ONCE-WEEKLY
OZEMPIC®
semaglutide injection 0.5mg, 1mg, 2mg

you're invited.

Join us for an upcoming event.

OZEMPIC® at the Intersection of T2D, CKD, and CVD

Presenter: TERRI JERKINS, Medical Doctor, Endocrinology, Diabetes & Metabolism

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Thursday, June 05, 2025
06:30 PM - 07:30 PM
America/Chicago

Host:
BETSY CAGLE

Cotton Row Restaurant

100 Southside Square

Huntsville
Alabama
35801

To RSVP or if you have questions about this program, please call **BETSY CAGLE** at **+1 256-221-3611** or email **qmmo@novonordisk.com**

Indications and Usage

Ozempic® (semaglutide) injection 0.5 mg, 1 mg, or 2 mg is indicated:

- as an adjunct to diet and exercise to improve glycemic control in adults with type 2 diabetes
- to reduce the risk of major adverse cardiovascular (CV) events (CV death, nonfatal myocardial infarction, or nonfatal stroke) in adults with type 2 diabetes and established CV disease
- to reduce the risk of sustained eGFR decline, end-stage kidney disease, and cardiovascular death in adults with type 2 diabetes and chronic kidney disease

Important Safety Information

WARNING: RISK OF THYROID C-CELL TUMORS

- **In rodents, semaglutide causes dose-dependent and treatment-duration-dependent thyroid C-cell tumors at clinically relevant exposures. It is unknown whether Ozempic® causes thyroid C-cell tumors, including medullary thyroid carcinoma (MTC), in humans as human relevance of semaglutide-induced rodent thyroid C-cell tumors has not been determined**
- **Ozempic® is contraindicated in patients with a personal or family history of MTC and in patients with Multiple Endocrine Neoplasia syndrome type 2 (MEN 2). Counsel patients regarding the potential risk for MTC with the use of Ozempic® and inform them of symptoms of thyroid tumors (eg, a mass in the neck, dysphagia, dyspnea, persistent hoarseness). Routine monitoring of serum calcitonin or using thyroid ultrasound is of uncertain value for early detection of MTC in patients treated with Ozempic®**

Contraindications

- Ozempic® is contraindicated in patients with a personal or family history of MTC or in patients with MEN 2, and in patients with a hypersensitivity reaction to semaglutide or to any of the excipients in Ozempic®. Serious hypersensitivity reactions including anaphylaxis and angioedema have been reported with Ozempic®

Please see additional Important Safety Information on following page.
Please see accompanying Prescribing Information, including Boxed Warning.

