



CREATING AN ORDER SET OR PROTOCOL WITH BEXLUTRY

INSTRUCTIONS FOR THE EPIC® ELECTRONIC HEALTH RECORD (EHR) SYSTEM

INDICATIONS AND USAGE

Bexlutry™ (lutetium Lu 177 dotatate injection) is indicated for the treatment of adults with somatostatin receptor-positive gastroenteropancreatic neuroendocrine tumors (GEP-NETs), including foregut, midgut, and hindgut neuroendocrine tumors.

IMPORTANT SAFETY INFORMATION WARNINGS AND PRECAUTIONS

- **Risk From Radiation Exposure:** Bexlutry contributes to a patient's overall long-term cumulative radiation exposure. Long-term cumulative radiation exposure is associated with an increased risk for cancer. These risks of radiation associated with the use of Bexlutry are greater in pediatric patients than in adults.
Radiation can be detected in the urine for up to 30 days following Bexlutry administration. Minimize radiation exposure to patients, medical personnel, and household contacts during and after treatment with Bexlutry consistent with institutional good radiation safety practices, patient management procedures, Nuclear Regulatory Commission patient-release guidance, and instructions to the patient for follow-up radiation protection at home.
- **Myelosuppression:** In NETTER-1, myelosuppression occurred more frequently in patients receiving lutetium Lu 177 dotatate injection with long-acting octreotide compared to patients receiving high-dose long-acting octreotide (all Grades/Grade 3 or 4): anemia (81%/0) versus (54%/1%); thrombocytopenia (53%/1%) versus (17%/0); and neutropenia (26%/3%) versus (11%/0). In NETTER-1, platelet nadir occurred at a median of 5.1 months following the first dose. Of the 59 patients who developed thrombocytopenia, 68% had platelet recovery to baseline or normal levels. The median time to platelet recovery was 2 months. Fifteen of the nineteen patients in whom platelet recovery was not documented had post-nadir platelet counts. Among these 15 patients, 5 improved to Grade 1, 9 to Grade 2, and 1 to Grade 3. Monitor blood cell counts. Withhold dose, reduce dose, or permanently discontinue Bexlutry based on the severity of myelosuppression.

Please see additional Important Safety Information on pages 20-22 and full [Prescribing Information](#).

CURIUM

TABLE OF CONTENTS

Overview and Limitations 3

Order Set and Protocol Considerations..... 4

 Suggested Order Set/Protocol Content 4

Order Set and Protocol Instructions 8

 Option 1: Order Set 8

 Option 2: Protocol..... 13

Disclaimers..... 18

Appendix..... 19

OVERVIEW AND LIMITATIONS

This document is intended to provide health systems with instructions to create an order set or protocol in the Epic® EHR system with BEXLUTRY (lutetium Lu 177 dotatate injection) for adults with somatostatin receptor-positive gastroenteropancreatic neuroendocrine tumors (GEP-NETs), including foregut, midgut, and hindgut neuroendocrine tumors.

These instructions are specific to BEXLUTRY and the Epic EHR system and are not appropriate for other conditions, treatments, or therapeutic areas or for other EHR systems.

The processes outlined in this document are variable, and **not all steps will apply to every organization**. Any steps or settings that are not part of an organization's standard process should be excluded or modified accordingly. Any questions should be directed to the appropriate service provider. The organization is solely responsible for the implementation, testing, monitoring, and ongoing operation of any EHR tools.

ORDER SET AND PROTOCOL CONSIDERATIONS

Order sets and protocols may contain notes, referrals, imaging studies, lab orders and bundles, medications, immunizations, patient education, coding and billing information, and other orderable items used to manage a condition, problem, or age-specific need. Order sets and protocols may improve the user experience and help reduce practice variation. **Order sets and protocols will need to be built by a clinical analyst or an IT colleague.**

Whether to build an order set or protocol for BEXLUTRY will largely depend on which staff members are involved in administering BEXLUTRY and where the infusion is performed. Generally, outpatient procedural and nononcology areas, including nuclear medicine, will use order sets, called “SmartSets” in Epic (see [Option 1](#) in the instructions section), whereas oncology areas and procedures driven primarily by oncology staff will use protocols, called “Beacon protocols” in Epic (see [Option 2](#) in the instructions section).

Use the same process and tools that your organization utilizes for other nuclear medicine therapies. If your organization does not have a defined process, try to keep all information within a single tool to simplify the process for staff following multiple workflows.

Order sets and protocols are typically created and modified at the health system level to help reduce practice variation. Engage the appropriate committees and stakeholders for clinical input well ahead of the planned implementation date.

Suggested Order Set/Protocol Content

BEXLUTRY is a radiolabeled somatostatin analog indicated for the treatment of adult patients with somatostatin receptor-positive GEP-NETs, including foregut, midgut, and hindgut neuroendocrine tumors.

Key clinical details from the BEXLUTRY Prescribing Information are included in this section and may be incorporated as part of the order set or protocol creation using the steps in the instructions section that follows. The Prescribing Information details in this section are only suggestions, and it is strongly recommended that clinical and operational leadership align the order set or protocol contents with the expectations and goals of the organization. The organization may add or edit any details as desired to align with governing EHR policies and standards.

