RECONSTITUTION

CroFab®
crotalidae polyvalent immune fab (ovine)

1
Select and fill syringe with 18 mL of 0.9% sodium chloride

2
Inject diluent slowly into CroFab® vial

3
Rotate vial 180 degrees and manually invert up to twice per second until no solid material remains in the vial. Do not shake. The entire dose should then be further diluted in normal saline to a final total volume of 250 mL for infusion

Step-by-Step Instructions:

1. Select appropriate sized syringe
2. Fill syringe with 18 mL 0.9% sodium chloride
3. Insert syringe into CroFab® vial
4. Inject sterile saline slowly into the vial
5. If necessary, vent the vial
6. Remove needle and hold the vial between thumb and forefinger
7. Rotate the vial 180 degrees and reverse the motion for one manual inversion. Do not shake.
8. Continue to manually invert up to twice per second until no solid materials remain in the vial
9. Some bubbles may form at the top of the vial during reconstitution
10. Reconstituted product should be used within 4 hours

The picture above is a correctly reconstituted CroFab® vial.

The reconstituted product will appear colorless to pale yellow, and opalescent (not clear)

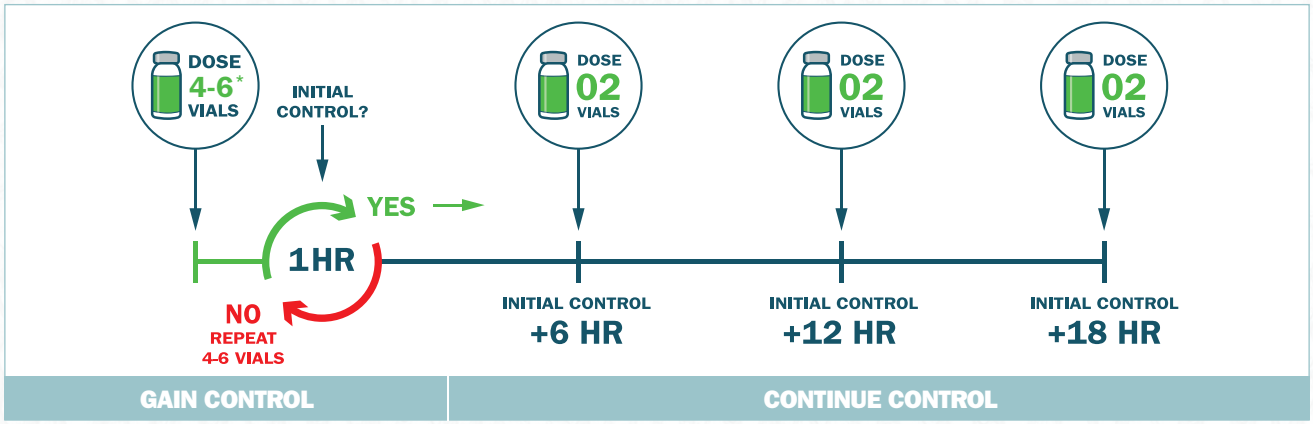
Indication

CroFab® Crotalidae Polyvalent Immune Fab (Ovine) is a sheep-derived antivenin indicated for the management of adult and pediatric patients with North American crotalid envenomation. The term crotalid is used to describe the Crotalinae subfamily (formerly known as Crotalidae) of venomous snakes which includes rattlesnakes, copperheads and cottonmouths/ water moccasins.

Please see Important Safety Information on reverse side.

Dosing & Administration

Administer CroFab® appropriately to gain and continue control of envenomation[1,2]



Gaining initial control[1]:

- The starting dose of CroFab® may vary from a minimum of 4 vials to a maximum of 12 vials based on clinical judgement and severity of envenomation
- *For severe envenomation, a starting dose of 10 to 12 vials may be necessary
- Infuse over 60 minutes, proceeding slowly over the first 10 minutes at 25 to 50 mL/hour with careful observation for any allergic reaction
- If no allergic reaction occurs, increase infusion to the full 250 mL/hour until completion
- If necessary, administer an additional 4-6 vials of CroFab® ~1 hour after end of first infusion

Important Safety Information

Contraindications

Do not administer CroFab® to patients with a known history of hypersensitivity to any of its components, or to papaya or papain unless the benefits outweigh the risks and appropriate management for anaphylactic reactions is readily available.

Warnings and Precautions

Coagulopathy: In clinical trials, recurrent coagulopathy (the return of a coagulation abnormality after it has been successfully treated with antivenin), characterized by decreased fibrinogen, decreased platelets, and elevated prothrombin time, occurred in approximately half of the patients studied; one patient required re-hospitalization and additional antivenin administration. Recurrent coagulopathy may persist for 1 to 2 weeks or more. Patients who experience coagulopathy due to snakebite should be monitored for recurrent coagulopathy for up to 1 week or longer. During this period, the physician should carefully assess the need for re-treatment with CroFab® and use of any type of anticoagulant or anti-platelet drug.

Hypersensitivity Reactions: Severe hypersensitivity reactions may occur with CroFab®. In case of acute hypersensitivity reactions, including anaphylaxis and anaphylactoid reactions, discontinue infusion and institute appropriate emergency treatment. Patients allergic to papain, chymopapain, other papaya extracts, or the pineapple enzyme bromelain may also have an allergic reaction to CroFab®. Follow-up all patients for signs and symptoms of delayed allergic reactions or serum sickness (e.g., rash, fever, myalgia, arthralgia).

Adverse Reactions

The most common adverse reactions (incidence ≥5% of subjects) reported in the clinical studies were urticaria, rash, nausea, pruritus and back pain. Adverse reactions involving the skin and appendages (primarily rash, urticaria, and pruritus) were reported in 12 of the 42 patients. Two patients had a severe allergic reaction (severe hives and a severe rash and pruritus) following treatment and one patient discontinued CroFab® due to an allergic reaction. Recurrent coagulopathy due to envenomation and requiring additional treatment may occur.

Please see accompanying full Prescribing Information.

References:
1. CroFab® [prescribing information]. BTG International Inc; Jan 2018. **2.** Lavonas EJ, Ruha AM, Banner W, et al. *Unified treatment algorithm for the management of crotaline snakebite in the United States: results of an evidence-informed consensus workshop.* BMC Emerg Med. 2011;11:2-15.

BTG

CROFab®
crotalidae polyvalent immune fab (ovine)

Strike early. Strike with confidence.