

Get to know how this latest-generation blood thinner helps protect you from blood clots.



Do not stop taking XARELTO® without talking to the doctor who prescribed it for you. Stopping XARELTO® increases your risk of having a stroke or DVT/PE blood clots.

Please read accompanying full Prescribing Information for XARELTO®, including Boxed Warnings.



If you're having hip or knee replacement surgery, you probably have a lot of questions. This brochure can help fill in some of the blanks and give you an idea of what to expect before, during, and after surgery to help you plan ahead.

You'll also learn why hip or knee replacement surgery increases your risk for blood clots, and how XARELTO® (rivaroxaban) works to help prevent them after surgery. In addition, you'll find Important Safety Information that you should know.

The information provided here is meant as an educational resource only and does not take the place of discussion with your healthcare professional.

What is XARELTO®?

XARELTO® is a prescription medicine used to help prevent a blood clot in the legs and lungs of people who have just had hip or knee replacement surgery.

It is not known if XARELTO® is safe and effective in children.



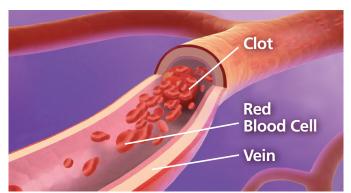
Please read Important Safety Information on pages 20–26. Please read full Prescribing Information, including Boxed Warnings, and Medication Guide for XARELTO®, in pocket.

About replacement surgery and blood clots

Hip or knee replacement surgery can lead to blood clots

Hip or knee replacement surgery may help you live a more active, pain-free life. However, like any surgery, it has risks. One risk is that blood clots may form in blood vessels. Surgery makes the body's clotting processes more active, and after surgery, the lack of movement from being in bed for a long time can slow blood flow. Some people are at an even higher risk for these blood clots based on their medical history, age, and the medications they take.

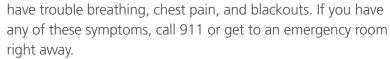
Blood clots cause damage by blocking blood flow



Two types of blood clots may occur

A clot in a deep vein of the body, usually in the lower leg or thigh, is called a deep vein thrombosis (DVT). Many times, people with DVT may not even know they have it. DVT is a serious condition that can lead to pulmonary embolism (PE).

PE occurs when a blood clot breaks off and travels to the lungs. This can cause you to





Learn more about surgery and blood clots at xarelto.com/orthopedic

Get to know XARELTO® for hip or knee replacement surgery

XARELTO® (rivaroxaban) has already been prescribed more than 49 million times in the United States, and it is proven to work. In fact, XARELTO® is the number one prescribed DOAC* among orthopedic surgeons.

A latest-generation blood thinner, XARELTO® is selective

But what does that mean? Warfarin interferes with vitamin K and at least 6 blood-clotting factors. XARELTO® targets 1 critical factor of your body's natural clotting process.



With XARELTO®, you don't have to spend time visiting blood clinics to see if it's working or make frequent adjustments to your dosage.

Additionally, there are no known dietary restrictions. This means you can eat what you want without worrying which foods on your plate are high in vitamin K.



Select Important Safety Information

XARELTO® can cause bleeding which can be serious, and may lead to death. This is because XARELTO® is a blood thinner medicine (anticoagulant) that lowers blood clotting. During treatment with XARELTO® you are likely to bruise more easily, and it may take longer for bleeding to stop. You may have a higher risk of bleeding if you take XARELTO® and have certain other medical problems.

Call your doctor or get medical help right away if you develop any signs or symptoms of bleeding.



^{*}DOAC = direct oral anticoagulant.

With 1 tablet a day, XARELTO® (rivaroxaban) helps protect you from the risk of blood clots around the clock

- Most people who have hip replacement surgery will take XARELTO® 10 mg once a day for 35 days following surgery
- Those who have knee replacement surgery will usually take it for 12 days
- Only your doctor can decide how long you should take XARELTO®

	10 mg	Hip:	Knee:
10	once daily	35 days	12 days

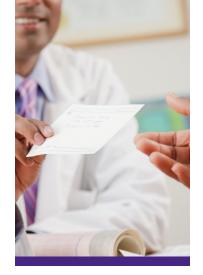
The initial dose should be taken 6 to 10 hours after surgery, once hemostasis has been established.