Please consult the most recent version of the BEXLUTRY [Prescribing Information](#) for full treatment details.

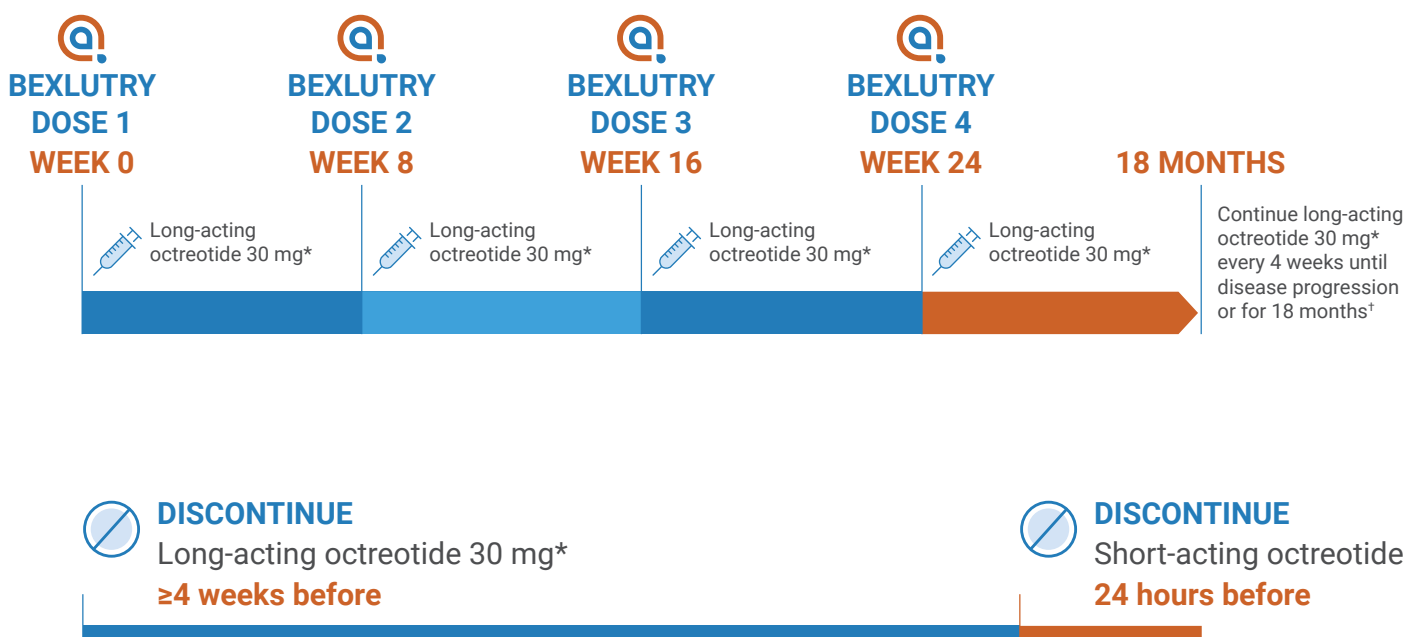
ORDER SET AND PROTOCOL CONSIDERATIONS (CONT'D)

Recommended Dosage

The recommended BEXLUTRY dosage for adult patients is 7.4 GBq (200 mCi) every 8 weeks (± 1 week) for a total of 4 doses. Administer premedications and concomitant medications as recommended [see Dosage and Administration (2.3)].

BEXLUTRY Dosing Overview

The recommended dosage of BEXLUTRY is 7.4 GBq (200 mCi) given intravenously every 8 weeks (± 1 week), for a total of 4 doses.¹



*Administer long-acting octreotide 30 mg intramuscularly (IM) between 4 and 24 hours after each dose of BEXLUTRY. Do not administer long-acting octreotide within 4 weeks prior to each subsequent dose of BEXLUTRY.¹

†Continue long-acting octreotide 30 mg IM every 4 weeks after completing BEXLUTRY until disease progression or for 18 months following treatment initiation, at the discretion of a physician.¹

Prior to the first dose of BEXLUTRY, check labs, creatinine clearance, and Karnofsky performance status, as well as verify pregnancy status of patients with reproductive potential.^{1,2}

Radiation dose measurement: BEXLUTRY, containing 370 MBq/mL (10 mCi/mL) of lutetium Lu 177 dotatate, is a sterile, preservative-free, clear, colorless-to-yellow solution. It is supplied in a clear, colorless, Type I glass, 30-mL single-dose vial containing 7.4 GBq (200 mCi) $\pm 10\%$ of lutetium Lu 177 dotatate at the time of injection. The solution volume in the vial ranges between 23 and 25 mL to provide a total of 7.4 GBq (200 mCi) of radioactivity.¹

Please see Important Safety Information on cover and pages 20-22 and full [Prescribing Information](#).

