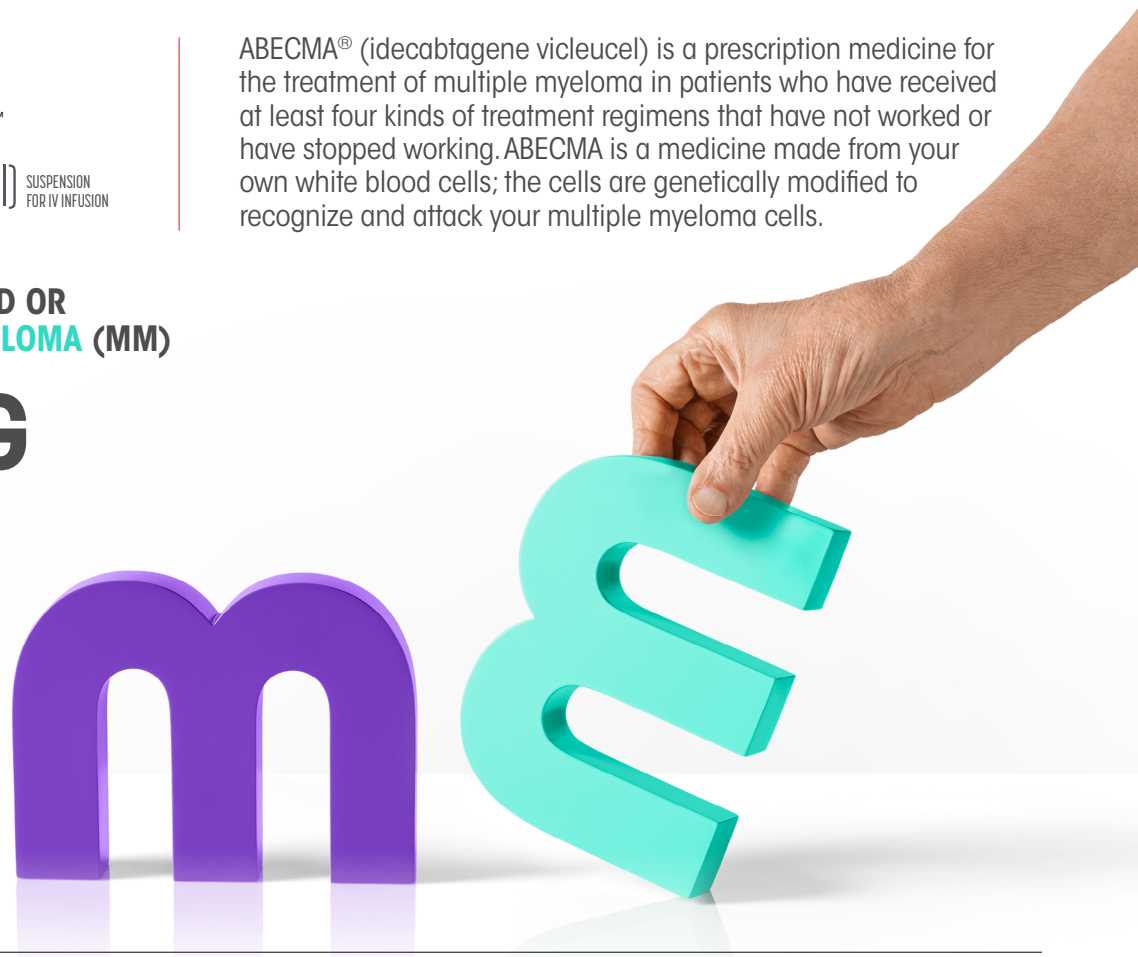
Abecma™
(idecabtagene vicleucel) SUSPENSION FOR IV INFUSION

ABECMA® (idecabtagene vicleucel) is a prescription medicine for the treatment of multiple myeloma in patients who have received at least four kinds of treatment regimens that have not worked or have stopped working. ABECMA is a medicine made from your own white blood cells; the cells are genetically modified to recognize and attack your multiple myeloma cells.

FOR ADULTS WITH RELAPSED OR REFRACTORY MULTIPLE MYELOMA (MM)

CHANGING MY mm STORY

STARTS WITH



ABECMA is a CAR T cell therapy made from your own immune cells that have been reprogrammed to help fight your MM* in a one-time infusion.†

Talk to your doctor today and discover what is possible with ABECMA.

*ABECMA can also target normal, healthy cells.
†The treatment process includes blood collection, CAR T cell creation, administration, and adverse event monitoring.
CAR=chimeric antigen receptor.

IMPORTANT SAFETY INFORMATION

What is the most important information I should know about ABECMA?

