While everyone’s injection experience is different, careful preparation and regular injection site rotation may help make your injections more comfortable and may help you manage your injection routine for COPAXONE® (glatiramer acetate injection). Always talk to your doctor about these tips and any concerns you may have.

Use
COPAXONE® is a prescription medicine that is used to treat relapsing forms of multiple sclerosis (MS), to include clinically isolated syndrome, relapsing-remitting disease, and active secondary progressive disease, in adults.

Important Safety Information
Do not use COPAXONE® if you are allergic to glatiramer acetate or mannitol.

Please see Important Safety Information on Page 6, and click here to read/print the Patient Information in the full Prescribing Information or visit www.COPAXONE.com.
Helpful injection tips

- Teva’s COPAXONE® (glatiramer acetate injection) should be injected when it is at room temperature. Take the COPAXONE® prefilled syringe out of the refrigerator at least 20 minutes before you inject.
- Clean the injection site with a fresh alcohol wipe and let your skin air-dry completely before injecting.
- Rotate your injection areas and sites within each area. See Page 5 for more information.
- Avoid injecting into areas with redness, swelling, lumps, indentations, tattoos, stretch marks, and other skin irregularities.
- Do not rub or massage the site the day of injection.

Supplies checklist

Use the supplies checklist below and the printable preparation mat on the following page to organize your COPAXONE® supplies before you inject.

- COPAXONE® prefilled syringe
- A warm/cold compress (if you are using it)
- Alcohol wipe
- Dry cotton ball
- FDA-cleared sharps disposal container

Please see the Instructions for Use in the accompanying full Prescribing Information for additional syringe disposal guidelines.

Important Safety Information

Serious side effects may happen right after or within minutes after you inject COPAXONE® at any time during your course of treatment. Call your doctor right away if you have any of these immediate post-injection reaction symptoms including: redness to your cheeks or other parts of the body (flushing); chest pain; fast heart beat; anxiety; breathing problems or tightness in your throat; or swelling, rash, hives, or itching. If you have symptoms of an immediate post-injection reaction, do not give yourself more injections until a doctor tells you to.

You can have chest pain as part of an immediate post-injection reaction or by itself. This type of chest pain usually lasts a few minutes and can begin around 1 month after you start using COPAXONE®. Call your doctor right away if you have chest pain while using COPAXONE®.

Damage to the fatty tissue just under your skin’s surface (lipoatrophy) and, rarely, death of your skin tissue (necrosis) can happen when you use COPAXONE®. Damage to the fatty tissue under your skin can cause a “dent” at the injection site that may not go away. You can reduce your chance of developing these problems by following your doctor’s instructions for how to use COPAXONE® and choosing a different injection area each time you use COPAXONE®.

Please see Important Safety Information on Page 6, and click here to read/print the Patient Information in the full Prescribing Information or visit www.COPAXONE.com.
**Preparation Mat**

**COPAXONE® (glatiramer acetate injection) prefilled syringe**

- Warm/cold compress (If you are using it)
- Alcohol wipe
- Dry cotton ball

**Important Safety Information**

Liver problems, including liver failure, can occur with COPAXONE®. Call your healthcare provider right away if you have symptoms, such as nausea, loss of appetite, tiredness, dark colored urine and pale stools, yellowing of your skin or the white part of your eye, bleeding more easily than normal, confusion, or sleepiness.

**Please see Important Safety Information on Page 6, and click here to read/print the Patient Information in the full Prescribing Information or visit www.COPAXONE.com.**
Rotation Matters
It is very important to rotate your injection areas, and injection sites within each area, to help keep your skin healthy.

• There are 7 injection areas to rotate between. Your doctor may be able to recommend other appropriate injection sites for COPAXONE® (glatiramer acetate injection) if needed.
• Never inject into the same place (site) more than once a week.

The COPAXONE iTracker® 2.0 mobile app for iPhone® and Android™ can assist with injection site rotation, injection logging, reminders, and other tasks. Visit COPAXONE.com for more information.

Support is available
While there’s no substitute for medical advice from your doctor, Teva Shared Solutions® Digital Services provides a variety of downloadable resources to help guide your MS journey. Find them at COPAXONE.com

Important Safety Information
The most common side effects of COPAXONE® include redness, pain, swelling, itching, or a lump at the injection site; rash; shortness of breath; flushing; and chest pain.

Tell your doctor if you have any side effect that bothers you or that does not go away. These are not all the possible side effects of COPAXONE®. For more information, ask your doctor or pharmacist. 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 or call 1-800-FDA-1088.
Use
COPAXONE® (glatiramer acetate injection) is a prescription medicine that is used to treat relapsing forms of multiple sclerosis (MS), to include clinically isolated syndrome, relapsing-remitting disease, and active secondary progressive disease, in adults.

Important Safety Information
Do not use COPAXONE® if you are allergic to glatiramer acetate or mannitol.

Serious side effects may happen right after or within minutes after you inject COPAXONE® at any time during your course of treatment. Call your doctor right away if you have any of these immediate post-injection reaction symptoms including: redness to your cheeks or other parts of the body (flushing); chest pain; fast heart beat; anxiety; breathing problems or tightness in your throat; or swelling, rash, hives, or itching. If you have symptoms of an immediate post-injection reaction, do not give yourself more injections until a doctor tells you to.

You can have chest pain as part of an immediate post-injection reaction or by itself. This type of chest pain usually lasts a few minutes and can begin around 1 month after you start using COPAXONE®. Call your doctor right away if you have chest pain while using COPAXONE®.

Damage to the fatty tissue just under your skin's surface (lipoatrophy) and, rarely, death of your skin tissue (necrosis) can happen when you use COPAXONE®. Damage to the fatty tissue under your skin can cause a “dent” at the injection site that may not go away. You can reduce your chance of developing these problems by following your doctor’s instructions for how to use COPAXONE® and choosing a different injection area each time you use COPAXONE®.

Liver problems, including liver failure, can occur with COPAXONE®. Call your healthcare provider right away if you have symptoms, such as nausea, loss of appetite, tiredness, dark colored urine and pale stools, yellowing of your skin or the white part of your eye, bleeding more easily than normal, confusion, or sleepiness.

The most common side effects of COPAXONE® include redness, pain, swelling, itching, or a lump at the injection site; rash; shortness of breath; flushing; and chest pain.

Tell your doctor if you have any side effect that bothers you or that does not go away. These are not all the possible side effects of COPAXONE®. For more information, ask your doctor or pharmacist. 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 or call 1-800-FDA-1088.

Please click here to read/print the Patient Information in the full Prescribing Information or visit www.COPAXONE.com