THE PALFORZIA REMS OVERVIEW

PALFORZIA is available only through the PALFORZIA REMS (Risk Evaluation and Mitigation Strategy)—a restricted program. Only prescribers, healthcare settings, pharmacies, and patients enrolled in the program can prescribe, administer, dispense, and receive PALFORZIA.

INDICATION

PALFORZIA is an oral immunotherapy indicated for the mitigation of allergic reactions, including anaphylaxis, that may occur with accidental exposure to peanut. PALFORZIA is approved for use in patients with a confirmed diagnosis of peanut allergy. Initial Dose Escalation may be administered to patients aged 4 through 17 years. Up-Dosing and Maintenance may be continued in patients 4 years of age and older.

PALFORZIA is to be used in conjunction with a peanut-avoidant diet.

Limitation of Use: Not indicated for the emergency treatment of allergic reactions, including anaphylaxis.

IMPORTANT SAFETY INFORMATION

WARNING: ANAPHYLAXIS

- **PALFORZIA can cause anaphylaxis, which may be life threatening and can occur at any time during PALFORZIA therapy.**
- **Prescribe injectable epinephrine, instruct and train patients on its appropriate use, and instruct patients to seek immediate medical care upon its use.**
- **Do not administer PALFORZIA to patients with uncontrolled asthma.**
- **Dose modifications may be necessary following an anaphylactic reaction.**
- **Observe patients during and after administration of the Initial Dose Escalation and the first dose of each Up-Dosing level, for at least 60 minutes.**
- **PALFORZIA is available only through a restricted program called the PALFORZIA REMS.**

Please see additional Important Safety Information on back cover.

Please see accompanying full Prescribing Information, including Boxed WARNING, and Medication Guide included in this Resource Kit.

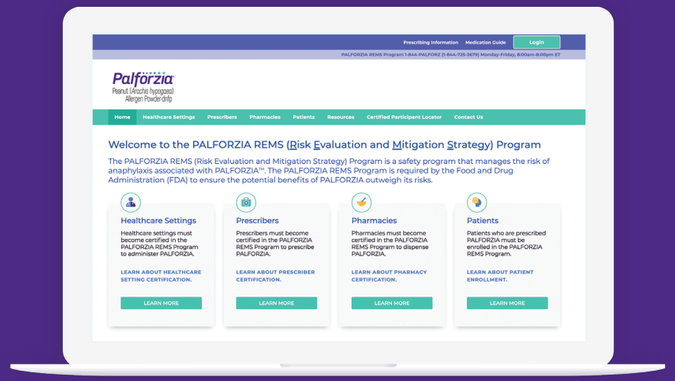
Palforzia®
Peanut (*Arachis hypogaea*) Allergen Powder-dnfp

REMS HELPS MITIGATE RISK OF ANAPHYLAXIS FOR PATIENTS

What is a REMS?

A Risk Evaluation and Mitigation Strategy (REMS) is a drug safety program that the U.S. Food and Drug Administration (FDA) can require for certain medications with serious safety concerns to help ensure the benefits of the medication outweigh its risks.

PALFORZIA is only available through the PALFORZIA REMS.



The goal of the PALFORZIA REMS

The goal of the PALFORZIA REMS is to mitigate the risk of anaphylaxis associated with PALFORZIA by:

Ensuring that healthcare providers who prescribe and healthcare settings that dispense and administer PALFORZIA are educated on the following:

- The risk of anaphylaxis associated with the use of PALFORZIA
- The Initial Dose Escalation and first dose of each Up-Dosing level must only be administered to patients in a healthcare setting equipped to monitor patients, and to identify and manage anaphylaxis

Ensuring that the Initial Dose Escalation and the first dose of each Up-Dosing level of PALFORZIA are only dispensed and distributed to certified healthcare settings and only administered to patients in certified healthcare settings.

Ensuring that PALFORZIA is only dispensed and administered to patients who are informed—by enrolling in the PALFORZIA REMS—of the need to have injectable epinephrine available for immediate use at all times, the need for monitoring with the Initial Dose Escalation and first dose of each Up-Dosing level, the need for continued dietary peanut avoidance, and how to recognize signs and symptoms of anaphylaxis.

Adherence to the PALFORZIA REMS

To remain adherent to the PALFORZIA REMS and support patient safety, certain activities are only required once, while others are recurring.

