

## AS YOU GO WITH **AUSTEDO**<sup>®</sup> (deutetrabenazine) tablets

*Go about your day with reduced involuntary movements. Set goals and track treatment progress with once-daily AUSTEDO XR.*



### **APPROVED USE**

AUSTEDO<sup>®</sup> XR (deutetrabenazine) extended-release tablets and AUSTEDO<sup>®</sup> (deutetrabenazine) tablets are prescription medicines that are used to treat movements in the face, tongue, or other body parts that cannot be controlled (tardive dyskinesia).

It is not known if AUSTEDO XR and AUSTEDO are safe and effective in children.

### **IMPORTANT SAFETY INFORMATION**

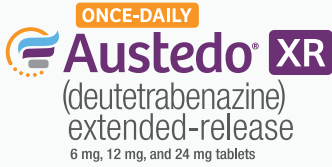
**AUSTEDO XR and AUSTEDO can cause serious side effects in people with Huntington's disease, including: depression, suicidal thoughts, or suicidal actions.**

**Do not** start taking AUSTEDO XR or AUSTEDO if you are depressed (have untreated depression or depression that is not well controlled by medicine) **or** have suicidal thoughts. Pay close attention to any changes, especially sudden changes, in mood, behaviors, thoughts or feelings. This is especially important when AUSTEDO XR or AUSTEDO is started and when the dose is changed. Call your healthcare provider right away if you become depressed, have unusual changes in mood or behavior, or have thoughts of suicide.

A photograph of two men in a classroom setting. On the left, a man with curly brown hair, wearing a blue denim jacket over a grey hoodie, is smiling and fist-bumping the other man. On the right, a man with dark hair, wearing a purple polo shirt and grey pants, is also smiling and holding a yellow insulated tumbler. In the background, a whiteboard has some faint mathematical equations written on it.

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# WELCOME

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This resource is designed to address questions, provide support, and guide conversations with your doctor to help you **achieve your goals during your treatment with AUSTEDO XR (deutetrabenazine) extended-release tablets.**

## *How to use this resource:*

- 1** *Define your personal treatment goals*
- 2** *Determine the steps you'll take to achieve your goals*
- 3** *Track your progress during treatment with AUSTEDO XR*
- 4** *Bring this guide with you to each doctor appointment to help assess your progress and discuss your treatment*

## **IMPORTANT SAFETY INFORMATION (CONTINUED)**

**Do not take AUSTEDO XR or AUSTEDO<sup>®</sup> (deutetrabenazine) tablets if you:**

- have Huntington's disease and are depressed or have thoughts of suicide.
- have liver problems.

***“I had these movements, and I became really self-conscious. I like to control my environment, my body, but I had no self-control over those movements.”***

**—Sherland, living with TD.**  
Individual results may vary.



### **IMPORTANT SAFETY INFORMATION (CONTINUED)**

**Do not take AUSTEDO XR or AUSTEDO® (deutetrabenazine) tablets if you:**

- are taking reserpine. **Do not** take medicines that contain reserpine with AUSTEDO XR or AUSTEDO. If your healthcare provider plans to switch you from taking reserpine to AUSTEDO XR or AUSTEDO, you must wait at least 20 days after your last dose of reserpine before you start taking AUSTEDO XR or AUSTEDO.

# YOUR TREATMENT GOALS

You and your healthcare team have worked together to develop a plan to treat your tardive dyskinesia (TD) that includes AUSTEDO® XR (deutetrabenazine) extended-release tablets. **To help you stay on track with your treatment plan**, it's important to first define your goals.

***Here are a few questions to get you started.***

Write your answers in the spaces provided, and **share them with your healthcare team, family members, and/or care partners:**

**1** *What uncontrollable movements are you hoping may improve with treatment?*

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**2** *What other personal treatment goals have you and/or your healthcare team set?*

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**3** *What steps have you, your healthcare team, family members, and/or care partners identified to help you achieve your treatment goals?*

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**4** *If you were to achieve your treatment goals, what would be different?*

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## **IMPORTANT SAFETY INFORMATION (CONTINUED)**

**Do not take AUSTEDO XR or AUSTEDO® (deutetrabenazine) tablets if you:**

- are taking a monoamine oxidase inhibitor (MAOI) medicine. **Do not** take an MAOI within 14 days after you stop taking AUSTEDO XR or AUSTEDO. **Do not** start AUSTEDO XR or AUSTEDO if you stopped taking an MAOI in the last 14 days. Ask your healthcare provider or pharmacist if you are not sure.

