

RevAid PATIENT-PRESCRIBER AGREEMENT FORM – PATIENT INFORMATION

We may collect and use the following types of information for the following purposes:

Personal information category	Source	Types of information we may collect	How we may use it
Contact and identity information	<ul style="list-style-type: none"> Directly from you From any prescriber, pharmacist or healthcare provider connected with your lenalidomide, pomalidomide or thalidomide treatment From any substitute decision-maker 	<ul style="list-style-type: none"> Name Username Online identifier Email address Postal address Facsimile number Internet protocol address Marital status Date of birth Reported gender 	<ul style="list-style-type: none"> Identify and authenticate you Communicate with you Determine service, program and product eligibility, including for patient support programs, research programs, and/or receive other services Enroll you in the RevAid program and provide you with products and services, including for patient support programs, research programs, and/or receive other services Administer, manage, analyze, and improve our programs, products, and services including for patient support programs, research programs, and/or other services Provide counselling, education, services and other information relating the RevAid program and to fulfil the requirements of the RevAid program Provide you with relevant information and assistance on our products or services Fulfil your requests
Biometric and physical characteristic-based information	<ul style="list-style-type: none"> Directly from you From any prescriber, pharmacist or healthcare provider connected with your lenalidomide, pomalidomide or thalidomide treatment From any substitute decision-maker 	Data that may contain identifying information about your: <ul style="list-style-type: none"> Age Sexuality or sex life Sleep Health Exercise 	<ul style="list-style-type: none"> Determine and verify RevAid program, eligibility and coverage, or for patient support programs, research programs, and/or other services Administer, manage, analyze, and improve the RevAid program, patient support programs, research programs, and/or other services Assist in managing and reporting emergency incidents, including adverse reactions, that occur while enrolled in the RevAid program Analyze and better understand your needs, preferences, and interests, as well as those of other RevAid stakeholders
Health information	<ul style="list-style-type: none"> Directly from you From any prescriber, pharmacist or healthcare provider connected with your lenalidomide, pomalidomide or thalidomide treatment From any substitute decision-maker Other pharmaceutical company 	Any information in possession of or derived from a healthcare provider, healthcare service plan, pharmaceutical company, or contractor regarding: <ul style="list-style-type: none"> Individual's medical history Family history Medical conditions Drug prescription history Mental or physical condition or treatment 	<ul style="list-style-type: none"> Determine and verify RevAid program and service eligibility including for patient support programs, research programs, and/or other services Enroll you in the RevAid program and provide you with products and services, including for patient support programs, research programs, and/or receive other services Administer, manage, analyze, and improve the RevAid program, patient support programs, research programs, and/or other services Assist in managing and reporting emergency incidents, including adverse reactions, that occur while enrolled in the RevAid program Track, monitor, investigate, audit, and enforce compliance with our policies, product/service terms and conditions, and legal and regulatory requirements including for safety monitoring, pharmacovigilance and health regulatory purposes Analyze and better understand your needs, preferences, and interests, as well as those of other RevAid stakeholders
Audio visual and other interaction-based information	Directly from you, automatically (such as when we record calls to our call centre), third-party service providers	<ul style="list-style-type: none"> Telephone call recordings and transcripts Records of communications (emails, letters, online chat etc.) 	<ul style="list-style-type: none"> Quality assurance and staff training purposes Provide you with the services and information which you request Communicate with you and respond to your inquiries Understand any concerns you may have and improve your experience Compliance and recordkeeping purposes

