Change the Delivery, Improve the Results

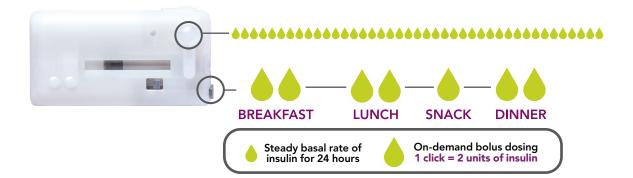
Welcome to V-Go[®] A quick-start guide for your practice

Full Instructions for Patient Use is available at www.go-vgo.com



V-Go[®] Replaces Basal & Bolus Injections

Continuous Subcutaneous Insulin Infusion with On-demand Bolus Dosing



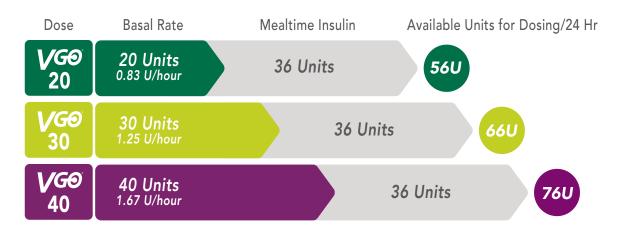
Consider V-Go in Patients that are:

- Not achieving glucose targets
- Consistently missing insulin injections
- Struggling with the complexities of MDI
- Concerned with "sticking" themselves multiple times a day
- Achieving glucose targets but **prefer to simplify** their basal-bolus regimen V-Go is cleared for adult patients (over 21 years of age) that require insulin

Discussing V-Go with Patients

- V-Go replaces the need for basal and bolus injections^{1,2}
- V-Go is simple to start and easy to use²⁻⁴
- V-Go is an **all-in-one 24-hour insulin delivery patch** applied anywhere insulin can be injected²
- V-Go delivers basal and bolus insulin therapy using **ONE** type of insulin²
- V-Go improves blood glucose control using less insulin^{1,3}

V-Go[®] is Available in 3 Dosing Options^{*2}



V-Go Dosing Guidance

for Initiating V-Go in Patients Switching from MDI*5,6

< 200 lbs		200 - 250 lbs		> 250 lbs	
VGO 20 3	Start bolus dosing 3 clicks/meal	VGO 30	Start bolus dosing 4 clicks/meal	VGO 40	Start bolus dosing 5 clicks/meal

Consider 1 click with snack. 1 click = 2 Units of insulin

Additional considerations for V-Go initiation dose:

- Adherence to current insulin regimen
- Blood glucose levels

V-Go Titration Dosing Guidance

- Optimize bolus dosing first if meal time glucose remains elevated
- Titrate basal dose after optimizing bolus dosing if A1C or FPG remains elevated

*Individual dosing needs may vary.²

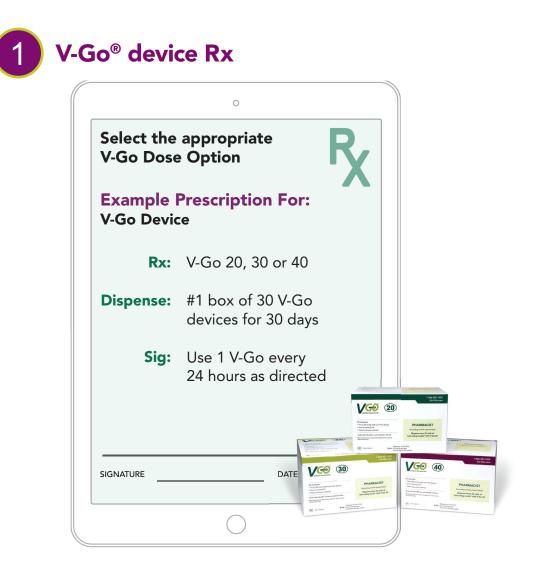
Understand the total daily dose of insulin your patient is actually taking with their current insulin regimen versus what is being prescribed. Healthcare professionals should be aware of the potential for overbasalization with insulin therapy. Selecting the correct V-Go option may lessen the risk of hypoglycemia.

It is common practice to use weight-based dosing and reduce the total daily insulin dose when starting a patient on continuous subcutaneous insulin infusion therapy and these factors should be considered when starting V-Go.