To help prevent a blood clot:

- Take XARELTO® exactly as it was prescribed by your doctor
- Do not change your dose or stop taking XARELTO® without talking to the doctor who prescribes it for you
- Stopping XARELTO® increases your risk of having a blood clot

Take XARELTO® as your doctor prescribes

To benefit from XARELTO®, you should take it exactly as your doctor prescribes. Your doctor will decide how long you should take XARELTO®. Do not stop taking XARELTO® without first talking to the doctor who prescribes it for you. Stopping XARELTO® may increase your risk of stroke or DVT/PE blood clots.



If you miss a dose of XARELTO®, take it as soon as you remember on the same day. Take your next dose at your regularly scheduled time. The dose should not be doubled within the same day to make up for a missed dose.

Tell all your doctors, including dentists, that you are taking XARELTO®. They should talk to the doctor who prescribed XARELTO® before any surgical, medical, or dental procedure. Your doctor may stop your XARELTO® for a short time and tell you when to start taking XARELTO® again after your surgery or procedure.

Contact **1-888-XARELTO** (1-888-927-3586) for additional questions

Preparing for hip or knee replacement surgery

Knowing what to expect and what you need to do before you have surgery may make the process easier.



Preadmission testing

Before you have surgery, you will be tested to make sure you are okay for surgery. This may include the following tests:

Blood test

• X-rays or bone scans

Urine test

Heart rhythm test

Presurgery checklist

- Ask your surgeon if you should **donate your own blood** in case it is needed during surgery. Also tell your surgeon about any cuts or breaks in your skin before surgery.
- ☐ Have any necessary **dental work** (including routine cleaning) completed a few weeks before surgery to reduce the risk of possible infections entering your blood.

- Ask your doctor which **medications** (including over-the-counter and herbs/vitamins) should be avoided prior to surgery and when taking XARELTO® (rivaroxaban).
- Ask your doctor about **possible medications you will receive** when you are discharged, which may include:
 - Antibiotic
 - Pain medication
 - Blood thinner like XARELTO®

Speak with your doctor about filling these prescriptions in advance so they are ready for you when you return home.

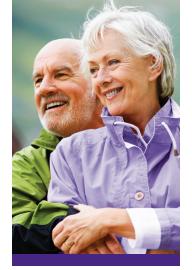
- ☐ Talk to any specialists you see for other conditions about your upcoming surgery and the medications you'll be taking; ask if they have any concerns.
- ☐ Contact your health insurance company to **confirm insurance authorization** for your procedure, your medications, and any aftercare arrangements you may need.
- ☐ Ask your doctor for a recommendation for a **physical therapy** center covered by your plan.
 - You may even start physical therapy before surgery, with exercises to help speed recovery

Presurgery checklist (cont'd)

- Ask your doctor whether you will need to arrange for a **professional Home Care worker** for the days and weeks after your operation.
 - Multiple factors influence this decision, including age, general health and strength, the availability of a family member or friend to act as a caregiver, and insurance coverage (which may vary for Home Care)
 - You should plan all Home Care in advance so that you can focus on your rehabilitation after surgery
- ☐ **Prepare your home** so that you can move around easily. For example:
 - Move throw rugs and anything else that could make you trip
 - Plan on limiting your use of stairs
 - Place items you will need so you can reach them easily These types of preparations may make your home safer and more comfortable for you after surgery.
- ☐ **Quit smoking.** This will reduce your risk of complications after surgery.

- ☐ Ask a friend or family member to help you cook, clean, run errands, and get to doctor appointments after your surgery.
- ☐ **Pack a bag** with the following items if you may have a hospital stay:
 - Pajamas and robe
 - Sneakers, slippers
 - Electronic devices
 - Reading materials
 - Toiletries
 - Loose-fitting, comfortable clothes such as t-shirts, button-front shirts, and sweat suits
- ☐ Ask your doctor's office staff how to **apply for a temporary Disabled Parking card**. The Department of Motor Vehicles or an auto club can often provide you with this card.

Learn more about planning for surgery at xarelto.com/orthopedic



Additional Resource



Making the journey personal

OA MY WAY® is a personalized program designed to help **motivate**, **educate**, and **support** those who are considering total knee replacement (TKR) and/or total hip replacement (THR). This program provides you with a **personalized experience** that was **designed to encourage you along your entire journey**—from thinking about surgery, to scheduling it, and finally through your

We've spoken to people considering TKR and/or THR to learn about some of their fears, frustrations, and hopes for the future. Based on what *they* have told us, **we've customized the resources available to** *you*.

post-surgery recovery period.