 **Bexlutry™**
(lutetium Lu 177 dotatate injection)
for intravenous use

ORDER SET AND PROTOCOL CONSIDERATIONS (CONT'D)

Administration

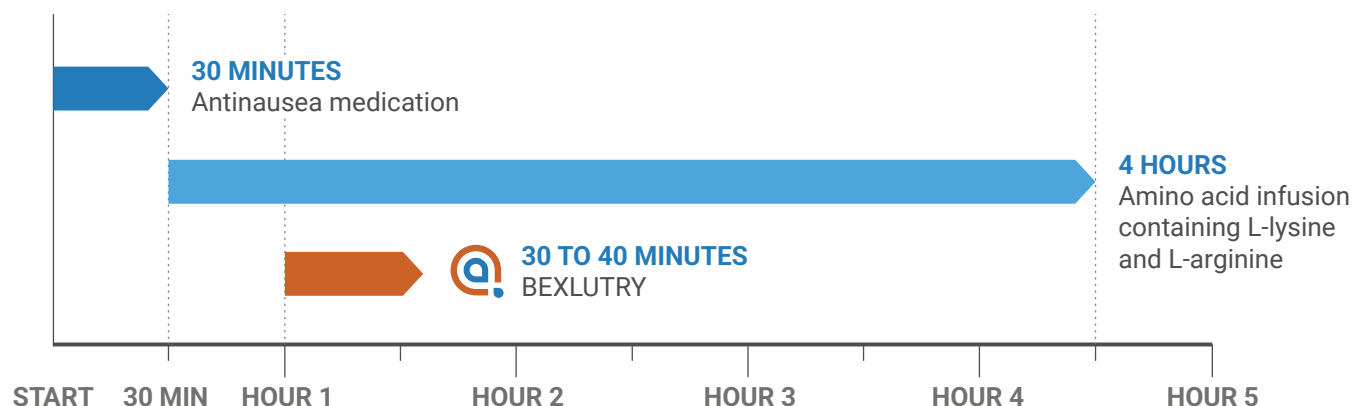
- Verify pregnancy status of females of reproductive potential prior to initiating BEXLUTRY
- Administer 7.4 GBq (200 mCi) every 8 weeks ($\pm$ 1 week) for a total of 4 doses
- Administer long-acting octreotide 30 mg intramuscularly 4 to 24 hours after each BEXLUTRY dose and short-acting octreotide for symptomatic management
- Continue long-acting octreotide 30 mg intramuscularly every 4 weeks after completing BEXLUTRY until disease progression or for 18 months following treatment initiation
- Do not administer long-acting octreotide within 4 weeks prior to each subsequent BEXLUTRY dose
- Administer antiemetics before recommended amino acid solution
- Initiate recommended intravenous amino acid solution 30 minutes before BEXLUTRY infusion; continue during and for at least 3 hours after BEXLUTRY infusion. Do not decrease dose of amino acid solution if BEXLUTRY dose is reduced
- The gravity method, peristaltic pump method, or the syringe pump method may be used for the administration of the recommended dosage. Do not administer BEXLUTRY as an intravenous bolus
- When using the gravity or peristaltic pump method, infuse BEXLUTRY directly from its original container
- Use the peristaltic pump or syringe pump method when administering a reduced dose of BEXLUTRY following a dosage modification for an adverse reaction. When using the gravity method for a reduced dose, adjust the BEXLUTRY dose before the administration to avoid the delivery of an incorrect volume of BEXLUTRY

ORDER SET AND PROTOCOL CONSIDERATIONS (CONT'D)

Administration (cont'd)

During Administration of BEXLUTRY

Recommended timing for the administration of premedications, concomitant medications, and BEXLUTRY¹



- ✓ **Confirm the patient has discontinued SSAs** prior to infusion¹
- ✓ **Verify a dated and signed written directive** per 10 CFR 35.40³
- ✓ **Confirm the amount of radioactivity** of BEXLUTRY delivered to the patient with an appropriate dose calibrator prior to and after each dose¹
- ✓ **Administer antiemetics** before the amino acid solution to prevent nausea and vomiting¹
- ✓ **Administer amino acid solution** containing L-lysine and L-arginine intravenously **30 minutes** before administering BEXLUTRY. Continue the infusion during and for at least **3 hours** after the infusion of BEXLUTRY. Do not decrease the dose of the amino acid solution if the dose of BEXLUTRY is reduced¹
- ✓ **Administer BEXLUTRY** infusion (approximately **30 to 40 minutes**)¹
 - **Same venous access:** Co-administer amino acids and BEXLUTRY via a 3-way stopcock or
 - **Different venous access:** Use separate lines, administering amino acids in one arm and BEXLUTRY in the other

Abbreviation: CFR, Code of Federal Regulations.

Please see Important Safety Information on cover and pages 20-22 and full [Prescribing Information](#).

 **Bexlutry**[™]
(lutetium Lu 177 dotatate injection)
for intravenous use

ORDER SET AND PROTOCOL INSTRUCTIONS

Order sets (SmartSets) or protocols (Beacon protocols) may be used to set up BEXLUTRY in Epic. Both options are included in the instructions that follow.

Option 1: Order Set

An existing SmartSet may serve as the foundation for a new one. Consider modifying an existing SmartSet (such as one for LUTATHERA) while saving the original.

There are 4 main steps to creating a SmartSet in the Epic EHR system:

Step 1: Create a new SmartSet, ideally by copying an existing SmartSet for another therapeutic radiopharmaceutical.