ABECMA may cause side effects that are severe or life-threatening. Call your healthcare provider or get emergency help right away if you get any of the following:

- difficulty breathing
- fever (100.4°F/38°C or higher)
- chills/shivering
- confusion
- dizziness or lightheadedness
- shaking or twitching (tremor)
- fast or irregular heartbeat
- severe fatigue
- severe nausea, vomiting, diarrhea

It is important that you tell your healthcare providers that you have received ABECMA and to show them your ABECMA Patient Wallet Card. Your healthcare provider may give you other medicines to treat your side effects.

Please see Important Safety Information throughout and click here for full Prescribing Information, including **Boxed WARNINGS** and Medication Guide.

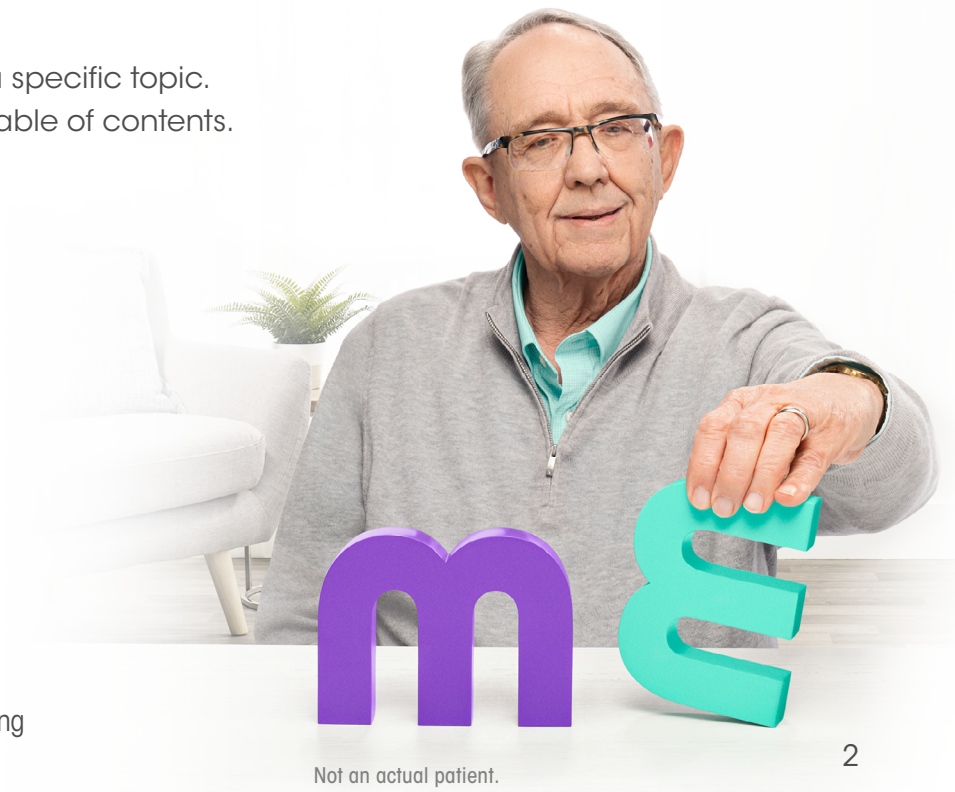
Table of contents

ABECMA® and you

ABECMA study results

Support for your ABECMA journey

Click on the underlined links to jump to a specific topic.
Click the 'HOME' button to return to the table of contents.



Not an actual patient.

*The treatment process includes blood collection, CAR T cell creation, administration, and adverse event monitoring.

Please see Important Safety Information throughout and click here for full Prescribing Information, including **Boxed WARNINGS** and Medication Guide.

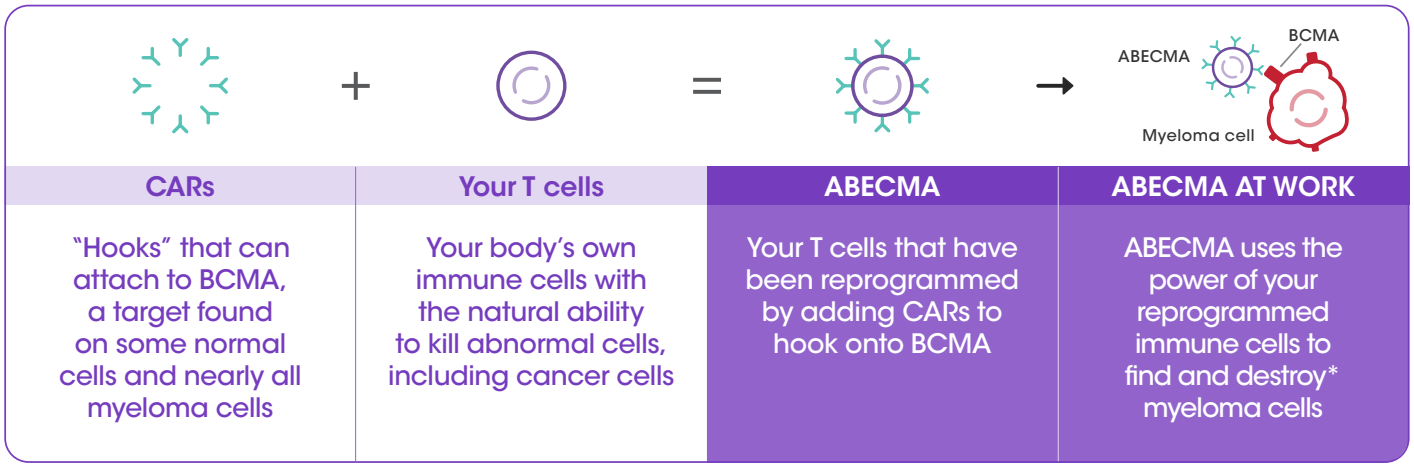
ABECMA® is a CAR T cell therapy made from your own immune cells