OA MY WAY Support:



Education and Guidance

Learn about the TKR/THR procedures and develop a clearer understanding of the progress and pitfalls you can expect to experience on your journey



Support From Others

Gain access to valuable insights from people who have been through their own TKR/THR journey



An Active Community

Offer your own insights and answer polls so future communications can be customized to your experience

Visit OAMYWAY-SUPPORT.com

to enroll today and take the next step on your journey!

OA MY WAY is a patient program brought to you by DePuy Synthes Companies.

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What to expect during your procedure

Presurgery

You'll first go to a presurgery area, where you will complete any remaining paperwork and change into a hospital gown.

Nurses will monitor your heart rate, blood pressure, and other

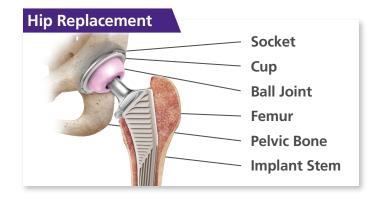


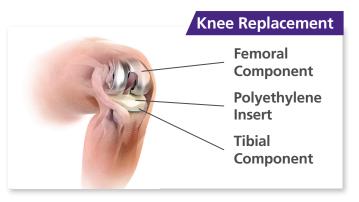
vital signs, and a nurse will start an intravenous (IV) line for medications and fluids. Your surgeon and anesthesiologist will also talk with you.

Surgery

During **hip replacement** surgery, your surgeon removes the head of your femur (thigh bone), and the surface of the old socket in your pelvic (hip) bone is cleaned out. The new hip socket (in the form of an artificial cup) is placed in your hip bone, and the head of your thigh bone is implanted with an artificial stem and ball unit. The socket and ball are then connected.

During **knee replacement** surgery, the ends of your femur (thigh bone) and tibia (lower leg bone) are removed. A new knee joint is assembled by attaching the femoral component to your thigh bone and the tibial component to your lower leg bone, with a polyethylene insert placed between them. The patella (kneecap) is either replaced or its underside is smoothed down and repositioned over the new knee joint.





Recovering after your procedure

Postsurgical recovery

After surgery, you will be moved to the recovery room. There, you will be monitored until the surgeon advises that you are ready to be released to a regular hospital bed (inpatient procedure) or to return home (outpatient procedure).

The typical hospital stay for hip or knee replacement surgery varies. Some patients will stay for longer or shorter time periods depending on their specific situation. A full recovery typically takes 3–6 months. Your rehabilitation begins right after surgery, as ordered by your surgeon.

Within 24 hours of surgery, the nurses and physical therapist in the hospital will help you get out of bed on your own, take a few steps, and sit on the side of your bed.

Keep in mind that although healing begins right away, everyone is different, and your recovery may not be the same as someone else's. However, it is important that you follow the instructions of your care team as you begin your recovery.

Rehabilitation

You will also begin rehabilitation (physical and occupational therapy) shortly after your procedure.

- Physical therapy will get you moving with exercises to strengthen your new hip or knee joint and the surrounding muscles
- Occupational therapy will show you how to do everyday tasks more safely while you are healing

Your surgeon may prescribe one or both of these rehabilitation therapies after your discharge to aid in your recovery.



Learn more about what to expect at **xarelto.com/orthopedic**

Recovering after your procedure



 Hesitate to ask friends and family for help with everyday tasks, such as cleaning and shopping, for the first few weeks



- Get the wound wet until your doctor says you can
- Try to do too much too soon; your body is healing, and it may take months to recover
- Drive until your doctor says it's okay
- Engage in high-impact activities such as running or jumping

Learn more about recovery and rehabilitation at xarelto.com/orthopedic



- Talk with your doctor about any issues you are having with your medicines or recovery
- Use a cane, crutches, handrails, a walker, or other assistive equipment for as long as your doctor and therapists tell you to
- Follow your recommended exercise program to restore movement and strengthen your hip or knee
- Let your dentist, primary care doctor, and other doctors know you are on XARELTO® (rivaroxaban) while you are taking it
- Follow good health habits by drinking lots of water, avoiding alcoholic beverages, and getting plenty of rest

Taking all of your medications as prescribed is important

- Finish all the medications you are prescribed, even if you feel better and don't think you need them
- Refill your prescriptions as ordered by your doctor
- Tell your doctor about any side effects or problems you may be experiencing

Always consult your doctor and/or care team for a full list of requirements and limitations during the recovery phase.

Important Safety Information

WHAT IS XARELTO® (rivaroxaban)?

XARELTO® is a prescription medicine used to help prevent a blood clot in the legs and lungs of people who have just had hip or knee replacement surgery.

It is not known if XARELTO® is safe and effective in children.

