

What should I know about Xarelto®?

- ◆ Xarelto® thins the blood, which prevents you from dangerous blood clots.
- ◆ Xarelto® must be taken exactly as prescribed by your doctor. To ensure optimal protection from blood clots, **never skip a dose.**
- ◆ You must not stop taking Xarelto® without first talking to your doctor as your risk of blood clots may increase.
- ◆ Speak to your health care provider prior to any intake of other medication.
- ◆ Inform your health care providers about Xarelto® intake prior to any surgery or invasive procedure.

When should I seek advice from my health care provider?

When taking a blood thinner such as Xarelto® it is important to be aware of its possible side effects. Bleeding is the most common side effect. Do not start taking Xarelto® if you are at risk of abnormal bleeding, without first discussing this with your doctor.

Tell your health care provider right away if you have any signs or symptoms of bleeding such as the following:

- ◆ pain
- ◆ swelling or discomfort
- ◆ headache, dizziness or weakness
- ◆ unusual bruising, nosebleeds, bleeding of gums, bleeding from cuts that take a long time to stop
- ◆ menstrual flow or vaginal bleeding that is heavier than normal
- ◆ pink or brown urine, red or black stools
- ◆ coughing up blood, or vomiting blood or material that looks like coffee grounds

How do I take Xarelto®?

- ◆ To ensure optimal protection, Xarelto® 15 mg and 20 mg must be taken with food.

Who to contact in case of a side-effect with Xarelto®

In case of any suspected side-effect with Xarelto®, you should immediately report to:

**Medicines Authority Post-Licensing Directorate,
203, Level 3, Rue D'Argens,
Gżira GŻR 1368,
MALTA,**

or send by email to:

postlicensing.medicinesauthority@gov.mt

Patient Card

Xarelto® 15 mg
Xarelto® 20 mg



- ◆ Keep this card with you at all times
- ◆ Present this card to every physician or dentist prior to treatment



Bayer HealthCare

 **Xarelto®**
rivaroxaban

**I am under anticoagulation treatment
with Xarelto® (rivaroxaban).**

_____ Name	_____ Other medications / conditions
_____ Address	_____
_____	_____
_____	_____
_____ Birth date	_____ Weight
_____	_____
_____ Blood type	_____

Marketing Authorisation Holder : Bayer Schering Pharma AG, 13342 Berlin, Germany

**In case of emergency,
please notify:**

_____ Doctor's name
_____ Doctor's phone
_____ Doctor's stamp:

L.MT.GM. XAR.2014.01

Please also notify:

_____ Name
_____ Phone
_____ Relationship

**Information for
health care providers:**

- ◆ INR values should not be used as they are not a dependable measure of the anticoagulant activity of Xarelto®.