# GETTING YOUR PRESCRIPTION IS EASIER WITH TEVA SHARED SOLUTIONS®

Your doctor can send your AUSTEDO® XR (deutetrabenazine) extended-release tablets prescription in 1 of 2 ways:

## With **teva** | Shared Solutions

Once you or your doctor enrolls you in **Shared Solutions**, our patient support program, here's what to expect:

Your prescription can be sent directly to Shared Solutions. They will confirm that it can be sent to the preferred pharmacy, identify financial assistance options, help make treatment affordable, and assist in navigating Medicare Part D.

Your pharmacy will ship your prescription (and future refills) to you. Once you start your prescription, a Shared Solutions nurse will call you to provide ongoing support throughout your treatment and support with future refills.

## Without **Shared Solutions**

If you are not enrolled when AUSTEDO XR is prescribed, here's what to expect:

Your prescription can be sent directly to the preferred pharmacy.

You and your doctor are responsible for identifying financial assistance options, navigating Medicare Part D, and identifying a different pharmacy if the preferred pharmacy is out of network.

Your pharmacy will ship your prescription (and future refills) to you. You will not receive **Shared Solutions** nurse support, and you are responsible for the future refills process.

Navigating insurance and billing information can be overwhelming. Teva **Shared Solutions**, our patient support program, can help ease the process by handling it for you.

Call **1-800-887-8100** or visit **MySharedSolutions.com** to find out more.

## IMPORTANT SAFETY INFORMATION (CONTINUED)

**Do not take AUSTEDO XR or AUSTEDO® (deutetrabenazine) tablets if you:**

- are taking tetrabenazine. If your healthcare provider plans to switch you from tetrabenazine to AUSTEDO XR or AUSTEDO, take your first dose of AUSTEDO XR or AUSTEDO on the day after your last dose of tetrabenazine.
- are taking valbenazine.

# DOSING FOR TARDIVE DYSKINESIA (TD)

**Keep your day going with once-daily dosing of AUSTEDO® XR (deutetrabenazine) extended-release tablets.**

Once-daily AUSTEDO XR has flexible dosing to help meet your needs. AUSTEDO XR allows your doctor to adjust your daily dose up or down based on reduction of movements and how well the medicine is tolerated.



**Talk to your doctor about starting AUSTEDO XR for once-daily dosing.**



**Start AUSTEDO XR at no cost with the 4-week Titration Kit**

**Available as a sample or with a prescription from your doctor**

Packaging not to scale.

## IMPORTANT SAFETY INFORMATION (CONTINUED)

Other possible serious side effects include:

- **Irregular heartbeat (QT prolongation).** AUSTEDO XR and AUSTEDO® (deutetrabenazine) tablets increases your chance of having certain changes in the electrical activity in your heart. These changes can lead to a dangerous abnormal heartbeat. Taking AUSTEDO XR or AUSTEDO with certain medicines may increase this chance.

# TAKE AUSTEDO® XR (DEUTETRABENAZINE) EXTENDED-RELEASE TABLETS AS PRESCRIBED

Life can get busy, and it's not always easy to remember all your doctor's instructions. However, it is important that you continue to take AUSTEDO XR exactly as prescribed by your doctor.

## AUSTEDO XR should be taken:



Once daily



With water



Whole (do not  
crush or break)



With or  
without food

If you cannot swallow AUSTEDO XR whole, tell your healthcare provider. You may need a different medication.

**AUSTEDO® (deutetrabenazine) tablets can be  
taken with most mental health medications.\***

\*Once-daily AUSTEDO XR contains the same active ingredient as twice-daily AUSTEDO. Data on this page is based on twice-daily dosing.

## IMPORTANT SAFETY INFORMATION (CONTINUED)

Other possible serious side effects include:

- **Neuroleptic Malignant Syndrome.** Call your healthcare provider right away and go to the nearest emergency room if you develop these signs and symptoms that do not have another obvious cause: high fever, stiff muscles, problems thinking, very fast or uneven heartbeat, or increased sweating.