Step 2: Create the SmartGroups. Multiple BEXLUTRY-related SmartGroups may be created, including those for BEXLUTRY, premedications, treatment conditions, monitoring and hold parameters, warnings and precautions, supportive care, schedulable orders, healthcare provider (HCP) communications, and hydration. Review your organization's governing rules and principles for SmartSet builds and adjust the groups as appropriate.

Note: The same SmartGroups may be used in different SmartSets. Take care to not inadvertently affect other SmartSets when making build changes to existing SmartGroups. If working from a copy of an existing SmartSet, be sure to create copies of existing SmartGroups to avoid impacting other SmartSets.

Step 3: Add links for the BEXLUTRY Prescribing Information and other resources to the medication record.

Step 4: Add the SmartGroups created in Step 2 to the new SmartSet, and fill in the SmartSet details.

ORDER SET AND PROTOCOL INSTRUCTIONS (CONT'D)

Step 1: Create a new SmartSet

1. In Hyperspace, navigate to the SmartSet Builder (Epic button > Admin > Decision Support > SmartSets).
2. Search for an existing therapeutic radiopharmaceutical SmartSet (or another similar SmartSet) and open it.

Note: If a similar SmartSet does not exist, select the Create New button.

3. After opening the existing SmartSet, select the Save As button.
4. Give the new SmartSet an ID and name that conform to your organization's build standards (eg, "BEXLUTRY for SSTR+ GEP-NET – Adult").
5. Update the description for the new SmartSet. Consider the suggestion below, or select another description to align with your organization's standards:

"BEXLUTRY is a radiolabeled somatostatin analog indicated for the treatment of adult patients with somatostatin receptor-positive gastroenteropancreatic neuroendocrine tumors (GEP-NETs), including foregut, midgut, and hindgut neuroendocrine tumors."

6. Update the synonyms for the SmartSet. Consider adding abbreviations, generic names, tumor type, tumor location, and other values specific to the SmartSet (eg, "BEXLUTRY," "lutetium," "Lu 177," "lutetium dotatate," any common misspellings of "BEXLUTRY" or its generic name).

Step 2: Create the SmartGroups

1. In Hyperspace, navigate to the SmartGroup Editor (Epic button > Admin > Decision Support > SmartGroup Editor).
2. Create the new SmartGroups (see detailed examples starting on the next page).

Note: If you started by copying an existing SmartSet in the Step 1 section, it may be easier and more efficient to create copies of existing SmartGroups and modify them, when necessary. To do this, scroll to the SmartGroup in the Configuration section, right-click on the SmartGroup, and select Edit SmartGroup. After the SmartGroup opens, select Save As and then follow the steps starting on the next page.

Abbreviation: SSTR+, somatostatin receptor-positive.

Please see Important Safety Information on cover and pages 20-22 and full [Prescribing Information](#).

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ORDER SET AND PROTOCOL INSTRUCTIONS (CONT'D)

Step 2: Create the SmartGroups (cont'd)

SmartGroup 1: BEXLUTRY for SSTR+ GEP-NET – Adult

1. Create a new SmartGroup named “BEXLUTRY for SSTR+ GEP-NET – Adult,” or follow your organization’s standard naming conventions.
2. Select Add Item, choose Inpatient Order as the item type, and search for BEXLUTRY.
3. Complete the inpatient medication details for BEXLUTRY. Details may include dose, route, frequency, offset time, admin over, and any special administration instructions or order comments for nurses, pharmacists, or HCPs. Consider the following clinical details from Section 2 of the BEXLUTRY Prescribing Information:
 - The recommended BEXLUTRY dosage for adult patients is 7.4 GBq (200 mCi) every 8 weeks ($\pm$ 1 week) for a total of 4 doses
 - Administer long-acting octreotide 30 mg intramuscularly 4 to 24 hours after each BEXLUTRY dose and short-acting octreotide for symptomatic management
 - Continue long-acting octreotide 30 mg intramuscularly every 4 weeks after completing BEXLUTRY until disease progression or for 18 months following treatment initiation

User note: This post-treatment supportive care guidance should be configured as a separate Therapy Plan, which is not covered in this guide.

- Administer antiemetics before recommended amino acid solution
 - Initiate recommended intravenous amino acid solution 30 minutes before BEXLUTRY infusion; continue during and for at least 3 hours after BEXLUTRY infusion. Do not decrease dose of amino acid solution if BEXLUTRY dose is reduced
 - The gravity method, peristaltic pump method, or the syringe pump method may be used for the administration of the recommended dosage. Do not administer BEXLUTRY as an intravenous bolus
 - When using the gravity or peristaltic pump method, infuse BEXLUTRY directly from its original container
 - Use the peristaltic pump or syringe pump method when administering a reduced dose of BEXLUTRY following a dosage modification for an adverse reaction. When using the gravity method for a reduced dose, adjust the BEXLUTRY dose before the administration to avoid the delivery of an incorrect volume of BEXLUTRY
4. Add a phase of care to any new orders.

Note: It is important for any orders that should be active immediately to have a phase of care that will be active upon sign/release.
 5. Save the SmartGroup and release the contact.

