You are Cordially Invited to Attend

Treatment of Deep Vein Thrombosis (DVT) and Pulmonary Embolism (PE) and Reducing the Risk of Recurrent DVT and PE following Initial Therapy

Program Information

1205311
Thursday, March 12, 2015 at 6:30 PM
Fleming's Prime Steakhouse & Wine Bar
4432 Walnut Street
Dayton, OH
(937) 320-9548

Meeting ID

1205311

Program Faculty

Gary Fishbein, MD
Premier Health Specialists
Dayton, OH

You have been cordially invited by

Sandra Guthrie, Chris Lieswyn
Darren Amburgy, Scott Marcum

To RSVP:

To make a reservation, please call

1-866-491-1780.

Please refer to Meeting ID when making your reservation.

In accordance with the PhRMA Code on Interactions with Healthcare Professionals, attendance at this educational program is limited to healthcare professionals. As such, attendance by guests or spouses is not permitted.

By accepting any food and/or refreshments at this program, you represent that neither your employer nor the particular state(s) in which you are licensed impose restrictions that preclude you from accepting these items.

This invitation is non-transferable.

INDICATIONS

- ELIQUIS is indicated to reduce the risk of stroke and systemic embolism in patients with nonvalvular atrial fibrillation.
- ELIQUIS is indicated for the prophylaxis of deep vein thrombosis (DVT), which may lead to pulmonary embolism (PE), in patients who have undergone hip or knee replacement surgery.
- ELIQUIS is indicated for the treatment of DVT and PE, and to reduce the risk of recurrent DVT and PE following initial therapy.

IMPORTANT SAFETY INFORMATION

WARNINGS: (A) PREMATURE DISCONTINUATION OF ELIQUIS INCREASES THE RISK OF THROMBOTIC EVENTS, (B) SPINAL/EPIDURAL HEMATOMA

(A) Premature discontinuation of any oral anticoagulant, including ELIQUIS, increases the risk of thrombotic events. If anticoagulation with ELIQUIS is discontinued for a reason other than pathological bleeding or completion of a course of therapy, consider coverage with another anticoagulant.

(B) Epidural or spinal hematomas may occur in patients treated with ELIQUIS who are receiving neuraxial anesthesia or undergoing spinal puncture. These hematomas may result in long-term or permanent paralysis. Consider these risks when scheduling patients for spinal procedures. Factors that can increase the risk of developing epidural or spinal hematomas in these patients include:

- **use of indwelling epidural catheters**
- **concomitant use of other drugs that affect hemostasis, such as nonsteroidal anti-inflammatory drugs (NSAIDs), platelet inhibitors, other anticoagulants**
- **a history of traumatic or repeated epidural or spinal punctures**
- **a history of spinal deformity or spinal surgery**
- **optimal timing between the administration of ELIQUIS and neuraxial procedures is not known**

Monitor patients frequently for signs and symptoms of neurological impairment. If neurological compromise is noted, urgent treatment is necessary.

Consider the benefits and risks before neuraxial intervention in patients anticoagulated or to be anticoagulated.

Please see additional Important Safety Information continued on back and attached Full Prescribing Information, including **Boxed WARNINGS**, for ELIQUIS.

Eliquis® (apixaban) tablets 5mg 2.5mg

Bristol-Myers Squibb Pfizer