One-Time Activities

- Healthcare Setting Certification
- Prescriber Certification

Activity Completed at Every New Start

- Individual Patient Enrollment

Ongoing Activity

- Maintain compliance with REMS requirements

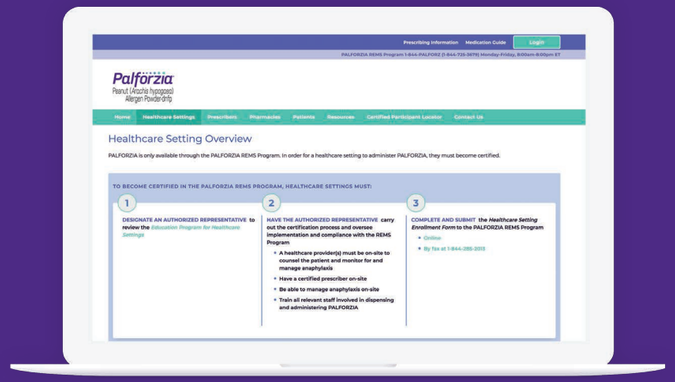
A healthcare setting may consist of a large institution that certifies in the PALFORZIA REMS as one entity, or may just be your office.

Please see Important Safety Information on front and back covers.

Please see accompanying full Prescribing Information, including Boxed WARNING, and Medication Guide included in this Resource Kit.

Palforzia®
Peanut (*Arachis hypogaea*)
Allergen Powder-dnfp

HEALTHCARE SETTING ENROLLMENT



Healthcare setting instructions

To become certified in the PALFORZIA REMS and administer PALFORZIA, a healthcare setting must designate an authorized representative to:

1. Review the *Education Program for Healthcare Settings*
2. Carry out the certification process and oversee implementation and compliance with the PALFORZIA REMS on behalf of the healthcare setting
3. Complete and submit the *Healthcare Setting Enrollment Form* online at www.PALFORZIAREMS.com or by fax to 1-844-285-2013
   - Complete all mandatory fields on this form to avoid a delay in the enrollment process. Upon completion of these steps, the PALFORZIA REMS will notify the healthcare setting of successful certification within 2 business days

Healthcare setting authorized representative agreement

The healthcare setting authorized representative will:

- Oversee implementation of and ensure their healthcare setting's compliance with the PALFORZIA REMS requirements
- Review the *Education Program for Healthcare Settings*
- Have a certified prescriber on site
- Have healthcare provider(s) on site to counsel each patient, and monitor for and manage anaphylaxis
- Be able to manage anaphylaxis on site

Healthcare setting authorized representative agreement (continued)

The healthcare setting authorized representative will:

- Train all relevant staff involved in dispensing and administering PALFORZIA, and establish processes and procedures to ensure that the following take place in their healthcare setting

Before treatment initiation (first dose):
- Verify the Initial Dose Escalation is for the enrolled patient

During treatment before dispensing the first dose of each Up-Dosing level:
- Verify the Initial Dose Escalation is for the enrolled patient
- Verify that the patient is enrolled in the PALFORZIA REMS
- Have a healthcare provider counsel the patient on the need to be monitored for anaphylaxis
- Verify that the dose, as determined by the certified prescriber, is dispensed from the Office Dose Kit
- Verify that the patient has injectable epinephrine

During and after administering the Initial Dose Escalation and the first dose of each Up-Dosing level:
- Assess the patient for anaphylaxis for at least 60 minutes

During treatment before dispensing a Daily Dose Pack directly to the patient for home use:
- Verify the patient was monitored and previously tolerated the first dose of the Up-Dosing level

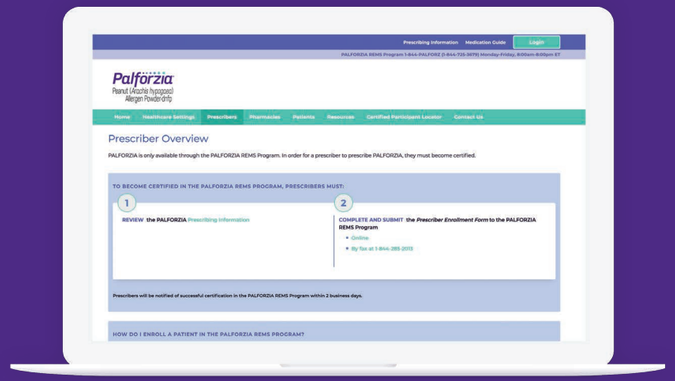
At all times:
- Report anaphylaxis including suspected cases managed as anaphylaxis to the REMS Program using the *Anaphylaxis Adverse Event Reporting Form*
- Have any new authorized representative enroll in the PALFORZIA REMS by completing the *Healthcare Setting Enrollment Form*
- Only use patient-specific Initial Dose Escalation and Daily Dose Packs for the intended patient
- Maintain records of dispensing and that all processes and procedures are in place and are being followed
- Comply with audits carried out by Aimmune Therapeutics, Inc., or a third party acting on behalf of Aimmune Therapeutics, Inc., to ensure that all processes and procedures are in place and are being followed
- *Do not* distribute, transfer, loan, or sell PALFORZIA

Please see Important Safety Information on front and back covers.

