

ABOUT THIS GUIDE

This Guide provides a high-level overview of Patient List Reports in athenaClinicals and how they can be used to help identify clinically appropriate and approvable patients who may be candidates for PRALUENT® (alirocumab) therapy based on the approved Indication. The overview is meant to provide guidance for you, your practice electronic health record (EHR) champion, or IT staff.

Experienced users are the main focus of this Guide; not every step is included in the instructions, and this is not a replacement for training from athenaClinicals. There are several ways to approach each workflow in athenaClinicals. This Guide highlights one workflow; however, you may be familiar with an alternative approach. Please note that this Guide was created based upon athenaClinicals version 15.8. Screens and features may change as new software versions are released.

INDICATIONS AND USAGE

PRALUENT (alirocumab) is indicated:

- to reduce the risk of myocardial infarction, stroke, and unstable angina requiring hospitalization in adults with established cardiovascular disease
- as an adjunct to diet, alone or in combination with other lipid-lowering therapies (e.g., statins, ezetimibe), for the treatment of adults with primary hyperlipidemia (including heterozygous familial hypercholesterolemia) to reduce low-density lipoprotein cholesterol (LDL-C)

IMPORTANT SAFETY INFORMATION

- PRALUENT is contraindicated in patients with a history of a serious hypersensitivity reaction to PRALUENT, including hypersensitivity vasculitis and hypersensitivity reactions requiring hospitalization

Please see accompanying full [Prescribing Information](#)



Using Patient List Reports

The Patient List Report can be helpful to identify established Cardiovascular Disease (eg, myocardial infarction, stroke or unstable angina requiring hospitalization) or Heterozygous Familial Hypercholesterolemia (HeFH) patients meeting certain criteria, including diagnosis, current and prior medications, LDL-C values, and other clinical or patient demographic information. When used effectively, this report provides an opportunity to identify patients with uncontrolled LDL-C who are clinically appropriate and approvable for PRALUENT therapy based upon clinician decision to treat.

A Patient List Report can be used to streamline the PRALUENT payer approval process by:

- Determining clinically appropriate and approvable patients based on payer utilization management criteria
- Reducing burden and frustration of submitting patients who are not prior authorization (PA) criteria-eligible based on the payer coverage
- Identifying gaps-in-care to contact patients who may be considered for treatment modification

IMPORTANT SAFETY INFORMATION

- Hypersensitivity reactions (e.g., pruritus, rash, urticaria), including some serious events (e.g., hypersensitivity vasculitis and hypersensitivity reactions requiring hospitalization), have been reported with PRALUENT treatment. If signs or symptoms of serious allergic reactions occur, discontinue treatment with PRALUENT, treat according to the standard of care, and monitor until signs and symptoms resolve

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Patient List Report Criteria

Patient List Reports can be created from multiple criteria such as lab values, medications, and patient diagnoses. For example, EHR criteria could include patients with a diagnosis of established cardiovascular disease (eg, myocardial infarction, stroke or unstable angina requiring hospitalization) with or without concomitant use of maximally tolerated statin therapy (eg, atorvastatin 40 mg/day), and having elevated LDL-C ≥ 70 mg/dL or ≥ 100 mg/dL, depending on insurance.

Factors That May Impact Patient List Reports

The number of patients appearing on a Patient List Report may be impacted by the clinical data available in the EHR; for example, if lab results are saved in the EHR as a PDF file and not available for use as 'data' to be queried. Additionally, in those cases where lab results are received from multiple laboratories, it may be necessary to select each lab's order codes to enable all appropriate patients to appear on the Patient List Report.

The query criteria should consider active patients only (not deceased or inactive, as determined by the practice). Also, medications prescribed before the EHR was implemented might not be included in a patient's medications list. These information gaps can reduce the number of patients on a Patient List Report.