# STAYING ON TRACK

***It's important to take AUSTEDO® XR (deutetrabenazine) extended-release tablets as prescribed. Use these tips to help you stay on track.***



### ***Have a plan***

- Before starting AUSTEDO XR, talk to your doctor about what to do if you miss a dose
- Add your dosing schedule to your other daily routines so you will be less likely to miss a dose
- Tell your doctor if you stop taking AUSTEDO XR for more than 1 week. Do not take another dose until you talk to your doctor



### ***Set a routine***

- Follow the dosing schedule exactly as prescribed by your doctor
- Set an alarm as a treatment reminder
- Keep your AUSTEDO XR tablets in the same place so you know where they are



### ***Record your treatment***

- Use the Progress Tracker and Activity Log included in this guide to record when AUSTEDO XR is taken and any questions you have for your doctor



### ***Reach your appropriate dose***

- Work with your doctor to find the dose of AUSTEDO XR that works for you
- It's important to take AUSTEDO XR exactly as your doctor prescribes it
- AUSTEDO XR allows your doctor to adjust your daily dose up or down based on reduction of movements and how well the medicine is tolerated

## **IMPORTANT SAFETY INFORMATION (CONTINUED)**

**Other possible serious side effects include:**

- **Restlessness.** You may get a condition where you feel a strong urge to move. This is called akathisia.
- **Parkinsonism.** Symptoms include: slight shaking, body stiffness, trouble moving, trouble keeping your balance, or falls.

## ANSWERING YOUR CONCERNS

*It's completely normal to have concerns when starting a new medication. Here are some common questions from patients, with answers provided by a healthcare professional:*

**Q: Why am I being prescribed AUSTEDO® XR (deutetrabenazine) extended-release tablets?**

**A:** Your doctor has diagnosed your uncontrollable movements as tardive dyskinesia (TD). Before making the decision to prescribe AUSTEDO XR, they likely considered your uncontrolled movements, your medical conditions and any medications you are taking, your treatment goals, and how AUSTEDO XR may help you. In clinical studies, AUSTEDO® (deutetrabenazine) tablets effectively reduced TD body movements. And, in the clinical studies, people taking AUSTEDO were able to continue with their mental health medications.\*

**Q: How will I know if AUSTEDO XR is working?**

**A:** TD affects everyone differently, so treatment results may vary from person to person. In 1 clinical study, people taking AUSTEDO saw more than a 2x reduction in uncontrolled body movements compared to patients who took placebo instead of AUSTEDO. Some began to see results as soon as 2 weeks.\* At your next appointment, your doctor will assess your progress, and together, the two of you can decide if your treatment plan should be adjusted or not.

**Q: Will taking AUSTEDO XR affect my other medications?**

**A:** In clinical studies, people taking AUSTEDO were able to continue with their mental health medications, like antipsychotics or antidepressants. Tell your doctor about all your medical conditions and all the medicines you take, including prescription and over-the-counter medications, vitamins, and herbal supplements.\*

\*Once-daily AUSTEDO XR contains the same active ingredient as twice-daily AUSTEDO. Data on this page is based on twice-daily dosing.

### IMPORTANT SAFETY INFORMATION (CONTINUED)

**Sleepiness (sedation) is a common side effect of AUSTEDO XR and AUSTEDO.** While taking AUSTEDO XR or AUSTEDO, do not drive a car or operate dangerous machinery until you know how AUSTEDO XR or AUSTEDO affects you. Drinking alcohol and taking other drugs that may also cause sleepiness while you are taking AUSTEDO XR or AUSTEDO may increase any sleepiness caused by AUSTEDO XR and AUSTEDO.

**Q: Why might my doctor adjust my dose?**

**A:** AUSTEDO® XR (deutetrabenazine) extended-release tablets allow your doctor to adjust your daily dose up or down based on reduction of movements and how well the medicine is tolerated. Your doctor may refer to adjusting your dose as titration. This titration, or dose-adjustment period, is different for everyone. It is important to take AUSTEDO XR exactly as your doctor tells you to take it.

**Q: What happens after I reach my appropriate dose?**

**A:** Once your doctor determines the dose of AUSTEDO XR that's right for you, then that amount would become your ongoing maintenance dose. It's important to track your progress (using the Progress Tracker and Activity Log included in this guide), both during the dose-adjustment period and with your maintenance dose, so your treatment plan can be adjusted if something changes.