Abecma™ (idecabtagene vicleucel) SUSPENSION FOR IV INFUSION

Understanding CAR T cell therapy and ABECMA

ABECMA is a chimeric antigen receptor (CAR) T cell therapy—a treatment for multiple myeloma (MM) unlike anything you may have received before. CAR T cell therapies are made from your own T cells that have been reprogrammed to find and destroy specific target cells, which may include cancer cells and normal cells.

How ABECMA is made



CARs	Your T cells	ABECMA	ABECMA AT WORK
"Hooks" that can attach to BCMA, a target found on some normal cells and nearly all myeloma cells	Your body's own immune cells with the natural ability to kill abnormal cells, including cancer cells	Your T cells that have been reprogrammed by adding CARs to hook onto BCMA	ABECMA uses the power of your reprogrammed immune cells to find and destroy* myeloma cells

Further reading: Refer to our Glossary on page 21 for definitions of BCMA and other multiple myeloma and CAR T cell therapy terms.

*CAR T cell therapies find and destroy specific target cells, which may include cancer cells and normal cells.

BCMA=B-cell maturation antigen; CARs=chimeric antigen receptors.

IMPORTANT SAFETY INFORMATION (cont'd)

How will I receive ABECMA?

- ABECMA is made from your own white blood cells, so your blood will be collected by a process called "leukapheresis".
- Your blood cells will be sent to a manufacturing center to make your ABECMA. It takes about 4 weeks from the time your cells are received at the manufacturing site and are available to be shipped back to your healthcare provider, but the time may vary.
- Before you get ABECMA, your healthcare provider will give you chemotherapy for 3 days to prepare your body.

Please see Important Safety Information throughout and click here for full Prescribing Information, including **Boxed WARNINGS** and Medication Guide.

ABECMA® is a CAR T cell therapy made from your own immune cells (cont'd)

ABECMA is different from a stem cell transplant

A stem cell transplant (SCT) is another type of cell therapy that is commonly used to treat cancers of the blood, like MM.

The process for receiving an SCT is different than the process for receiving ABECMA:

- ABECMA uses customized cells, where your T cells are modified to work just for you
- A short course of chemotherapy is required before your ABECMA infusion
- The initial monitoring period for ABECMA typically lasts about a week at the treatment center
- No maintenance therapy for your MM is required after ABECMA, as long as you are responding to treatment

Further reading: See more details about the ABECMA treatment process on page 15.

You may be eligible for ABECMA regardless of your prior eligibility for an SCT.

IMPORTANT SAFETY INFORMATION (cont'd)

How will I receive ABECMA? (cont'd)

- When your ABECMA is ready, your healthcare provider will give ABECMA to you through a catheter (tube) placed into your vein (intravenous infusion). Your dose of ABECMA may be given in one or more infusion bags. The infusion usually takes up to 30 minutes for each infusion bag.
- You will be monitored at the certified healthcare facility where you received your treatment daily for at least 7 days after the infusion.
- You should plan to stay within 2 hours of this location for at least 4 weeks after getting ABECMA. Your healthcare provider will check to see that your treatment is working and help you with any side effects that may occur.

Please see Important Safety Information throughout and click here for full Prescribing Information, including **Boxed WARNINGS** and Medication Guide.

Discover if you are eligible for ABECMA®

You and your doctor should consider the following when deciding whether ABECMA is right for you:

Prior treatment

ABECMA may be right for you if you have tried at least 4 kinds of treatment regimens and have received at least 1 therapy from each of these drug classes:

- An IMiD® agent
- A proteasome inhibitor
- An anti-CD38 antibody

You may have received these treatments at the same time or one after the other. If you do not know whether or not you have received these treatments, please consult with your doctor.

You may be eligible for ABECMA regardless of your prior eligibility for an SCT.*

Overall health

Your doctor will also assess your overall health, including your age, when determining your eligibility for ABECMA. Adults 18 and over may be eligible for ABECMA.

- **Download the ABECMA Eligibility Guide at ABECMA.com to learn more.**

*In the ABECMA clinical trial, 92% of patients had previously received an SCT.

IMPORTANT SAFETY INFORMATION (cont'd)

What should I avoid after receiving ABECMA?