ORDER SET AND PROTOCOL INSTRUCTIONS (CONT'D)

Step 2: Create the SmartGroups (cont'd)

SmartGroup 2: Concomitant Octreotide

1. Create a new SmartGroup named "Concomitant Octreotide for SSTR+ GEP-NET – Adult," or follow your organization's standard naming conventions.
2. Select Add Item, choose Inpatient Order as the item type, and search for octreotide.
3. Complete the inpatient medication details for octreotide. Consider the following clinical details for octreotide as a concomitant medication with BEXLUTRY:
 - Octreotide, long-acting: 30 mg intramuscularly 4 to 24 hours after each BEXLUTRY dose
 - Do not administer long-acting octreotide within 4 weeks prior to each subsequent BEXLUTRY dose
4. Add a phase of care to any new orders.

Note: It is important for any orders that should be active immediately to have a phase of care that will be active upon sign/release.
5. Save the SmartGroup and release the contact.

Additional SmartGroups (as needed)

1. Consider creating additional SmartGroups as needed to align with Section 2 of the BEXLUTRY Prescribing Information, including for:
 - Antiemetics
 - Prophylactic hypersensitivity medication
 - Amino acid solution (see the [Appendix](#) for administration details)
 - Short-acting octreotide for symptom management
 - Any additional nursing, monitoring, line maintenance, or PRN/emergency medications in alignment with your organization's standards

ORDER SET AND PROTOCOL INSTRUCTIONS (CONT'D)

Step 3: Add links for the BEXLUTRY Prescribing Information and other resources

1. Log in to the Medication Master File (ERX) with authorized user credentials.
2. Use the search feature in the Medication Master File to search for and select BEXLUTRY.
3. Select the Patient Medication References screen and create 4 new rows:
 - Row 1
 - For Display Name, enter “BEXLUTRY Prescribing Information”
 - In the URL field, enter this hyperlink: <https://www.curiumpharma.com/wp-content/uploads/Bexlutry-PI.pdf>
 - Row 2
 - For Display Name, enter “Additional Resources for Healthcare Providers”
 - In the URL field, enter this hyperlink: <https://www.bexlutryhcp.com/resources>
 - Row 3
 - For Display Name, enter “Additional Resources for Patients and Caregivers”
 - In the URL field, enter this hyperlink: <https://www.bexlutry.com/resources>
 - Row 4
 - For Display Name, enter “Instructions for Use”
 - In the URL field, enter this hyperlink: <https://www.bexlutryhcp.com/wp-content/uploads/BEXLUTRY-Administration-Guide.pdf>
4. Save the medication record.
5. Release the record to the production environment after completing testing.

Step 4: Add the SmartGroups to the new SmartSet

1. In Hyperspace, navigate to the SmartSet Builder (Epic button > Admin > Decision Support > SmartSets).
2. Open the SmartSet created in the Step 1 section.
3. In the Configuration tab, add all the newly created or modified SmartGroups from the Step 2 section to the SmartSet.
4. Click Save.
5. Release the SmartSet and migrate it to the production environment after completing testing.

ORDER SET AND PROTOCOL INSTRUCTIONS (CONT'D)

Option 2: Protocol

An existing Beacon protocol may serve as the foundation for a new one. Consider modifying an existing protocol (such as one for LUTATHERA) while saving the original.

There are 4 main steps to creating a protocol in the Epic EHR system:

Step 1: Create a new protocol, ideally by copying an existing protocol for another therapeutic radiopharmaceutical.

Step 2: Create the order groups. Multiple BEXLUTRY-related order groups may be created, including those for BEXLUTRY, premedications, treatment conditions, monitoring and hold parameters, warnings and precautions, supportive care, schedulable orders, HCP communications, and hydration. Review your organization's governing rules and principles for protocol builds and adjust the groups as appropriate.

Note: The same order groups may be used in different protocols. Take care to not inadvertently affect other protocols when making build changes to existing order groups. If working from a copy of an existing protocol, be sure to create copies of existing order groups to avoid impacting other protocols.

Step 3: Add links for the BEXLUTRY Prescribing Information and other resources to the medication record.

Step 4: Add the order groups created in Step 2 to the new protocol, and fill in the protocol details.

ORDER SET AND PROTOCOL INSTRUCTIONS (CONT'D)

Step 1: Create a new protocol

1. In Hyperspace, navigate to the Protocol Builder (Epic button > Admin > Beacon Admin > Protocol Builder).
2. Search for an existing therapeutic radiopharmaceutical protocol (or another similar protocol) and open it.
Note: If a similar protocol does not exist, select the Create New button.
3. After opening the existing protocol, select the Save As button.
4. Give the new protocol an ID and name that conform to your organization's build standards (eg, "BEXLUTRY for SSTR+ GEP-NET – Adult").
5. Update the description for the new protocol. Consider the suggestion below, or select another description to align with your organization's standards:
"BEXLUTRY is a radiolabeled somatostatin analog indicated for the treatment of adult patients with somatostatin receptor-positive gastroenteropancreatic neuroendocrine tumors (GEP-NETs), including foregut, midgut, and hindgut neuroendocrine tumors."
6. Update the synonyms for the protocol. Consider adding abbreviations, generic names, tumor type, tumor location, and other values specific to the protocol (eg, "BEXLUTRY," "lutetium," "Lu 177," "lutetium dotatate," any common misspellings of "BEXLUTRY" or its generic name).
7. Update the clinical study reference for BEXLUTRY (consider a link to the Clinical Studies [14] section of the BEXLUTRY Prescribing Information).