**Q: What about side effects?**

**A:** Good question. In clinical studies, the most common side effects of AUSTEDO® (deutetrabenazine) tablets included inflammation of the nose and throat (nasopharyngitis) and problems sleeping (insomnia). Be sure to read the Important Safety Information on the following pages and the accompanying Medication Guide to learn more about possible side effects of AUSTEDO XR. As with any medication, it's always important to discuss any and all possible side effects with your doctor before you start taking AUSTEDO XR. It's also important to keep your doctor informed as to how you're feeling throughout treatment. If something doesn't feel right, discuss it with your doctor first so they can adjust your treatment plan as necessary.\*

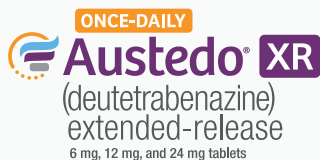
**Q: What happens if I forget and miss a dose?**

**A:** You wouldn't be alone. Forgetfulness is one of the most common reasons people don't take their medications as prescribed. Before starting AUSTEDO XR, talk to your doctor about what to do if you do forget a dose. Also, be sure to tell your doctor if you stop taking AUSTEDO XR for more than 1 week. Do not take another dose until you talk to your doctor. Using the Progress Tracker and Activity Log included later in this guide will help you remember to take your daily medication as prescribed.

\*Once-daily AUSTEDO XR contains the same active ingredient as twice-daily AUSTEDO. Data on this page is based on twice-daily dosing.

**IMPORTANT SAFETY INFORMATION (CONTINUED)**

**The most common side effects of AUSTEDO in people with tardive dyskinesia include** inflammation of the nose and throat (nasopharyngitis) and problems sleeping (insomnia). The most common side effects of AUSTEDO XR are expected to be similar to AUSTEDO in people with Huntington's disease or tardive dyskinesia.



## APPROVED USE

AUSTEDO® XR (deutetrabenazine) extended-release tablets and AUSTEDO® (deutetrabenazine) tablets are prescription medicines that are used to treat movements in the face, tongue, or other body parts that cannot be controlled (tardive dyskinesia).

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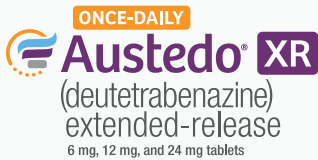
## IMPORTANT SAFETY INFORMATION

**AUSTEDO XR and AUSTEDO can cause serious side effects in people with Huntington's disease, including: depression, suicidal thoughts, or suicidal actions.**

**Do not** start taking AUSTEDO XR or AUSTEDO if you are depressed (have untreated depression or depression that is not well controlled by medicine) **or** have suicidal thoughts. Pay close attention to any changes, especially sudden changes, in mood, behaviors, thoughts or feelings. This is especially important when AUSTEDO XR or AUSTEDO is started and when the dose is changed. Call your healthcare provider right away if you become depressed, have unusual changes in mood or behavior, or have thoughts of suicide.

### Do not take AUSTEDO XR or AUSTEDO if you:

- have Huntington's disease and are depressed or have thoughts of suicide.
- have liver problems.
- are taking reserpine. **Do not** take medicines that contain reserpine with AUSTEDO XR or AUSTEDO. If your healthcare provider plans to switch you from taking reserpine to AUSTEDO XR or AUSTEDO, you must wait at least 20 days after your last dose of reserpine before you start taking AUSTEDO XR or AUSTEDO.
- are taking a monoamine oxidase inhibitor (MAOI) medicine. **Do not** take an MAOI within 14 days after you stop taking AUSTEDO XR or AUSTEDO. **Do not** start AUSTEDO XR or AUSTEDO if you stopped taking an MAOI in the last 14 days. Ask your healthcare provider or pharmacist if you are not sure.
- are taking tetrabenazine. If your healthcare provider plans to switch you from tetrabenazine to AUSTEDO XR or AUSTEDO, take your first dose of AUSTEDO XR or AUSTEDO on the day after your last dose of tetrabenazine.
- are taking valbenazine.



## **IMPORTANT SAFETY INFORMATION (CONTINUED)**

### **Other possible serious side effects include:**

- **Irregular heartbeat (QT prolongation).** AUSTEDO® XR (deutetrabenazine) extended-release tablets and AUSTEDO® (deutetrabenazine) tablets increases your chance of having certain changes in the electrical activity in your heart. These changes can lead to a dangerous abnormal heartbeat. Taking AUSTEDO XR or AUSTEDO with certain medicines may increase this chance.
- **Neuroleptic Malignant Syndrome.** Call your healthcare provider right away and go to the nearest emergency room if you develop these signs and symptoms that do not have another obvious cause: high fever, stiff muscles, problems thinking, very fast or uneven heartbeat, or increased sweating.
- **Restlessness.** You may get a condition where you feel a strong urge to move. This is called akathisia.
- **Parkinsonism.** Symptoms include: slight shaking, body stiffness, trouble moving, trouble keeping your balance, or falls.