WHAT IS THE MOST IMPORTANT INFORMATION I SHOULD KNOW ABOUT XARELTO®?

XARELTO® may cause serious side effects, including:

Increased risk of blood clots if you stop taking XARELTO®.
 People with atrial fibrillation (an irregular heart beat) that is not caused by a heart valve problem (nonvalvular) are at an increased risk of forming a blood clot in the heart, which can travel to the brain, causing a stroke, or to other parts of the body. XARELTO® lowers your chance of having a stroke by helping to prevent clots from forming. If you stop taking XARELTO®, you may have increased risk of forming a clot in your blood.

Do not stop taking XARELTO® without talking to the doctor who prescribes it for you. Stopping XARELTO® increases your risk of having a stroke. If you have to stop taking XARELTO®, your doctor may prescribe another blood thinner medicine to prevent a blood clot from forming.

• Increased risk of bleeding. XARELTO® can cause bleeding which can be serious, and may lead to death. This is because XARELTO® is a blood thinner medicine (anticoagulant) that lowers blood clotting. During treatment with XARELTO® you are likely to bruise more easily, and it may take longer for bleeding to stop. You may be at higher risk of bleeding if you take XARELTO® and have certain other medical problems.

You may have a higher risk of bleeding if you take XARELTO® and take other medicines that increase your risk of bleeding, including:

- o Aspirin or aspirin-containing products
- o Long-term (chronic) use of non-steroidal anti-inflammatory drugs (NSAIDs)
- o Warfarin sodium (Coumadin®, Jantoven®)
- o Any medicine that contains heparin
- o Clopidogrel (Plavix®)
- o Selective serotonin reuptake inhibitors (SSRIs) or serotonin norepinephrine reuptake inhibitors (SNRIs)
- o Other medicines to prevent or treat blood clots Tell your doctor if you take any of these medicines. Ask your doctor or pharmacist if you are not sure if your medicine is one listed above.

Call your doctor or get medical help right away if you develop any of these signs or symptoms of bleeding:

- o Unexpected bleeding or bleeding that lasts a long time, such as:
 - Nosebleeds that happen often
 - Unusual bleeding from gums
 - Menstrual bleeding that is heavier than normal, or vaginal bleeding
- o Bleeding that is severe or you cannot control
- o Red, pink, or brown urine
- o Bright red or black stools (looks like tar)
- o Cough up blood or blood clots
- o Vomit blood or your vomit looks like "coffee grounds"
- o Headaches, feeling dizzy or weak
- o Pain, swelling, or new drainage at wound sites
- **Spinal or epidural blood clots (hematoma).** People who take a blood thinner medicine (anticoagulant) like XARELTO®, and have medicine injected into their spinal and epidural area, or have a spinal puncture, have a risk of forming a blood clot that can cause long-term or permanent loss of the ability to move (paralysis). Your risk of developing a spinal or epidural blood clot is higher if:
 - o A thin tube called an epidural catheter is placed in your back to give you certain medicine
 - You take NSAIDs or a medicine to prevent blood from clotting
 - o You have a history of difficult or repeated epidural or spinal punctures
 - o You have a history of problems with your spine or have had surgery on your spine

If you take XARELTO® and receive spinal anesthesia or have a spinal puncture, your doctor should watch you closely for symptoms of spinal or epidural blood clots. Tell your doctor right away if you have back pain, tingling, numbness, muscle weakness (especially in your legs and feet), or loss of control of the bowels or bladder (incontinence).

XARELTO® is not for use in people with artificial heart valves.

XARELTO® is not for use in people with antiphospholipid

XARELTO® is not for use in people with antiphospholipid syndrome (APS), especially with positive triple antibody testing.

Do not take XARELTO® if you:

- Currently have certain types of abnormal bleeding. Talk to your doctor before taking XARELTO[®] if you currently have unusual bleeding.
- Are allergic to rivaroxaban or any of the ingredients of XARELTO®.

Before taking XARELTO®, tell your doctor about all your medical conditions, including if you:

- Have ever had bleeding problems
- Have liver or kidney problems
- Have antiphospholipid syndrome (APS)
- Are pregnant or plan to become pregnant. It is not known if XARELTO® will harm your unborn baby.
 - o Tell your doctor right away if you become pregnant during treatment with XARELTO®. Taking XARELTO® while you are pregnant may increase the risk of bleeding in you or in your unborn baby.