- Do not drive, operate heavy machinery, or do other activities that could be dangerous if you are not mentally alert, for at least 8 weeks after you get ABECMA. This is because the treatment can cause temporary memory and coordination problems, sleepiness, confusion, dizziness, and seizures.
- Do not donate blood, organs, tissues, or cells for transplantation.

Please see Important Safety Information throughout and click here for full Prescribing Information, including **Boxed WARNINGS** and Medication Guide.

ABECMA® was studied in adults with RRMM

Abecma™ (idecabtagene vicleucel) SUSPENSION FOR IV INFUSION

In the ABECMA clinical trial:

- All patients had received at least 3 other kinds of treatment that had not worked or had stopped working—including an IMiD® agent, a proteasome inhibitor, and an anti-CD38 antibody
- 100 adults with RRMM were treated with ABECMA
  - 88 of the 100 patients had received 4 or more prior treatment regimens
- Results were assessed at 1 and 2 years after their infusion

Not an actual patient.
RRMM=relapsed or refractory multiple myeloma.

ABECMA is for the treatment of MM in patients who have received at least 4 kinds of treatment regimens that have not worked or have stopped working.

IMPORTANT SAFETY INFORMATION (cont'd)

What are the possible or reasonably likely side effects of ABECMA?

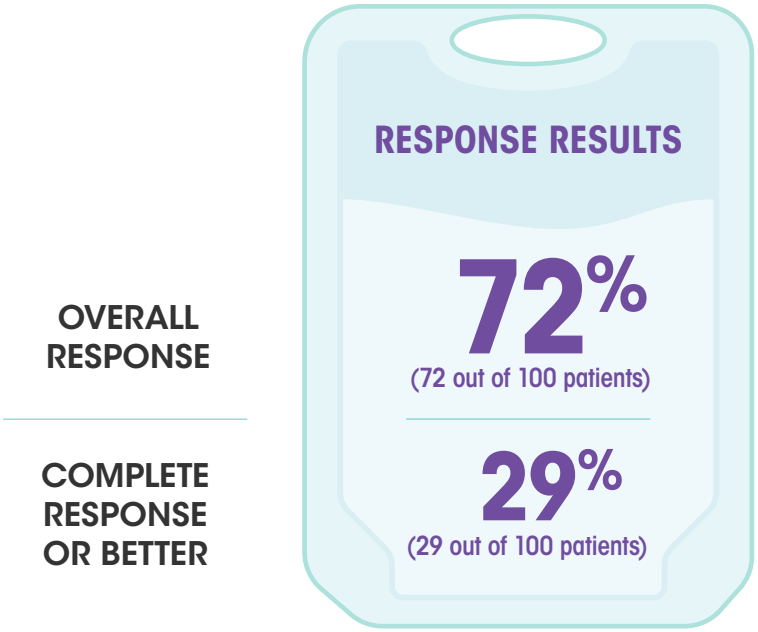
The most common side effects of ABECMA are:

- fatigue
- fever (100.4°F/38°C or higher)
- chills/shivering
- severe nausea or diarrhea
- decreased appetite
- headache
- dizziness/lightheadedness
- confusion
- difficulty speaking or slurred speech
- cough
- difficulty breathing
- fast or irregular heartbeat

Please see Important Safety Information throughout and click here for full Prescribing Information, including **Boxed WARNINGS** and Medication Guide.

ABECMA® harnesses the power of CAR T cell therapy

Most adults in the clinical trial responded to ABECMA



The median follow-up time was 27.3 months (the range was 24.1 to 33.1 months). Results were similar with a median of 13.2 months follow-up time (overall response: 72% [72 out of 100 patients]; complete response or better: 28% [28 out of 100 patients]).

These are results experienced by people in the ABECMA clinical trial. Your results may be different.

IMPORTANT SAFETY INFORMATION (cont'd)

What are the possible or reasonably likely side effects of ABECMA? (cont'd)

ABECMA can cause a very common side effect called cytokine release syndrome or CRS, which can be severe or fatal. Symptoms of CRS include fever, difficulty breathing, dizziness or light-headedness, nausea, headache, fast heartbeat, low blood pressure, or fatigue. Tell your healthcare provider right away if you develop fever or any of these other symptoms after receiving ABECMA.

Please see Important Safety Information throughout and click here for full Prescribing Information, including **Boxed WARNINGS** and Medication Guide.

ABECMA® harnesses the power of CAR T cell therapy (cont'd)

Abecma™ (idecabtagene vicleucel) SUSPENSION FOR IV INFUSION

Rapid responses with a one-time infusion of ABECMA

83% of patients who responded to ABECMA **responded within 1 month of their infusion** (60 out of 72 patients; the range was 0.5 to 2.9 months).

ABECMA responses were long-lasting

Median duration of response
(72 out of 100 patients)

Responses lasted **11.3 MONTHS**

Responses lasted a median of **21.6 MONTHS** for patients who achieved a **complete response or better** (29 out of 100 patients).