### **Sleepiness (sedation) is a common side effect of AUSTEDO XR and AUSTEDO.**

While taking AUSTEDO XR or AUSTEDO, do not drive a car or operate dangerous machinery until you know how AUSTEDO XR or AUSTEDO affects you. Drinking alcohol and taking other drugs that may also cause sleepiness while you are taking AUSTEDO XR or AUSTEDO may increase any sleepiness caused by AUSTEDO XR and AUSTEDO.

**The most common side effects of AUSTEDO in people with Huntington's disease include** sleepiness (sedation), diarrhea, tiredness, and dry mouth.

**The most common side effects of AUSTEDO in people with tardive dyskinesia include** inflammation of the nose and throat (nasopharyngitis) and problems sleeping (insomnia).

The most common side effects of AUSTEDO XR are expected to be similar to AUSTEDO in people with Huntington's disease or tardive dyskinesia.

These are not all the possible side effects of AUSTEDO XR or AUSTEDO. Call your doctor for medical advice about side effects. You are encouraged to report side effects of prescription drugs to the FDA. Visit [www.fda.gov/medwatch](http://www.fda.gov/medwatch) or call **1-800-FDA-1088**.



## ONLINE RESOURCES

*Below are several online resources you may find helpful if you have questions about tardive dyskinesia.*

**Caregiver Action Network (CAN)**  
caregiveraction.org

**Depression and Bipolar  
Support Alliance (DBSA)**  
dbsalliance.org

**Mental Health America (MHA)**  
mhanational.org

**National Alliance on Mental  
Illness (NAMI)**  
nami.org

**National Organization for  
Tardive Dyskinesia (NOTD)**  
tdhelp.org

### **IMPORTANT SAFETY INFORMATION (CONTINUED)**

The most common side effects of AUSTEDO (deutetrabenazine) tablets in people with tardive dyskinesia include inflammation of the nose and throat (nasopharyngitis) and problems sleeping (insomnia). The most common side effects of AUSTEDO XR are expected to be similar to AUSTEDO in people with Huntington's disease or tardive dyskinesia.

# PROGRESS TRACKER AND ACTIVITY LOG

Use this guide when talking to your doctor about treatment with **AUSTEDO® XR (deutetrabenazine) extended-release tablets.**

## 1 Recording treatment

Avoid questions about whether you're on track with your medications by using the progress tracker daily.

**Write the Week #** (eg, Week 1) and the month/day/year you start treatment.

**Note your prescribed dose** for that week from the dosing instructions provided by your doctor. Track progress both during the titration period and with the maintenance dose, so your treatment plan can be adjusted if something changes.

Each day, **check the box once you've taken your AUSTEDO XR.**

## 2 Using the activity log

Each week, **evaluate your uncontrolled movements** and the impact they've had on your daily life as compared to the previous week. Mark your answers in the boxes.

## 3 Notes

Use this space to **write down any questions you'd like to discuss** with your doctor during your next visit.

Week # 3

Prescribed dose  
24 Total mg      Titrated:    
Maintenance:

Check each box after taking your daily dose

SUN	MON	TUES	WED
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Assess your activity

Each week, especially during the initial dose-adjustment period, it is important to evaluate your unintentional, uncontrolled movements (UM) and dyskinesia (TD) and the impact they have on your daily life compared to the previous week.

Face	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse
Hands	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse
Feet	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse
Torso	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse
Other	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse

Questions to discuss with my doctor

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# DON'T FORGET REFILLS

If you need additional Progress Tracker and Activity Log sheets, go to [www.AUSTEDO.com/tardive-dyskinesia/resources](http://www.AUSTEDO.com/tardive-dyskinesia/resources).

**Remember to bring this log with you to all upcoming doctor appointments.**



## IMPORTANT SAFETY INFORMATION (CONTINUED)

**AUSTEDO XR and AUSTEDO can cause serious side effects in people with Huntington's disease, including: depression, suicidal thoughts, or suicidal actions.**

**Do not** start taking AUSTEDO XR or AUSTEDO if you are depressed (have untreated depression or depression that is not well controlled by medicine) or have suicidal thoughts. Pay close attention to any changes, especially sudden changes, in mood, behaviors, thoughts or feelings. This is especially important when AUSTEDO XR or AUSTEDO is started and when the dose is changed.