- o If you take XARELTO® during pregnancy, tell your doctor right away if you have any signs or symptoms of bleeding or blood loss. See "What is the most important information I should know about XARELTO®?" for signs and symptoms of bleeding.
- Are breastfeeding or plan to breastfeed. XARELTO® may pass into your breast milk. Talk to your doctor about the best way to feed your baby during treatment with XARELTO®.

Tell all of your doctors and dentists that you are taking XARELTO®. They should talk to the doctor who prescribed XARELTO® for you before you have any surgery, medical or dental procedure.

Tell your doctor about all the medicines you take, including prescription and over-the-counter medicines, vitamins, and herbal supplements.

Some of your other medicines may affect the way XARELTO® works, causing side effects. Certain medicines may increase your risk of bleeding. **See "What is the most important information I should know about XARELTO®?"**

HOW SHOULD I TAKE XARELTO®?

- Take XARELTO® exactly as prescribed by your doctor.
- Do not change your dose or stop taking XARELTO® unless your doctor tells you to. Your doctor may change your dose if needed.
- Your doctor will decide how long you should take XARELTO®.
- XARELTO® may need to be stopped for one or more days before any surgery or medical or dental procedure. Your doctor will tell you when to stop taking XARELTO® and when to start taking XARELTO® again after your surgery or procedure.

- If you need to stop taking XARELTO® for any reason, talk to the doctor who prescribed XARELTO® to you to find out when you should stop taking it. Do not stop taking XARELTO® without first talking to the doctor who prescribes it to you.
- If you have difficulty swallowing XARELTO® tablets whole, talk to your doctor about other ways to take XARELTO®.
- Do not run out of XARELTO[®]. Refill your prescription of XARELTO[®] before you run out. When leaving the hospital following a hip or knee replacement, be sure that you will have XARELTO[®] available to avoid missing any doses.
- If you take too much XARELTO®, go to the nearest hospital emergency room or call your doctor right away.

If you take XARELTO® for:

- Atrial Fibrillation that is not caused by a heart valve problem:
 - Take XARELTO® 1 time a day with your evening meal.
 - If you miss a dose of XARELTO®, take it as soon as you remember on the same day. Take your next dose at your regularly scheduled time.
- O Blood clots in the veins of your legs or lungs:
 - Take XARELTO® 1 or 2 times a day as prescribed by your doctor.
 - For the 10-mg dose, XARELTO® may be taken with or without food.
 - For the 15-mg and 20-mg doses, take XARELTO® with food at the same time each day.

– If you miss a dose:

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- ➤ If you take the 15-mg dose of XARELTO® 2 times a day (a total of 30 mg of XARELTO® in 1 day):

 Take XARELTO® as soon as you remember on the same day. You may take 2 doses at the same time to make up for the missed dose. Take your next dose at your regularly scheduled time.
- ➤ If you take XARELTO® 1 time a day: Take XARELTO® as soon as you remember on the same day. Take your next dose at your regularly scheduled time.

O Hip or knee replacement surgery:

- Take XARELTO® 1 time a day with or without food.
- If you miss a dose of XARELTO®, take it as soon as you remember on the same day. Take your next dose at your regularly scheduled time.

O Blood clots in people hospitalized for an acute illness:

- Take XARELTO® 1 time a day, with or without food, while you are in the hospital and after you are discharged as prescribed by your doctor.
- If you miss a dose of XARELTO®, take it as soon as you remember on the same day. Take your next dose at your regularly scheduled time.
- Reducing the risk of serious heart problems, heart attack and stroke in coronary artery disease or peripheral artery disease:
 - Take XARELTO® 2.5 mg 2 times a day with or without food.
 - If you miss a dose of XARELTO®, take your next dose at your regularly scheduled time.
 - Take aspirin 75 to 100 mg once daily as instructed by your doctor.

WHAT ARE THE POSSIBLE SIDE EFFECTS OF XARELTO®?

XARELTO® may cause serious side effects:

 See "What is the most important information I should know about XARELTO®?"

The most common side effect of XARELTO® was bleeding.

Call your doctor for medical advice about side effects. **You may report side effects to the FDA at 1-800-FDA-1088.** You may also report side effects to Janssen Pharmaceuticals, Inc., at 1-800-JANSSEN (1-800-526-7736).

Please read accompanying full Prescribing Information, including Boxed Warnings, and Medication Guide for XARELTO®, in pocket.

Trademarks are those of their respective owners.

xarelto.com 1-888-XARELTO

(1-888-927-3586) Monday – Friday 8:00 AM – 8:00 PM ET



Please read accompanying full Prescribing Information for XARELTO®, including Boxed Warnings, Medication Guide, and Important Safety Information.

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