the medicines you take, especially medicines for asthma.

**If you have certain medical conditions, or take certain medicines, your condition may get worse or you may have longer lasting side effects when you take the EpiPen or EpiPen Jr Auto Injector.**

The most common side effects may include increase in heart rate, stronger or irregular heartbeat, sweating, nausea and vomiting, difficulty breathing, paleness, dizziness, weakness or shakiness, headache, apprehension, nervousness or anxiety. These side effects usually go away quickly, especially if you rest.

Talk to your health care professional to see if EpiPen or EpiPen Jr Auto-Injector is right for you.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit [www.fda.gov/medwatch](http://www.fda.gov/medwatch) or call 1-800-FDA-1088.

For additional information please contact us at 800-395-3376.

**Please see Brief Summary of full Prescribing Information on the adjacent page**

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THE EPIPEN® (EPINEPHRINE) AUTO-INJECTOR  
\$0 CO-PAY OFFER. Tear and present at the pharmacy  
when you drop off or refill your prescription.\*



Emdeon  
Therapy First Plus

Up to three EpiPen 2-Pak cartons  
per prescription fill.

BIN# 004682  
PCN# CN  
GRP# EC35003016  
ID# 18719237212

\*Valid towards out-of-pocket expenses, for patients with eligible third party insurance and patients with no prescription coverage. Maximum benefit of \$100 per EpiPen 2-Pak carton where applicable. Please see reverse side for complete terms and conditions.

#### EpiPen Co-pay Card Terms and Conditions

**Patient instructions\*:** Present your card along with a valid prescription for the EpiPen 2-Pak® or EpiPen Jr 2-Pak®. Maximum benefit of \$100 per EpiPen 2-Pak where applicable. This offer may be used on up to three EpiPen 2-Pak cartons per prescription. This offer can be used an unlimited number of times until the offer expires on 12/31/2014. Patients with questions should call 1-855-859-2971.

**Pharmacist instructions for a patient with an Eligible Third Party Payer:** Submit the claim to the primary Third Party Payer first and then submit the balance due to Therapy First Plus as a Secondary Payer coordination of benefits with patient responsibility amount and a valid Other Coverage Code (e.g., 8). Maximum benefit of \$100 per EpiPen 2-Pak where applicable. The card pays up to \$100 per each EpiPen 2-Pak and the patient is responsible for the balance. Reimbursement will be received from Therapy First Plus.

**Pharmacist instructions for a cash paying patient:** Submit the claim to Therapy First Plus. A valid Other Coverage Code (e.g., 1) is required. Maximum benefit of \$100 per EpiPen 2-Pak where applicable. Reimbursement will be received from Therapy First Plus.

**Valid Other Coverage Code required:** For any questions regarding Therapy First Plus online processing, please call the Help Desk at 1-800-422-5604.

\*This offer is not available to patients who are in Medicare, Medicaid, TRICARE or any other federal or state health care plan. The card is not transferable and the amount of the rebate cannot exceed the patient's out-of-pocket expenses. Program expires 12/31/2014. Program managed by PSKW, LLC on behalf of Mylan Specialty L.P. Product dispensed pursuant to program rules and federal and state laws. Void where prohibited. The parties reserve the right to amend or end this program at any time without notice. This is not an insurance card.



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