Week # \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**Prescribed dose**

<input style="width: 95%;" type="text"/>	<b>Total mg</b>	<b>Titrated:</b> <input style="width: 20px;" type="text"/>	<b>Maintenance:</b> <input style="width: 20px;" type="text"/>	<b>Pills per dose:</b>	<input type="checkbox"/> Q6	<input type="checkbox"/> Q12	<input type="checkbox"/> Q24
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**Check each box after taking your daily dose**

SUN	MON	TUES	WED	THURS	FRI	SAT

**Assess your activity**

Each week, especially during the initial dose-adjustment period, it's extremely important to evaluate your unintentional, uncontrollable movements of tardive dyskinesia (TD) and the impact they have on your daily activities as compared to the previous week.

<b>Face</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	<b><i>This week, I accomplished</i></b>
				_____
<b>Hands</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	_____
				_____
<b>Feet</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	_____
				_____
<b>Torso</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	_____
				_____
<b>Other</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	_____
				_____

**Questions to discuss with my doctor**

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Week # \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**Prescribed dose**

<input style="width: 90%;" type="text"/>	<b>Total mg</b>	<b>Titrated:</b> <input style="width: 20px;" type="text"/>	<b>Maintenance:</b> <input style="width: 20px;" type="text"/>	<b>Pills per dose:</b>	<input type="radio"/> Q6	<input type="radio"/> Q12	<input type="radio"/> Q24
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**Check each box after taking your daily dose**

SUN	MON	TUES	WED	THURS	FRI	SAT

**Assess your activity**

Each week, especially during the initial dose-adjustment period, it's extremely important to evaluate your unintentional, uncontrollable movements of tardive dyskinesia (TD) and the impact they have on your daily activities as compared to the previous week.

<b>Face</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	<b><i>This week, I accomplished</i></b>
				_____
<b>Hands</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	_____
				_____
<b>Feet</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	_____
				_____
<b>Torso</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	_____
				_____
<b>Other</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	_____
				_____

**Questions to discuss with my doctor**

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Week # \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**Prescribed dose**

<input style="width: 90%;" type="text"/>	<b>Total mg</b>	<b>Titrated:</b> <input style="width: 20px;" type="text"/>	<b>Maintenance:</b> <input style="width: 20px;" type="text"/>	<b>Pills per dose:</b>	<input type="radio"/> Q6	<input type="radio"/> Q12	<input type="radio"/> Q24
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**Check each box after taking your daily dose**

SUN	MON	TUES	WED	THURS	FRI	SAT

**Assess your activity**

Each week, especially during the initial dose-adjustment period, it's extremely important to evaluate your unintentional, uncontrollable movements of tardive dyskinesia (TD) and the impact they have on your daily activities as compared to the previous week.

<b>Face</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	<b><i>This week, I accomplished</i></b>
				_____
<b>Hands</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	_____
				_____
<b>Feet</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	_____
				_____
<b>Torso</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	_____
				_____
<b>Other</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	_____
				_____

**Questions to discuss with my doctor**

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Week # \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**Prescribed dose**

<input style="width: 90%;" type="text"/>	<b>Total mg</b>	<b>Titrated:</b> <input style="width: 20px;" type="text"/>	<b>Maintenance:</b> <input style="width: 20px;" type="text"/>	<b>Pills per dose:</b>	<input type="radio"/> Q6	<input type="radio"/> Q12	<input type="radio"/> Q24
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**Check each box after taking your daily dose**

SUN	MON	TUES	WED	THURS	FRI	SAT

**Assess your activity**

Each week, especially during the initial dose-adjustment period, it's extremely important to evaluate your unintentional, uncontrollable movements of tardive dyskinesia (TD) and the impact they have on your daily activities as compared to the previous week.