Step 2: Create the order groups

1. Review the Regimen Category Order Group to confirm that Radiation Therapy, Premedications, Treatment Conditions, and Supportive Medications (or similar sections that already exist, following your organization's protocol build standards) are values in the category list.
2. In Hyperspace, navigate to the Order Group Builder (Epic button > Admin > Beacon Admin > Order Group Builder).
3. Create the new order groups (see detailed examples starting on the next page).
Note: If you started by copying an existing protocol in the Step 1 section, it may be easier and more efficient to create copies of existing order groups and modify them, when necessary. To do this, right-click on the order group within the protocol record, select Open, and then select Save As. Next, follow the steps starting on the next page.

ORDER SET AND PROTOCOL INSTRUCTIONS (CONT'D)

Step 2: Create the order groups (cont'd)

Order Group 1: BEXLUTRY for SSTR+ GEP-NET – Adult

1. Create a new order group named “BEXLUTRY for SSTR+ GEP-NET – Adult,” or follow your organization’s standard naming conventions.
2. Set the default category to Radiation Therapy or an equivalent treatment category at your organization.
3. Select Add Order, search for BEXLUTRY, and select the appropriate option under the Inpatient Medications section in the preference search window.
4. Complete the inpatient medication details for BEXLUTRY. Details may include dose, route, frequency, offset time, admin over, and any special administration instructions or order comments for nurses, pharmacists, or HCPs. Consider the following clinical details from Section 2 of the BEXLUTRY Prescribing Information:
 - The recommended BEXLUTRY dosage for adult patients is 7.4 GBq (200 mCi) every 8 weeks ($\pm$ 1 week) for a total of 4 doses
 - Administer long-acting octreotide 30 mg intramuscularly 4 to 24 hours after each BEXLUTRY dose and short-acting octreotide for symptomatic management
 - Continue long-acting octreotide 30 mg intramuscularly every 4 weeks after completing BEXLUTRY until disease progression or for 18 months following treatment initiation

User note: This post-treatment supportive care guidance should be configured as a separate Therapy Plan, which is not covered in this guide.

- Administer antiemetics before recommended amino acid solution
 - Initiate recommended intravenous amino acid solution 30 minutes before BEXLUTRY infusion; continue during and for at least 3 hours after BEXLUTRY infusion. Do not decrease dose of amino acid solution if BEXLUTRY dose is reduced
 - The gravity method, peristaltic pump method, or the syringe pump method may be used for the administration of the recommended dosage. Do not administer BEXLUTRY as an intravenous bolus
 - When using the gravity or peristaltic pump method, infuse BEXLUTRY directly from its original container
 - Use the peristaltic pump or syringe pump method when administering a reduced dose of BEXLUTRY following a dosage modification for an adverse reaction. When using the gravity method for a reduced dose, adjust the BEXLUTRY dose before the administration to avoid the delivery of an incorrect volume of BEXLUTRY
5. Once all the desired information is added, release and migrate the order group to the production environment after completing testing.

ORDER SET AND PROTOCOL INSTRUCTIONS (CONT'D)

Step 2: Create the order groups (cont'd)

Order Group 2: Concomitant Octreotide

1. Create a new order group named "Concomitant Octreotide for SSTR+ GEP-NET – Adult," or follow your organization's standard naming conventions.
2. Set the default category to Supportive Care or an equivalent treatment category at your organization.
3. Select Add Order, search for octreotide, and select the appropriate option under the Inpatient Medications section in the preference search window.
4. Complete the inpatient medication details for octreotide. Consider the following clinical details for octreotide as a concomitant medication with BEXLUTRY:
 - Octreotide, long-acting: 30 mg intramuscularly 4 to 24 hours after each BEXLUTRY dose
 - Do not administer long-acting octreotide within 4 weeks prior to each subsequent BEXLUTRY dose
5. Once all the desired information is added, release and migrate the order group to the production environment after completing testing.

Additional Order Groups (as needed)

1. Consider creating additional order groups as needed to align with Section 2 of the BEXLUTRY Prescribing Information, including for:
 - Antiemetics
 - Prophylactic hypersensitivity medication
 - Amino acid solution (see the [Appendix](#) for administration details)
 - Short-acting octreotide for symptom management
 - Any additional nursing, monitoring, line maintenance, or PRN/emergency medications in alignment with your organization's standards

ORDER SET AND PROTOCOL INSTRUCTIONS (CONT'D)