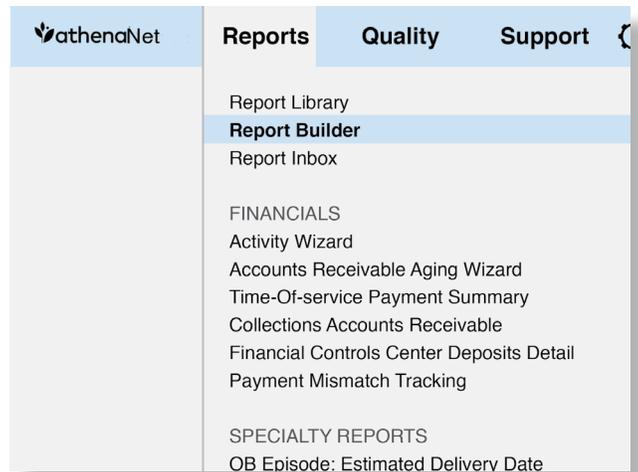
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(alirocumab) Injection 75mg/mL
150mg/mL
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Reporting: Creating a Patient List Report

A Patient List Report is an EHR system report that identifies patients meeting certain criteria. Available criteria include diagnosis, current and prior medications, lab values, and other clinical or patient demographic information.

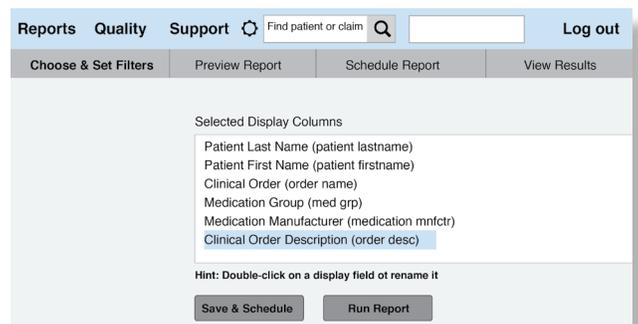
A Patient List Report may be created to identify patients with heterozygous familial hypercholesterolemia or established cardiovascular disease (eg, myocardial infarction, stroke or unstable angina requiring hospitalization) who are not at their LDL-C goal who may also be on maximally tolerated statin therapy.

The following steps illustrate how to run a Patient List Report to help identify examples of appropriate patients for PRALUENT, based on the approved indication, who may be candidates for treatment intensification in athenaClinicals.



REPORTING: CREATING A PATIENT LIST REPORT

1. Select **Reports** from the Menu.
2. Select Report Builder, then select **Clinicals**.
3. Select the Columns to be displayed in the Report, such as: Patient Last Name, Patient First Name, Clinical Order Description, Medication Group, Diagnosis, etc.



IMPORTANT SAFETY INFORMATION

- The most commonly occurring adverse reactions in clinical trials in primary hyperlipidemia (including heterozygous familial hypercholesterolemia (HeFH)) ($\geq 5\%$ of patients treated with PRALUENT and occurring more frequently than with placebo) are nasopharyngitis, injection site reactions, and influenza

Please see accompanying full [Prescribing Information](#)



Reporting: Creating a Patient List Report

4. Click **Choose & Set Filters**.
5. Select **Filters** for Medication (eg, atorvastatin, rosuvastatin), Diagnosis (Cardiovascular Disease [eg, stroke, transient ischemic attack, acute coronary syndromes, history of myocardial infarction, stable or unstable angina, coronary or other arterial revascularization, peripheral arterial disease] plus hypercholesterolemia OR HeFH), and Lab Results (ie, LDL-C \geq 70 mg/dL or \geq 100 mg/dL, depending on insurance) as appropriate, and **Save**.
6. Click on **Run Report**.
7. Choose **Report Format**. Click **OK**.