<b>Face</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	<b><i>This week, I accomplished</i></b>
				_____
<b>Hands</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	_____
				_____
<b>Feet</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	_____
				_____
<b>Torso</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	_____
				_____
<b>Other</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	_____
				_____

**Questions to discuss with my doctor**

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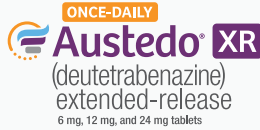
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Week # \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**Prescribed dose**

<input type="text"/>	<b>Total mg</b>	<b>Titrated:</b> <input type="text"/>	<b>Maintenance:</b> <input type="text"/>	<b>Pills per dose:</b>	<input type="radio"/> Q6	<input type="radio"/> Q12	<input type="radio"/> Q24
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**Check each box after taking your daily dose**

SUN	MON	TUES	WED	THURS	FRI	SAT

**Assess your activity**

Each week, especially during the initial dose-adjustment period, it's extremely important to evaluate your unintentional, uncontrollable movements of tardive dyskinesia (TD) and the impact they have on your daily activities as compared to the previous week.

<b>Face</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	<b><i>This week, I accomplished</i></b> _____ _____ _____ _____ _____
<b>Hands</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	
<b>Feet</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	
<b>Torso</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	
<b>Other</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	

**Questions to discuss with my doctor**

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Week # \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**Prescribed dose**

<input style="width: 90%;" type="text"/>	<b>Total mg</b>	<b>Titrated:</b> <input style="width: 20px;" type="text"/>	<b>Maintenance:</b> <input style="width: 20px;" type="text"/>	<b>Pills per dose:</b>	<input type="radio"/> Q6	<input type="radio"/> Q12	<input type="radio"/> Q24
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**Check each box after taking your daily dose**

SUN	MON	TUES	WED	THURS	FRI	SAT

**Assess your activity**

Each week, especially during the initial dose-adjustment period, it's extremely important to evaluate your unintentional, uncontrollable movements of tardive dyskinesia (TD) and the impact they have on your daily activities as compared to the previous week.

<b>Face</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	<b><i>This week, I accomplished</i></b>
				_____
<b>Hands</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	_____
				_____
<b>Feet</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	_____
				_____
<b>Torso</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	_____
				_____
<b>Other</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	_____
				_____

**Questions to discuss with my doctor**

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Week # \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**Prescribed dose**

<input style="width: 100%; height: 30px;" type="text"/>	<b>Total mg</b>	<b>Titrated:</b> <input style="width: 30px; height: 20px;" type="text"/>	<b>Maintenance:</b> <input style="width: 30px; height: 20px;" type="text"/>	<b>Pills per dose:</b>	<input style="width: 40px; height: 30px; border: 1px solid gray; border-radius: 50%; background-color: #ccc;" type="checkbox"/> Q6	<input style="width: 40px; height: 30px; border: 1px solid gray; border-radius: 50%; background-color: #00aaff; color: white;" type="checkbox"/> Q12	<input style="width: 40px; height: 30px; border: 1px solid gray; border-radius: 50%; background-color: #800080; color: white;" type="checkbox"/> Q24
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**Check each box after taking your daily dose**

SUN	MON	TUES	WED	THURS	FRI	SAT

**Assess your activity**

Each week, especially during the initial dose-adjustment period, it's extremely important to evaluate your unintentional, uncontrollable movements of tardive dyskinesia (TD) and the impact they have on your daily activities as compared to the previous week.

<b>Face</b>	<input style="width: 30px; height: 20px;" type="checkbox"/> better	<input style="width: 30px; height: 20px;" type="checkbox"/> same	<input style="width: 30px; height: 20px;" type="checkbox"/> worse	<b><i>This week, I accomplished</i></b>
<b>Hands</b>	<input style="width: 30px; height: 20px;" type="checkbox"/> better	<input style="width: 30px; height: 20px;" type="checkbox"/> same	<input style="width: 30px; height: 20px;" type="checkbox"/> worse	_____
<b>Feet</b>	<input style="width: 30px; height: 20px;" type="checkbox"/> better	<input style="width: 30px; height: 20px;" type="checkbox"/> same	<input style="width: 30px; height: 20px;" type="checkbox"/> worse	_____
<b>Torso</b>	<input style="width: 30px; height: 20px;" type="checkbox"/> better	<input style="width: 30px; height: 20px;" type="checkbox"/> same	<input style="width: 30px; height: 20px;" type="checkbox"/> worse	_____
<b>Other</b>	<input style="width: 30px; height: 20px;" type="checkbox"/> better	<input style="width: 30px; height: 20px;" type="checkbox"/> same	<input style="width: 30px; height: 20px;" type="checkbox"/> worse	_____

**Questions to discuss with my doctor**

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Week # \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**Prescribed dose**