Step 3: Add links for the BEXLUTRY Prescribing Information and other resources

1. Log in to the Medication Master File (ERX) with authorized user credentials.
2. Use the search feature in the Medication Master File to search for and select BEXLUTRY.
3. Select the Patient Medication References screen and create 4 new rows:
 - Row 1
 - For Display Name, enter “BEXLUTRY Prescribing Information”
 - In the URL field, enter this hyperlink: <https://www.curiumpharma.com/wp-content/uploads/Bexlutry-PI.pdf>
 - Row 2
 - For Display Name, enter “Additional Resources for Healthcare Providers”
 - In the URL field, enter this hyperlink: <https://www.bexlutryhcp.com/resources>
 - Row 3
 - For Display Name, enter “Additional Resources for Patients and Caregivers”
 - In the URL field, enter this hyperlink: <https://www.bexlutryhcp.com/resources>
 - Row 4
 - For Display Name, enter “Instructions for Use”
 - In the URL field, enter this hyperlink: <https://www.curiumpharma.com/wp-content/uploads/Bexlutry-PI.pdf>
4. Save the medication record.
5. Release the record to the production environment after completing testing.

Step 4: Add the order groups to the new protocol

1. Open the protocol created in the Step 1 section.
2. In the Configuration tab, modify or add the cycle length as 56 days (8-week cycle) for 4 cycles.
3. Add all the newly created or modified order groups from the Step 2 section to the protocol.
4. Click Save.
5. Release the protocol and migrate it to the production environment after completing testing.

DISCLAIMERS

- The customer (eg, physician, medical group, integrated delivery network) shall be solely responsible for the implementation, testing, and monitoring of the instructions to ensure proper orientation in each customer's EHR system
- Capabilities, functionality, and setup (customization) for each EHR system may vary. Curium shall not be responsible for revising the implementation instructions it provides to any customer if the customer modifies or changes its software, or the configuration of its EHR system, after such time as the implementation instructions have been initially provided by Curium
- While Curium tests its implementation instructions on multiple EHR systems, the instructions are not guaranteed to work for all available EHR systems, and Curium shall have no liability thereto
- While EHRs may assist providers in identifying appropriate patients for consideration of assessment, treatment, and referral, the decision and action should ultimately be decided by a provider in consultation with the patient, after a review of the patient's records to determine eligibility, and Curium shall have no liability thereto
- The instructions have not been designed for, and are not tools and/or solutions for, meeting Advancing Care Information and/or any other quality/accreditation requirement
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APPENDIX

Initiate an intravenous infusion of a sterile amino acid solution containing L-lysine and L-arginine 30 minutes before the start of the BEXLUTRY infusion and continue during and for at least 3 hours after the BEXLUTRY infusion.

Table 1. Amino Acid Solution

Item	Specification
L-lysine HCl	Between 18 and 25 g*
L-arginine HCl	Between 18 and 25 g†
Volume	1 to 2 L
Osmolality	<1200 mOsmol/kg

*Equivalent to 14.4 to 20 g L-lysine.

†Equivalent to 14.9 to 20.7 g L-arginine.

IMPORTANT SAFETY INFORMATION

IMPORTANT SAFETY INFORMATION (cont'd)

WARNINGS AND PRECAUTIONS (cont'd)

- Secondary Myelodysplastic Syndrome (MDS) and Leukemia: In NETTER-1, with a median follow-up time of 76 months in the main study, myelodysplastic syndrome (MDS) was reported in 2.3% of patients receiving lutetium Lu 177 dotatate injection with long-acting octreotide compared to no patients receiving high-dose long-acting octreotide.

In ERASMUS, 16 patients (2.0%) developed MDS and 4 (0.5%) developed acute leukemia. The median time to onset was 29 months (9 to 45 months) for MDS and 55 months (32 to 125 months) for acute leukemia.

- Renal Toxicity: In ERASMUS, 8 patients (< 1%) developed renal failure 3 to 36 months following lutetium Lu 177 dotatate injection. Two of these patients had underlying renal impairment or risk factors for renal failure (e.g., diabetes or hypertension) and required dialysis.

Administer the recommended amino acid solution before, during and after Bexlutry to decrease the reabsorption of lutetium Lu 177 dotatate through the proximal tubules and decrease the radiation dose to the kidneys. Advise patients to hydrate and to urinate frequently before, on the day of, and the day after administration of Bexlutry.

Monitor serum creatinine and calculated creatinine clearance. Withhold dose, reduce dose, or permanently discontinue Bexlutry based on the severity of renal toxicity.

Patients with baseline renal impairment may be at increased risk of toxicity due to increased radiation exposure.

- Hepatotoxicity: In ERASMUS, 2 patients (< 1%) were reported to have hepatic tumor hemorrhage, edema, or necrosis, with one patient experiencing intrahepatic congestion and cholestasis. Patients with hepatic metastasis may be at increased risk of hepatotoxicity due to radiation exposure.

Monitor transaminases, bilirubin, serum albumin, and international normalized ratio (INR) during treatment. Withhold dose, reduce dose, or permanently discontinue Bexlutry based on the severity of hepatotoxicity.

- Hypersensitivity Reactions: Hypersensitivity reactions, including angioedema, occurred in patients treated with lutetium Lu 177 dotatate injection. Monitor patients closely for signs and symptoms of hypersensitivity reactions, including anaphylaxis, during and following Bexlutry administration for a minimum of 2 hours in a setting where cardiopulmonary resuscitation medication and equipment are available. Discontinue the infusion upon the first observation of any signs or symptoms consistent with a severe hypersensitivity reaction and initiate appropriate therapy.