Important Safety Information

Warnings and Precautions

- **Risk of Thyroid C-Cell Tumors:** Patients should be further evaluated if serum calcitonin is measured and found to be elevated or thyroid nodules are noted on physical examination or neck imaging
- **Acute Pancreatitis:** Acute pancreatitis, including fatal and non-fatal hemorrhagic or necrotizing pancreatitis, has been observed in patients treated with GLP-1 receptor agonists, including semaglutide. Observe patients carefully for signs and symptoms of pancreatitis (persistent severe abdominal pain, sometimes radiating to the back with or without vomiting). If pancreatitis is suspected, discontinue Ozempic® and initiate appropriate management
- **Diabetic Retinopathy Complications:** In a 2-year trial involving patients with type 2 diabetes and high cardiovascular risk, more events of diabetic retinopathy complications occurred in patients treated with Ozempic® (3.0%) compared with placebo (1.8%). The absolute risk increase for diabetic retinopathy complications was larger among patients with a history of diabetic retinopathy at baseline than among patients without a known history of diabetic retinopathy
  Rapid improvement in glucose control has been associated with a temporary worsening of diabetic retinopathy. The effect of long-term glycemic control with semaglutide on diabetic retinopathy complications has not been studied. Patients with a history of diabetic retinopathy should be monitored for progression of diabetic retinopathy
- **Never Share an Ozempic® Pen Between Patients:** Ozempic® pens must never be shared between patients, even if the needle is changed. Pen-sharing poses a risk for transmission of blood-borne pathogens
- **Hypoglycemia:** Patients receiving Ozempic® in combination with an insulin secretagogue (eg, sulfonylurea) or insulin may have an increased risk of hypoglycemia, including severe hypoglycemia. Inform patients using these concomitant medications of the risk of hypoglycemia and educate them on the signs and symptoms of hypoglycemia
- **Acute Kidney Injury Due to Volume Depletion:** There have been postmarketing reports of acute kidney injury, in some cases requiring hemodialysis, in patients treated with semaglutide. The majority of reported events occurred in patients who experienced gastrointestinal reactions leading to dehydration such as nausea, vomiting, or diarrhea. Monitor renal function in patients reporting adverse reactions to Ozempic® that could lead to volume depletion, especially during dosage initiation and escalation
- **Severe Gastrointestinal Adverse Reactions:** Use of Ozempic® has been associated with gastrointestinal adverse reactions, sometimes severe. In Ozempic® clinical trials, severe gastrointestinal adverse reactions were reported more frequently among patients receiving Ozempic® (0.5 mg 0.4%, 1 mg 0.8%) than placebo (0%). Ozempic® is not recommended in patients with severe gastroparesis
- **Hypersensitivity:** Serious hypersensitivity reactions (eg, anaphylaxis, angioedema) have been reported in patients treated with Ozempic®. If hypersensitivity reactions occur, discontinue use of Ozempic®; treat promptly per standard of care, and monitor until signs and symptoms resolve. Use caution in a patient with a history of angioedema or anaphylaxis with another GLP-1 receptor agonist
- **Acute Gallbladder Disease:** Acute events of gallbladder disease such as cholelithiasis or cholecystitis have been reported in GLP-1 receptor agonist trials and postmarketing. In placebo-controlled trials, cholelithiasis was reported in 1.5% and 0.4% of patients treated with Ozempic® 0.5 mg and 1 mg, respectively, and not reported in placebo-treated patients. If cholelithiasis is suspected, gallbladder studies and appropriate clinical follow-up are indicated
- **Pulmonary Aspiration During General Anesthesia or Deep Sedation:** Ozempic® delays gastric emptying. There have been rare postmarketing reports of pulmonary aspiration in patients receiving GLP-1 receptor agonists undergoing elective surgeries or procedures requiring general anesthesia or deep sedation who had residual gastric contents despite reported adherence to preoperative fasting recommendations. Instruct patients to inform healthcare providers prior to any planned surgeries or procedures if they are taking Ozempic®

Adverse Reactions

- The most common adverse reactions, reported in ≥5% of patients treated with Ozempic® are nausea, vomiting, diarrhea, abdominal pain, and constipation

Drug Interactions

- When initiating Ozempic®, consider reducing the dose of concomitantly administered insulin secretagogue (such as sulfonylureas) or insulin to reduce the risk of hypoglycemia
- Ozempic® causes a delay of gastric emptying and has the potential to impact the absorption of concomitantly administered oral medications, so caution should be exercised

Use in Specific Populations

- There are limited data with semaglutide use in pregnant women to inform a drug-associated risk for adverse developmental outcomes. Discontinue Ozempic® in women at least 2 months before a planned pregnancy due to the long washout period for semaglutide

Please see accompanying Prescribing Information, including Boxed Warning.

For additional promotional information or patient resources, visit **ozempicpro.com**.

Novo Nordisk is subject to federal and state laws that require the disclosure of items of value, such as meals, provided to certain health care professionals. By participating in this activity, the value of the meal will be reported as required, and that information may be publicly availa-ble. If you prefer to attend the program and not accept a meal, there is a box to check at the event sign-in, indicating that you did not accept a meal.

Novo Nordisk will report all transfers of value, including meals, as required by law. Please refrain from consuming any meals available at this event if you are a health care provider licensed in a state that prohibits, or applies limits to, such interactions.

In Accordance with the PhRMA Code on Interactions with Healthcare Professionals, Novo Nordisk will not provide alcohol at its programs and attendance at this program is limited to healthcare professionals with an educational need to receive the information. Additionally, at-tendance by guests or spouses is not appropriate and cannot be accommodated.

We appreciate your understanding and apologize for any inconvenience this may cause. Please con-tact NNI Ethics & Compliance with any questions at NNIComplianceAssist@novonordisk.com.

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