<input style="width: 90%;" type="text"/>	<b>Total mg</b>	<b>Titrated:</b> <input style="width: 20px;" type="text"/>	<b>Maintenance:</b> <input style="width: 20px;" type="text"/>	<b>Pills per dose:</b>	<input type="radio"/> Q6	<input type="radio"/> Q12	<input type="radio"/> Q24
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<b>Face</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	<b><i>This week, I accomplished</i></b>
				_____
<b>Hands</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	_____
				_____
<b>Feet</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	_____
				_____
<b>Torso</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	_____
				_____
<b>Other</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	_____
				_____

**Questions to discuss with my doctor**

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Week # \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**Prescribed dose**

<input style="width: 90%;" type="text"/>	<b>Total mg</b>	<b>Titrated:</b> <input style="width: 20px;" type="text"/>	<b>Maintenance:</b> <input style="width: 20px;" type="text"/>	<b>Pills per dose:</b>	<input type="radio"/> Q6	<input type="radio"/> Q12	<input type="radio"/> Q24
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**Check each box after taking your daily dose**

SUN	MON	TUES	WED	THURS	FRI	SAT

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<b>Face</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	<b><i>This week, I accomplished</i></b>
				_____
<b>Hands</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	_____
				_____
<b>Feet</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	_____
				_____
<b>Torso</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	_____
				_____
<b>Other</b>	<input type="checkbox"/> better	<input type="checkbox"/> same	<input type="checkbox"/> worse	_____
				_____

**Questions to discuss with my doctor**

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# HEALTH INFORMATION

AUSTEDO® XR (deutetrabenazine) extended-release tablets start date:

**Primary care doctor** \_\_\_\_\_

Phone number \_\_\_\_\_

Address \_\_\_\_\_

**Neurologist** \_\_\_\_\_

Phone number \_\_\_\_\_

Address \_\_\_\_\_

**Hospital** \_\_\_\_\_

Phone number \_\_\_\_\_

Address \_\_\_\_\_

**Pharmacy** \_\_\_\_\_

Phone number \_\_\_\_\_

Address \_\_\_\_\_

**Insurance carrier** \_\_\_\_\_

Phone number \_\_\_\_\_

Health insurance member ID \_\_\_\_\_

**teva** | Shared Solutions

*Your go-to resource for financial assistance,  
nurse support, and benefits coverage.*



**1-800-887-8100**

Monday-Friday  
from 8 AM to 8 PM CT

# APPOINTMENT RECORD

Record your next appointment date in the space provided.

**My next appointment is:**

MONTH:

DAY:

TIME:

AM/PM

NOTES:

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**My next appointment is:**

MONTH:

DAY:

TIME:

AM/PM

NOTES:

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**My next appointment is:**

MONTH:

DAY:

TIME:

AM/PM

NOTES:

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**My next appointment is:**

MONTH:

DAY:

TIME:

AM/PM

NOTES:

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**My next appointment is:**

MONTH:

DAY:

TIME:

AM/PM

NOTES:

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**My next appointment is:**

MONTH:

DAY:

TIME:

AM/PM

NOTES:

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## REACH OUT TO US, WE'LL REACH FOR SOLUTIONS TOGETHER



If you have any questions as you're setting goals and tracking progress with AUSTEDO XR (deutetrabenzine) extended-release tablets, Teva **Shared Solutions**® is here for you. Let the broad reach of our services help you stay on course toward achieving your treatment goals.

### Sign up for Shared Solutions

by phone Monday-Friday  
from 8 AM to 8 PM CT at  
**1-800-887-8100**

OR

through our website anytime  
at **MySharedSolutions.com**

### IMPORTANT SAFETY INFORMATION

**AUSTEDO XR and AUSTEDO® (deutetrabenzine) tablets can cause serious side effects in people with Huntington's disease, including: depression, suicidal thoughts, or suicidal actions. Do not** start taking AUSTEDO XR or AUSTEDO if you are depressed (have untreated depression or depression that is not well controlled by medicine) **or** have suicidal thoughts. Pay close attention to any changes, especially sudden changes, in mood, behaviors, thoughts or feelings. This is especially important when AUSTEDO XR or AUSTEDO is started and when the dose is changed. Call your healthcare provider right away if you become depressed, have unusual changes in mood or behavior, or have thoughts of suicide.

Please read **Important Safety Information** on pages 12-13 and click **here** or visit [www.AUSTEDO.com](http://www.AUSTEDO.com) to read or print the **Medication Guide** for AUSTEDO XR.