Please see accompanying full Prescribing Information, including Boxed WARNING, and Medication Guide included in this Resource Kit.

Palforzia®
Peanut (*Arachis hypogaea*) Allergen Powder-dnfp

PRESCRIBER ENROLLMENT



Prescriber instructions

1. Review the PALFORZIA full Prescribing Information (PI)
2. Complete and submit the *Prescriber Enrollment Form* online or by fax to 1-844-285-2013
   - Complete all mandatory fields on this form to avoid delay in the enrollment process. Upon completion of these steps, the PALFORZIA REMS will notify the prescriber of successful certification within 2 business days

Each prescriber must have a National Provider Identifier (NPI) to enroll in the PALFORZIA REMS.

Prescriber agreement

The prescriber agrees to comply with the following REMS requirements:

- Review the PALFORZIA full Prescribing Information

Before treatment initiation, to prescribe PALFORZIA to a patient, the prescriber will:

- Enroll each patient in the PALFORZIA REMS by completing and submitting the *Patient Enrollment Form* and provide a completed copy of the form to the patient
- Counsel the patient on the need to have injectable epinephrine available for immediate use at all times, the need for monitoring with the Initial Dose Escalation and first dose of each Up-Dosing level, the need for continued peanut avoidance in the diet, and how to recognize the signs and symptoms of anaphylaxis
- Assess the patient's supply of injectable epinephrine and provide prescription if necessary

During treatment before dispensing the first dose of each Up-Dosing level:

- Assess the patient's tolerability of the previous dosing level and appropriateness of continuing the Up-Dosing

During treatment, before prescribing a Daily Dose Pack to be dispensed from a certified pharmacy to a patient for home use:

- Verify the patient was monitored and previously tolerated the first dose of the Up-Dosing level

During treatment, before dispensing a Daily Dose Pack directly from the healthcare setting to the patient for home use:

- Verify the patient was monitored and previously tolerated the first dose of the Up-Dosing level

Report anaphylaxis including suspected cases managed as anaphylaxis to the REMS Program using the *Anaphylaxis Adverse Event Reporting Form*

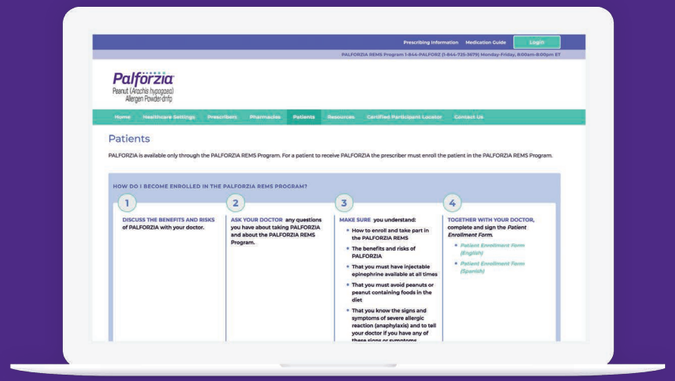
Report treatment discontinuation or transfer of care to the REMS Program

Please see Important Safety Information on front and back covers.

Please see accompanying full Prescribing Information, including Boxed WARNING, and Medication Guide included in this Resource Kit.

Palforzia®
Peanut (*Arachis hypogaea*)
Allergen Powder-dnfp

PATIENT ENROLLMENT



Prescriber instructions

1. Review the Patient Enrollment Form with the patient or parent/guardian and answer any questions the patient or parent/guardian has about PALFORZIA
2. Complete and submit the Patient Enrollment Form online at www.PALFORZIAREMS.com or by fax to 1-844-285-2013
   - Complete all mandatory fields on this form to avoid a delay in the enrollment process. Upon completion of the form, the PALFORZIA REMS will notify the prescriber of successful patient enrollment within 2 business days

Additional PALFORZIA REMS supporting documents can be found at **PALFORZIAREMS.com** or from your Aimmune Practice Account Manager.

Patient agreement

The patient/parent/guardian acknowledges the following:

Before treatment begins:

- Enroll in the PALFORZIA REMS by completing this Patient Enrollment Form with prescriber
- Receive counseling on the need to have injectable epinephrine available for immediate use at all times, the need for monitoring with the Initial Dose Escalation and the first dose of each Up-Dosing level, the need for continued peanut avoidance in the diet, and how to recognize the signs and symptoms of severe allergic reaction (anaphylaxis)

During treatment (before the first dose of each Up-Dosing level):

- Receive counseling from a healthcare provider on the need to be monitored for severe allergic reaction (anaphylaxis)

During treatment (during and after administration of the Initial Dose Escalation and the first dose of each Up-Dosing level, for at least 60 minutes)

- Be monitored for severe allergic reaction (anaphylaxis) at the healthcare setting

Patient/parent/guardian will:

- Report anaphylaxis to your healthcare provider
- Request more injectable epinephrine as needed
- Have injectable epinephrine available for immediate use at all times
- Avoid peanuts and foods that contain peanuts in the diet

Patient/parent/guardian understands:

- In order to receive PALFORZIA, patient is required to be enrolled in the PALFORZIA REMS, and patient's information will be stored in a database of all patients who receive PALFORZIA in the United States
- Aimmune Therapeutics, Inc., and its agents, including trusted vendors, may contact patient via phone, mail, fax, or email to support administration of the PALFORZIA REMS

Please see Important Safety Information on front and back covers.