Premedicate patients with a history of Grade 1 or 2 hypersensitivity reactions to Bexlutry before subsequent doses. Permanently discontinue Bexlutry in patients who experience Grade 3 or 4 hypersensitivity reactions.

IMPORTANT SAFETY INFORMATION

IMPORTANT SAFETY INFORMATION (cont'd)

WARNINGS AND PRECAUTIONS (cont'd)

- **Neuroendocrine Hormonal Crisis:** Neuroendocrine hormonal crises, manifesting with flushing, diarrhea, bronchospasm and hypotension, occurred in < 1% of patients in ERASMUS and typically occurred during or within 24 hours following the initial lutetium Lu 177 dotatate injection dose. Two (< 1%) patients were reported to have hypercalcemia. Monitor patients for flushing, diarrhea, hypotension, bronchoconstriction or other signs and symptoms of tumor-related hormonal release. Administer intravenous somatostatin analogs, fluids, corticosteroids, and electrolytes as indicated.
- **Embryo-Fetal Toxicity:** Based on its mechanism of action, Bexlutry can cause fetal harm when administered to a pregnant woman. Verify pregnancy status of females of reproductive potential prior to initiating Bexlutry. Advise pregnant women of the potential risk to a fetus. Advise females of reproductive potential to use effective contraception during treatment with Bexlutry and for 7 months after the last dose. Advise males with female partners of reproductive potential to use effective contraception during treatment with Bexlutry and for 4 months after the last dose.
- **Risk of Infertility:** Bexlutry may cause infertility in males and females. The recommended cumulative dose of 29.6 GBq of Bexlutry results in a radiation absorbed dose to the testes and ovaries within the range where temporary or permanent infertility can be expected following external beam radiotherapy.

ADVERSE REACTIONS

The most common Grade 3-4 adverse reactions ($\geq 4\%$ with a higher incidence in lutetium Lu 177 dotatate injection arm) reported in NETTER-1 were lymphopenia, increased GGT, vomiting, nausea, increased AST, increased ALT, hyperglycemia and hypokalemia.

With a median follow-up time of more than 4 years, the following rates of serious adverse reactions were reported in ERASMUS: myelodysplastic syndrome (2%), acute leukemia (1%), renal failure (2%), hypotension (1%), cardiac failure (2%), myocardial infarction (1%), and neuroendocrine hormonal crisis (1%).

DRUG INTERACTIONS

Somatostatin Analogs: Somatostatin and its analogs competitively bind to somatostatin receptors and may interfere with the efficacy of Bexlutry. Discontinue long-acting somatostatin analogs at least 4 weeks and short-acting octreotide at least 24 hours prior to each Bexlutry dose. Administer short- and long-acting octreotide during Bexlutry treatment as recommended.

Glucocorticoids: Glucocorticoids can induce down-regulation of subtype 2 somatostatin receptors (SSTR2). Avoid repeated administration of high doses of glucocorticoids during treatment with Bexlutry.

Please see additional Important Safety Information on cover and pages 20 and 22 and full [Prescribing Information](#).

 **Bexlutry™**
(lutetium Lu 177 dotatate injection)
for intravenous use



IMPORTANT SAFETY INFORMATION (cont'd) USE IN SPECIFIC POPULATIONS

Lactation

Advise women not to breastfeed during treatment with Bexlutry and for 2.5 months after the last dose.

Pediatric Use

Somatostatin Receptor-Positive Gastroenteropancreatic Neuroendocrine Tumors: The risks of radiation exposure associated with Bexlutry are greater in pediatric patients than in adult patients due to longer life expectancy. The safety and effectiveness of Bexlutry have not been established in pediatric patients younger than 12 years old with somatostatin receptor-positive GEP-NETs.

Pediatric use information is approved for Advanced Accelerator Applications USA INC's LUTATHERA (lutetium Lu 177 dotatate) injection for intravenous use. However, due to Advanced Accelerator Applications USA Inc.'s marketing exclusivity rights, this drug product is not labeled with that pediatric information.

*LUTATHERA® is a registered trademark of Advanced Accelerator Applications International SA.

References: 1. BEXLUTRY. Prescribing information. Curium US LLC; July 2026. 2. Becx MN, Minczeles NS, Brabander T, de Herder WW, Nonnekens J, Hofland J. A clinical guide to peptide receptor radionuclide therapy with ¹⁷⁷Lu-DOTATATE in neuroendocrine tumor patients. *Cancers*. 2022;14(23):5792. doi:10.3390/cancers14235792 3. *Code of Federal Regulations*. Title 10—Energy, Chapter I—Nuclear Regulatory Commission, Part 35—Medical Use of Byproduct Material, Subpart B—General Administrative Requirements, CFR §35.40. National Archives. Accessed June 4, 2026. <https://www.ecfr.gov/current/title-10/chapter-I/part-35/subpart-B/section-35.40>

Please see additional Important Safety Information on cover and pages 20 and 21 and full [Prescribing Information](#).

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