Results were similar with a median of 10.7 months follow-up time (median duration of response: 11.0 months [72 out of 100 patients]; median duration of response for patients who achieved a complete response or better: 19.0 months [28 out of 100 patients]).

These are results experienced by people in the ABECMA clinical trial. Your results may be different.

Focus on your freedom after receiving ABECMA

While regular check-ins with your healthcare team are still required, the following are **NOT required for your MM while responding to ABECMA**:

- Repeated infusions
- Maintenance therapy
- Daily pills

Further reading: Refer to our Glossary on page 21 for definitions of complete response, duration of response, median, and other multiple myeloma and CAR T cell therapy terms.

IMPORTANT SAFETY INFORMATION (cont'd)

What are the possible or reasonably likely side effects of ABECMA? (cont'd)

ABECMA can increase the risk of life-threatening infections that may lead to death. Tell your healthcare provider right away if you develop fever, chills, or any signs or symptoms of an infection.

Please see Important Safety Information throughout and click here for full Prescribing Information, including **Boxed WARNINGS** and Medication Guide.

Possible side effects with ABECMA®

What is cytokine release syndrome (CRS)?

ABECMA can cause a very common side effect called cytokine release syndrome, or CRS, which can be severe or, in some cases, fatal. Cytokines are small immune proteins that have many different actions in the body, and treatments like ABECMA can sometimes cause a large, rapid release of these proteins into the blood, which can be harmful.

What does it feel like to have CRS?

After your infusion, you may want to call your healthcare provider if you experience any of the symptoms below:

- Fever
- Difficulty breathing
- Dizziness or lightheadedness
- Nausea
- Headache
- Fast heartbeat
- Low blood pressure
- Fatigue

Specialized healthcare teams are trained to monitor and manage side effects of ABECMA treatment if they occur.

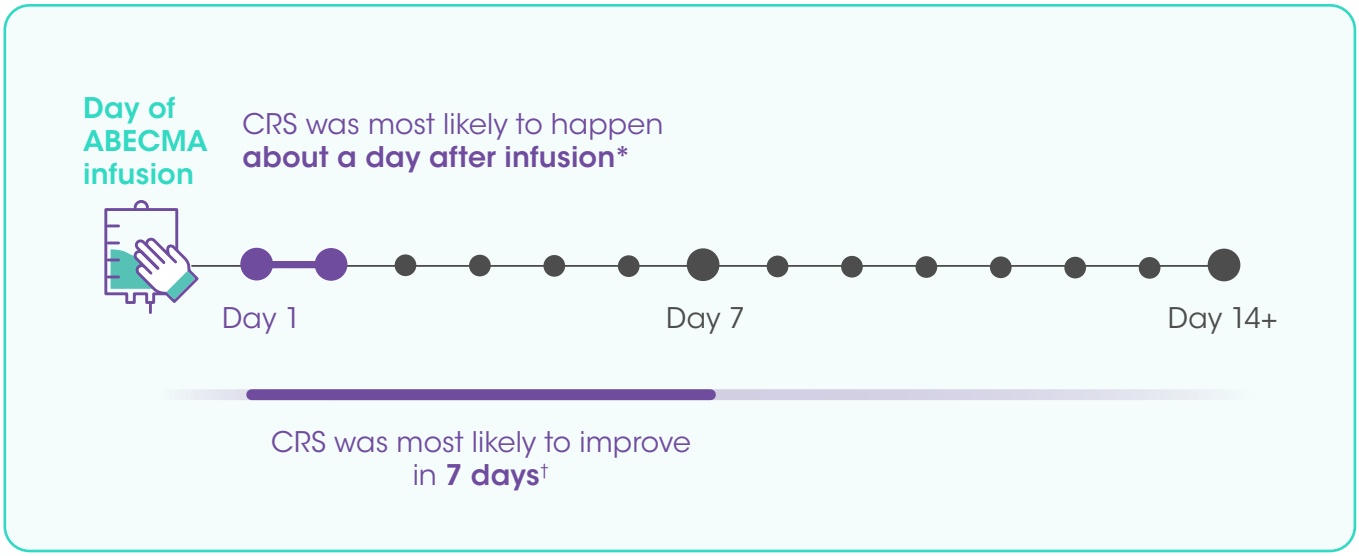
Possible side effects with ABECMA® (cont'd)

During the ABECMA clinical trial:

- **15% of participants (19/127)** did not report experiencing CRS
- **76% of participants (96/127)** experienced mild or moderate CRS
- **9% of participants (12/127)** experienced severe or life-threatening CRS, with 1 case leading to death

When might CRS happen, and how long might it last?

Based on the ABECMA clinical trial, CRS associated with ABECMA was likely to happen early, starting about a day after the infusion. In the clinical trial, CRS generally improved in about 7 days.