Prescribing V-Go®

Write 2 prescriptions and send to patients' pharmacy



Basal-Bolus with V-Go requires only 2 co-pays

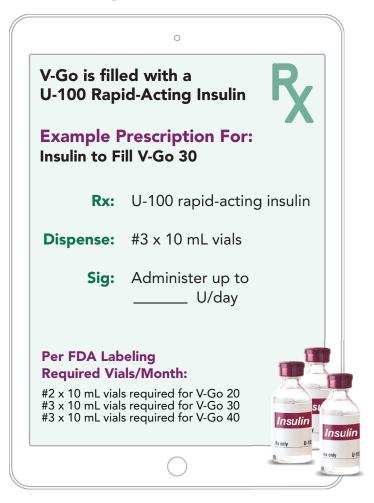
No out-of-pocket expense for

- Basal insulin
- Pen needles
- Insulin syringes

- Application inserters
- Infusion sets
- Delivery controllers



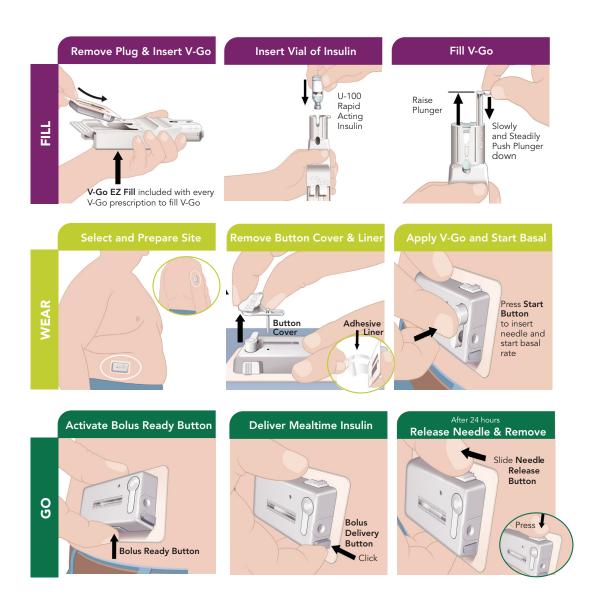
Rapid-acting Insulin Rx



*A U-100 rapid acting insulin should be used with V-Go. Humalog® (insulin lispro [rDNA origin] injection) and NovoLog® (insulin aspart [rDNA origin] injection) have been tested and found to be safe for use in V-Go.² Humalog® is a registered trademark of Eli Lilly and Company. NovoLog® is a registered trademark of Novo Nordisk A/S.



Review How to Use V-Go[®] with Patient²



Refer to the Instructions for Patient Use at **www.go-vgo.com** to review all steps required to fill, wear and use V-Go. Instructional videos are also available on the website.

Ensure that patients understand basal-bolus therapy and that they have a plan to manage hypoglycemia and hyperglycemia. $^{\rm 2}$

V-Go Cares[®] Customer Service

Our V-Go Cares team is here to assist with the following:





*V-Go Training Start Sheets can be obtained from your MannKind sales representative or downloaded at **www.go.vgo.com** and visiting Resources & Support on the Healthcare Professional site.

MannKind Corporation does not give medical advice about insulin therapy. Patients should discuss all medical therapies with you and follow your instructions.



V-Go[®] Easy to Start, Simple to Use



Prescribing Made Easy

Write 2 prescriptions (V-Go and U-100 rapid-acting insulin) and send to the patients' preferred pharmacy.

*If V-Go is not covered by your patients' insurance plan and they are commercially insured, a cash pay option is available for V-Go.

To access cash pay* option for V-Go for eligible patients, e-prescribe a V-Go prescription to: Sterling **Specialty** Pharmacy 1312 Northland Drive, Suite 500 Mendota Heights, MN 55120 NPI: 1225548480 eScribe: 2433693 **Phone:** 888-618-4126 **Fax:** 866-588-0371

*Cash pay is only available for commercially insured patients when V-Go is not covered by the plan. Insulin prescription should still be filled at patient's preferred pharmacy.

2

Start on V-Go, Stay on Track

Certified V-Go trainers are available to provide step-by-step instruction on how to fill, wear and use V-Go. Simply fax a completed V-Go Start Sheet to **1-866-284-6950** and our Certified Clinical Education Team will contact your patient to schedule a time convenient for them.

*V-Go Training Start Sheets can be obtained from your MannKind sales representative or downloaded at **www.go.vgo.com** under Resources & Support on the Healthcare Professional site.

V-Go Cares® Customer Service is here to assist at 1-866-881-1209

Important Safety Information: If regular adjustments or modifications to the basal rate of insulin are required in a 24-hour period, or if the amount of insulin used at meals requires adjustments of less than 2-Unit increments, use of the V-Go Wearable Insulin Delivery device may result in hypoglycemia. The following conditions may occur during insulin therapy with V-Go: hypoglycemia (low blood glucose) or hyperglycemia (high blood glucose). Other adverse reactions associated with V-Go use include skin irritation from the adhesive pad or skin infections at the infusion site. V-Go is magnetic resonance (MR) unsafe and should be removed before having an X-ray, MRI or CT scan.

1. Lajara R, Fetchick DA, Morris TL, Nikkel C. Use of V-Go insulin delivery device in patients with sub-optimally controlled diabetes mellitus: a retrospective analysis from a large specialized diabetes system. Diabetes Ther. 2015;6(4):531-545. **2**. V-Go Instructions for Patient Use. DCN 2560 Rev. C 06/2022. **3.** Rosenfeld CR, Bohannon NJ, et al. The V-Go insulin delivery device used in clinical practice: patient perception and retrospective analysis of glycemic control. Endocr Pract. 2012;18(5):660–667. **4.** Data on File. Advise Patient Quant, 2019. **5.** Adapted from Edelman SV, Bode BW, Bailey TS, et al. Insulin pump therapy in patients in patients with type 2 diabetes safely improved glycemic control using a simple insulin dosing regimen. **6.** Data on File. March 2024. MannKind Corporation.



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