Choose Report Format

<input checked="" type="radio"/> XML	results display in web browser and can be sorted and resorted
<input type="radio"/> Comma Delimited Text (CSV)	results download to file that can be viewed in Microsoft Excel
<input type="radio"/> Custom	results download to a file that can be viewed in a text editor

<input checked="" type="checkbox"/> Show Totals
<input type="checkbox"/> Deidentify Patient Data
<input type="checkbox"/> Show Reporting Restricted Patients
<input type="checkbox"/> Show in Small Print
<input type="checkbox"/> Hide Line Numbers

OK Cancel

8. Choose **Save Report**.

IMPORTANT SAFETY INFORMATION

- The most commonly occurring adverse reactions in the cardiovascular outcomes trial (>5% of patients treated with PRALUENT and occurring more frequently than placebo) were non-cardiac chest pain, nasopharyngitis, and myalgia

Please see accompanying full [Prescribing Information](#)


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(alirocumab) Injection 75mg/mL
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IMPORTANT SAFETY INFORMATION

- PRALUENT is contraindicated in patients with a history of a serious hypersensitivity reaction to PRALUENT, including hypersensitivity vasculitis and hypersensitivity reactions requiring hospitalization
- Hypersensitivity reactions (e.g., pruritus, rash, urticaria), including some serious events (e.g., hypersensitivity vasculitis and hypersensitivity reactions requiring hospitalization), have been reported with PRALUENT treatment. If signs or symptoms of serious allergic reactions occur, discontinue treatment with PRALUENT, treat according to the standard of care, and monitor until signs and symptoms resolve
- The most commonly occurring adverse reactions in clinical trials in primary hyperlipidemia (including heterozygous familial hypercholesterolemia (HeFH)) ($\geq 5\%$ of patients treated with PRALUENT and occurring more frequently than with placebo) are nasopharyngitis, injection site reactions, and influenza
- The most commonly occurring adverse reactions in the cardiovascular outcomes trial ($>5\%$ of patients treated with PRALUENT and occurring more frequently than placebo) were non-cardiac chest pain, nasopharyngitis, and myalgia
- In the primary hyperlipidemia (including HeFH) clinical trials, local injection site reactions including erythema/redness, itching, swelling, and pain/tenderness were reported more frequently in patients treated with PRALUENT 75 mg and/or 150 mg every 2 weeks (7.2% versus 5.1% for PRALUENT and placebo, respectively). Few patients discontinued treatment because of these reactions (0.2% versus 0.4% for PRALUENT and placebo, respectively), but patients receiving PRALUENT had a greater number of injection site reactions, had more reports of associated symptoms, and had reactions of longer average duration than patients receiving placebo
- The once-monthly (Q4W) 300mg dosing regimen had a higher rate of local injection site reactions as compared to PRALUENT 75mg Q2W or placebo (16.6%, 9.6%, and 7.9%, respectively) in a trial in which all patients received an injection of drug or placebo every 2 weeks to maintain the blind. The discontinuation rate due to injection site reactions was 0.7% in the 300 mg Q4W arm and 0% in the other 2 arms

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IMPORTANT SAFETY INFORMATION (*cont.*)

- In a cardiovascular outcomes trial, local injection site reactions were reported in 3.8% of patients treated with PRALUENT versus 2.1% patients treated with placebo, and led to permanent discontinuation in 0.3% of patients versus <0.1% of patients, respectively
- In the primary hyperlipidemia trials, liver-related disorders (primarily related to abnormalities in liver enzymes) were reported in 2.5% of patients treated with PRALUENT and 1.8% of patients treated with placebo, leading to treatment discontinuation in 0.4% and 0.2% of patients, respectively. Increases in serum transaminases to greater than 3 times the upper limit of normal occurred in 1.7% of patients treated with PRALUENT and 1.4% of patients treated with placebo
- In the primary hyperlipidemia trials, the most common adverse reactions leading to treatment discontinuation in patients treated with PRALUENT were allergic reactions (0.6% versus 0.2% for PRALUENT and placebo, respectively) and elevated liver enzymes (0.3% versus <0.1%)
- PRALUENT is a human monoclonal antibody. As with all therapeutic proteins, there is a potential for immunogenicity with PRALUENT

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