*The median time to onset was 1 day, with a range of 1 to 23 days.
†The median duration was 7 days, with a range of 1 to 63 days.

Possible side effects with ABECMA® (cont'd)

What are neurologic toxicities?

ABECMA can cause a very common side effect called neurologic toxicity, which can be severe. Neurologic toxicity affects the body's nervous system.

Neurologic toxicity can be felt as one or more neurological symptoms. Do not drive, operate heavy machinery, or do other activities that could be dangerous if you are not mentally alert for at least 8 weeks after you receive ABECMA.

What does it feel like to have neurologic toxicity?

After your infusion, you may want to call your healthcare provider if you experience any of the symptoms below:

- Confusion
- Seizures
- Shaking or twitching
- Difficulty speaking or slurred speech
- Disorientation
- Severe sleepiness

Specialized healthcare teams are trained to monitor and manage side effects of ABECMA treatment if they occur.

Possible side effects with ABECMA® (cont'd)

During the ABECMA clinical trial:

- **72% of participants (91/127)** did not report experiencing neurologic toxicity
- **25% of participants (31/127)** experienced mild or moderate neurologic toxicity
- **4% of participants (5/127)** experienced severe neurologic toxicity
- **No participants** experienced neurologic toxicity that was life-threatening or led to death*

When might neurologic toxicity happen, and how long might it last?

In the ABECMA clinical trial, neurologic toxicity was likely to happen early—starting within 2 days after the infusion and improving in about 5 days.

*In another multiple myeloma study, other serious side effects, including 1 patient with life-threatening neurologic toxicity, have been reported with ABECMA.

†The median time to onset was 2 days, with a range of 1 to 42 days.

‡The median duration was 5 days, with a range of 1 to 61 days in patients whose neurologic toxicity resolved. For patients who experienced neurologic toxicity, including 3 patients with ongoing neurologic toxicity, the median duration of neurologic toxicity was 6 days, with a range of 1 to 578 days.

Possible side effects with ABECMA® (cont'd)

How you may be monitored after your ABECMA infusion

In the weeks following your ABECMA infusion, you may be monitored for signs and symptoms of side effects. Work with your healthcare provider and follow the guidance of your treating physician.

Typical ABECMA timeline

WEEKS 1-4

FIRST 7 DAYS AFTER YOUR INFUSION

Monitoring at the treatment center

You will be monitored at the certified healthcare facility where you received your treatment daily for at least 7 days after the infusion.

WEEKS 2-4

You should plan to stay within 2 hours of the certified facility for at least 4 weeks after receiving ABECMA. Your healthcare team can monitor your progress and help you with any side effects that may occur.

Things you can do

- If you feel symptoms of CRS or neurologic toxicity, tell your healthcare provider right away
- Pay attention to anything that feels different
- Attend appointments at the treatment center

Things your caregiver can do

- Call your ABECMA care team if you experience any symptoms
- Take you to scheduled appointments at the treatment center

WEEK 4+

AFTER AT LEAST 4 WEEKS OF MONITORING

Long-term monitoring

- Do not drive, operate heavy machinery, or do other activities that could be dangerous if you are not mentally alert, for at least 8 weeks after you receive ABECMA
- Monitor side effects and tell your healthcare provider right away if you feel symptoms of CRS or neurologic toxicity

Possible side effects with ABECMA® (cont'd)

When should I call my healthcare provider or get immediate help?

ABECMA may cause side effects that are severe or life-threatening. Call your healthcare provider or get emergency help right away if you get any of the following:

- Difficulty breathing
- Fever (100.4°F/38°C or higher)
- Chills/shivering
- Confusion
- Dizziness or lightheadedness
- Shaking or twitching (tremor)
- Fast or irregular heartbeat
- Severe fatigue
- Severe nausea, vomiting, or diarrhea

It is important that you tell your healthcare provider that you have received ABECMA and to show them your ABECMA Patient Wallet Card. Your healthcare provider may give you other medicines to treat your side effects.

Common side effects associated with ABECMA

- Fatigue
- Fever (100.4°F/38°C or higher)
- Chills/shivering
- Severe nausea or diarrhea
- Decreased appetite
- Headache
- Dizziness/lightheadedness
- Confusion
- Difficulty speaking or slurred speech
- Cough
- Difficulty breathing
- Fast or irregular heartbeat

Your one-time infusion of ABECMA®

Not an actual patient.

A treatment process you can depend on*

There are 6 steps to treatment with ABECMA:

Blood collection (apheresis):
2-6 hours

CAR T cell creation:
About 4 weeks (times may vary)

Pre-infusion treatment:
3 days

ABECMA infusion:
Up to 30 min/infusion bag†

Initial monitoring:
At least 4 weeks

Long-term follow-up

Every patient is different, and the time it takes to complete the ABECMA treatment process may vary.

*There is a risk of manufacturing failure. In the ABECMA clinical trial, 2 out of 135 patients were impacted. Speak to your doctor for more information.
†Your dose of ABECMA may be given in 1 or more infusion bags.