Please see accompanying full Prescribing Information, including Boxed WARNING, and Medication Guide included in this Resource Kit.

Palforzia®
Peanut (*Arachis hypogaea*)
Allergen Powder-dnfp

Notes:

Please see Important Safety Information on front and back covers.

Please see accompanying full Prescribing Information, including Boxed WARNING, and Medication Guide included in this Resource Kit.

Palforzia®
Peanut (*Arachis hypogaea*) Allergen Powder-dnfp

IMPORTANT SAFETY INFORMATION (CONTINUED)

CONTRAINDICATIONS

PALFORZIA is contraindicated in patients with uncontrolled asthma, or with a history of eosinophilic esophagitis and other eosinophilic gastrointestinal disease.

WARNINGS AND PRECAUTIONS

Anaphylaxis

PALFORZIA can cause anaphylaxis, which may be life threatening. PALFORZIA is available only through a restricted program under a Risk Evaluation and Mitigation Strategy (REMS) called the PALFORZIA REMS because of the risk of anaphylaxis. Only prescribers, healthcare settings, pharmacies, and patients certified and enrolled in the REMS Program can prescribe, receive, dispense or administer PALFORZIA.

Anaphylaxis has been reported during all phases of PALFORZIA dosing, including Maintenance and in subjects who have undergone recommended Up-Dosing and dose modification procedures.

Do not initiate PALFORZIA treatment in a patient who has had severe or life-threatening anaphylaxis within the previous 60 days. PALFORZIA may not be suitable for patients with certain medical conditions that may reduce the ability to survive anaphylaxis, including but not limited to markedly compromised lung function, severe mast cell disorder, or cardiovascular disease. In addition, PALFORZIA may not be suitable for patients taking medications that can inhibit or potentiate the effects of epinephrine.

All Initial Dose Escalation doses and the first dose of each Up-Dosing level must be administered under observation in a certified health care setting.

Patients may be more likely to experience allergic reactions following PALFORZIA administration in the presence of cofactors such as exercise, hot water exposure, intercurrent illness (e.g., viral infection), or fasting. Other potential cofactors may include menstruation, sleep deprivation, nonsteroidal anti-inflammatory drug use, or uncontrolled asthma. Patients should be proactively counseled about the potential for the increased risk of anaphylaxis in the presence of these cofactors. If possible, adjust the time of dosing to avoid these cofactors. If it is not possible to avoid these cofactors, consider withholding PALFORZIA temporarily.

Asthma

Uncontrolled asthma is a risk factor for a serious outcome, including death, in anaphylaxis. Ensure patients with asthma have their asthma under control prior to initiation of PALFORZIA.

PALFORZIA should be temporarily withheld if the patient is experiencing an acute asthma exacerbation. Following resolution of the exacerbation, resumption of PALFORZIA should be undertaken cautiously. Re-evaluate patients who have recurrent asthma exacerbations and consider discontinuation of PALFORZIA.

Eosinophilic Gastrointestinal Disease

Discontinue PALFORZIA and consider a diagnosis of eosinophilic esophagitis in patients who experience severe or persistent gastrointestinal symptoms, including dysphagia, vomiting, nausea, gastroesophageal reflux, chest pain, or abdominal pain.

Gastrointestinal Adverse Reactions

Gastrointestinal adverse reactions were commonly reported in PALFORZIA-treated subjects, and dose modification should be considered for patients who report these reactions. For severe or persistent gastrointestinal symptoms consider a diagnosis of eosinophilic esophagitis.

ADVERSE REACTIONS

The most common adverse events reported in subjects treated with PALFORZIA (incidence ≥ 5% and at least 5% greater than placebo) are abdominal pain, vomiting, nausea, oral pruritus, oral paresthesia, throat irritation, cough, rhinorrhea, sneezing, throat tightness, wheezing, dyspnea, pruritus, urticaria, anaphylactic reaction, and ear pruritus.

Please see accompanying full Prescribing Information, including Boxed WARNING, and Medication Guide included in this Resource Kit.

aimmune THERAPEUTICS
A Nestlé Health Science Company

Palforzia®
Peanut (*Arachis hypogaea*) Allergen Powder-dnfp