Please see Important Safety Information throughout and click here for full Prescribing Information, including **Boxed WARNINGS** and Medication Guide.

Your one-time infusion of ABECMA® (cont'd)

Each step of your treatment is important, and your specialized healthcare team will be by your side to help along the way. Be sure to choose a caregiver you feel comfortable making decisions with, and don't hesitate to ask your healthcare team questions throughout the treatment process.

ABECMA comes with the risk of severe or life-threatening side effects. It is only available at certified treatment centers and must be infused by trained healthcare teams. Your doctor may refer you to a certified treatment center to be evaluated if you aren't already being treated at one.

Further reading: Refer to our Glossary on page 21 for definitions of multiple myeloma and CAR T cell therapy terms.

IMPORTANT SAFETY INFORMATION (cont'd)

What are the possible or reasonably likely side effects of ABECMA? (cont'd)

ABECMA can lower one or more types of your blood cells (red blood cells, white blood cells, or platelets), which may make you feel weak or tired or increase your risk of severe infection or bleeding. After treatment, your healthcare provider will test your blood to check for this. Tell your healthcare provider right away if you get a fever, are feeling tired, or have bruising or bleeding.

Having ABECMA in your blood may cause a false-positive human immunodeficiency virus (HIV) test result by some commercial tests.

This is a summary of the most important safety information about ABECMA. These are not all the possible side effects of ABECMA. Call your doctor for medical advice about side effects. For more information, go to www.ABECMA.com or call 1-888-805-4555. You may report side effects to the FDA. Visit http://www.fda.gov/medwatch, or call 1-800-FDA-1088.

Please see Important Safety Information throughout and click here for full Prescribing Information, including **Boxed WARNINGS** and Medication Guide.

Your one-time infusion of ABECMA® (cont'd)

What happens during each step of the ABECMA treatment process?

Step 1: Blood collection (apheresis)

Your immune cells will be collected through a process called apheresis (sometimes called leukapheresis)

- Your blood is collected (each of the components are separated into groups)
- Your T cells are removed (the other parts of your blood are returned back to your body)
- Apheresis can be done in 1 day and usually takes 2 to 6 hours

Step 2: CAR T cell creation

After your T cells are collected, they are sent to a specialized manufacturing laboratory to be made into ABECMA*

At the specialized manufacturing laboratory:

- "Hooks" called CARs are added to your T cells, creating ABECMA that is unique to you
- After your ABECMA is created, your ABECMA cells are multiplied
- This process takes about 4 weeks, but every patient's cells are different and process times may vary

Your healthcare provider may also recommend other treatments to manage your MM while your ABECMA is created and multiplied.

Step 3: Pre-infusion treatment

Shortly before your ABECMA infusion, you'll receive short-course chemotherapy for 3 days

- Short-course chemotherapy (3 days) helps prepare your body for ABECMA
- This type of chemotherapy is composed of 2 medications and is given to all patients who receive ABECMA

*There is a risk of manufacturing failure. In the ABECMA clinical trial, 2 out of 135 patients were impacted. Speak to your doctor for more information.

CARs=chimeric antigen receptors; MM=multiple myeloma.

Your one-time infusion of ABECMA® (cont'd)

What happens during each step of the ABECMA treatment process? (cont'd)

Step 4: One-time infusion of ABECMA

You'll receive ABECMA as a one-time intravenous infusion

- Your ABECMA infusion will take place at a certified treatment center by your trained healthcare team
- Your ABECMA infusion usually takes up to 30 minutes for each infusion bag*

Step 5: Follow-up monitoring

You'll be closely monitored for side effects following your ABECMA infusion

- You will be monitored at least daily for 7 days after the infusion
- Plan to stay close to the treatment center (within 2 hours) for at least 4 weeks after infusion so your healthcare team can help you with any side effects that may occur

Step 6: Long-term follow-up

You'll follow up with your healthcare team after at least 4 weeks of initial monitoring

- You and your healthcare team will work together to track your progress, including monitoring for potential side effects
- Additional scans and blood tests may also be needed
- Your long-term care, which will continue after treatment center monitoring, may be overseen by the healthcare provider who originally referred you

*Your dose of ABECMA may be given in 1 or more infusion bags.

The importance of caregivers

Caregivers play an essential role during your ABECMA® treatment journey. They are critical in lending a helping hand to support you before and after your ABECMA infusion.

Not an actual patient and caregiver.

Before your ABECMA infusion, caregivers may help:

- Take notes and ask questions at the doctor's office, and assist with scheduling appointments
- Organize and relay medical and insurance information to the healthcare team
- Assist with driving, meal prep, laundry, cleaning, and managing visitors

After your ABECMA infusion, caregivers may help:

- Watch for symptoms, side effects, and other changes in health and/or behaviors
- Check and record your temperature at least 3 times a day
- Speak to the healthcare team when you have questions
- Call 911 or your healthcare team in the event of a medical emergency

Are you a caregiver?

Being a caregiver can be stressful. It's okay to alternate caregivers if you need to take a break. Coordinate with friends and family as appropriate to ensure around-the-clock coverage while you get the help and support you need.

For more caregiver resources and information to help guide you on your treatment journey, please visit **ABECMA.com**.

Cell Therapy 360®: Your partner throughout the CAR T cell therapy treatment journey

Abecma™ (idecabtagene vicleucel) SUSPENSION FOR IV INFUSION

Cell Therapy 360™

Cell Therapy 360 offers assistance programs for you and your caregiver that are designed to support you throughout treatment and the initial post-infusion monitoring period (at least 4 weeks).

A dedicated Patient Support Navigator

Financial support

Eligibility requirements apply.

You may enroll in support programs after a certified CAR T cell therapy treatment center determines that ABECMA is the right treatment for you.

The services and support programs offered through Cell Therapy 360 are available only to people who are receiving a CAR T cell therapy from Bristol Myers Squibb, such as ABECMA. Certain restrictions and eligibility requirements apply.

To learn more about the support programs available through Cell Therapy 360:

- Talk to your healthcare team for more information
- Visit **CellTherapy360.com**
- Call **1-888-805-4555** (available Monday through Sunday, 24 hours a day)

Please see Important Safety Information throughout and click here for full Prescribing Information, including **Boxed WARNINGS** and Medication Guide.

Glossary of multiple myeloma and CAR T cell therapy terms

Abecma™ (idecabtagene vicleucel) SUSPENSION FOR IV INFUSION

Apheresis is a procedure in which blood is collected, part of the blood, such as platelets or white blood cells, is taken out, and the rest of the blood is returned to the patient.

B-cell maturation antigen (BCMA) is a specific marker found on normal and cancerous plasma cells, including nearly all myeloma cells, making it a target for multiple myeloma treatments.

CAR T cell therapy is a type of treatment in which a patient's T cells (a type of immune cell) are changed in a laboratory so they can attack target cells with a specific protein on their surface, such as BCMA.

Complete response (CR) or better is a term that means there is no detectable evidence of a tumor in the body (all signs of myeloma have disappeared). A CR does not mean the myeloma has been cured.

Duration of response is the length of time a patient continues to respond to therapy without their MM growing or spreading.

Follow-up time is the time between infusion and the most recent time point when data on the patient's outcomes were recorded.

Median is the middle number in a set of data. This means half the numbers in a group are more than the median, and half the numbers in the group are less than the median.

Overall response is the term used when there is a meaningful decrease in signs of myeloma. This includes partial response (a decrease in the amount of myeloma in the body) and complete response.

Short-course chemotherapy, or lymphodepleting chemotherapy, is a course of anticancer drugs given before CAR T cell therapy to help prepare your body for treatment.

T cells are a type of white blood cell that is part of the immune system. T cells develop from stem cells found in bone marrow and help protect the body from infection and abnormal cells, including cancer cells.

Abecma™
(idecabtagene vicleucel) SUSPENSION FOR IV INFUSION

BUILT ON NEARLY 25 YEARS OF INNOVATION IN MM
Bristol Myers Squibb™

Discover what is possible with a one-time* infusion of ABECMA®

- ABECMA may be right for you if you have tried at least 4 kinds of treatment regimens and have received at least 1 therapy from each of these drug classes:
  - **An IMiD® agent**
  - **A proteasome inhibitor**
  - **An anti-CD38 antibody**
- You may be eligible for ABECMA regardless of your eligibility for a stem cell transplant
- **ABECMA is a one-time infusion.** Repeated infusions, maintenance therapy, and daily pills are **NOT required for your MM while responding to ABECMA**

See real patient stories at ABECMA.com

AbecmaFinder.com can help you find a certified treatment center near you.

For a list of patient advocacy groups and caregiver organizations, please visit **ABECMA.com/resources/organizations**.

*The treatment process includes blood collection, CAR T cell creation, administration, and adverse event monitoring.

IMPORTANT SAFETY INFORMATION

What is the most important information I should know about ABECMA?

ABECMA may cause side effects that are severe or life-threatening. Call your healthcare provider or get emergency help right away if you get any of the following:

- difficulty breathing
- fever (100.4°F/38°C or higher)
- chills/shivering
- confusion
- dizziness or lightheadedness
- shaking or twitching (tremor)
- fast or irregular heartbeat
- severe fatigue
- severe nausea, vomiting, diarrhea

It is important that you tell your healthcare providers that you have received ABECMA and to show them your ABECMA Patient Wallet Card. Your healthcare provider may give you other medicines to treat your side effects.

Please see Important Safety Information throughout and click here for full Prescribing Information, including **Boxed WARNINGS** and Medication Guide.

Bristol Myers Squibb™ | 2seventybio™