

Care Team Contact Information:	
Pharmacy Contact Information:	
Diagnosis:	
This treatment is often used	for multiple myeloma, but it may be used for other diagnoses.
Goal of Treatment:	

• Treatment may continue for a certain time period, until it no longer works, or until side effects are no longer controlled.

Treatment Regimen

Treatment Name	How the Treatment Works	How the Treatment is Given
Linvoseltamab (lin-voh-SELT-tah-mab): Lynozyfic (lin-oh-ZI-fik)	Binds immune cells (T-cells) and cancer cells together so T-cells can more effectively attack and destroy the cancer cells.	Infusion given into a vein.

Treatment Administration and Schedule:

Due to the risk of cytokine release syndrome (CRS) and neurologic problems, you will receive linvoseltamab on a "step-up dosing schedule" and may be hospitalized for 24 hours after the first and second "step-up" doses.

- During the step-up dosing schedule:
 - o for your first dose, you will receive a smaller "step-up" dose on Day 1 of your treatment
 - o for your second dose, you will receive a larger "step-up" dose, which is usually given on Day 8 of your treatment
 - o for your third dose, you will receive the first full "treatment" dose, which is usually given on Day 15 of your treatment
- If your dose is delayed for any reason, you may need to repeat the step-up dosing schedule.
- Before the "step-up" doses and the first two treatment doses of linvoseltamab, you will receive medicines to help reduce your risk of CRS and infusion related reactions. Your care team will decide if you need to receive medicine to help reduce your risk of side effects with future doses.

Weeks 1 to 3

Treatment	Step-Up Dosing Schedule										
Name	Day 1	Day 2	Day 3		Day 8	Day 9	Day 10	 Day 15	Day 16	Day 17	 Day 21
Linvoseltamab	First "Step- Up" Dose				Second "Step-Up" Dose			First Full "Treatment" Dose			









Treatment Administration and Schedule (Continued)

Week 4 and Beyond

- After the "step-up dosing schedule", the treatment dose of linvoseltamab is usually given 1 time each week for 11 doses, and then 1 time every other week for 5 doses.
- After these doses and based on how your disease responds, your care team will decide if you are able to receive linvoseltamab less often (every 4 weeks) or will continue to have every other week treatment.
- Your care team will decide how long you will receive treatment with linvoseltamab.

Appointments: Appointments may include regular check-ups with your care team, treatment appointments, and lab and imaging visits. It's important to keep your appointments whenever you can. If you miss any appointments, call your care provider as soon as possible to reschedule your appointment.

Supportive Care to Prevent and Treat Side Effects

Description	Supportive Care Given at the Clinic or Hospital	Supportive Care Taken at Home
To help lower the risk of		
Cytokine Release Syndrome		
(CRS) and infusion related		
reactions		
_		
To help lower the risk of		
infections		
_		
Other		
_		









Common Side Effects

Side Effect	Important Information	
Cytokine Release Syndrome	Description: CRS happens when your immune system becomes overactive. Most CR few doses. However, some CRS events can be serious and life-threatening. Sympton lightheaded, or difficulty breathing.	
(CRS) (Boxed Warning)	 Recommendations: Keep a symptom diary to record any new or worsening symptoms such as fever, chills, fatigue, or difficulty breathing. At the guidance of your care team, check vitals including temperature, blood pressure, and heart rate. Stay hydrated by drinking plenty of fluids to help manage symptoms and support overall health. Your care team may prescribe medications to help manage symptoms. 	Talk to your care team if you have:
		heart rate, and blood oxygen levels. If your numbers go beyond those limits, call your care team or get emergency help right away.
Neurologic Problems	Description: Treatment can cause neurologic problems that can be serious or life-thre mood changes, headaches, seizures, and weakness.	eatening. You may have symptoms such as confusion, difficulty speaking,
(Boxed Warning) This includes Immune Effector Cell-Associated Neurotoxicity Syndrome (ICANS)	Recommendations: Keep a symptom diary to track any changes in behavior, mood, or cognitive function. Monitor for neurologic symptoms such as confusion, difficulty speaking, weakness, or seizures. Your care team may prescribe medications to help manage symptoms.	 Talk to your care team if you have: Headache Agitation, trouble staying awake, confusion or disorientation, seeing or hearing things that are not real (hallucinations) Trouble speaking, writing, thinking, remembering things, paying attention, or understanding things Problems walking, muscle weakness, shaking (tremors), loss of balance, or muscle spasms Numbness and tingling (feeling like "pins and needles") Burning, throbbing, or stabbing pain Changes in your handwriting Seizures
Low White Blood Cell (WBC) Count and Increased Risk of Infection	Description: WBCs help protect the body against infections. If you have a low WBC c Recommendations:	ount, you may be at a higher risk of infection. Talk to your care team if you have:









Low Red Blood	Description: RBCs and Hgb help bring oxygen to your body's tissues and take away o	carbon dioxide. If you have low RBC counts or Hgb, you might feel weak,
Cell (RBC) Count and Hemoglobin (Hgb)	tired, or look pale. Recommendations: Get 7 to 8 hours of sleep each night. Avoid operating heavy machinery when tired. Balance work and rest, staying active but resting when needed.	Talk to your care team if you have:
Low Platelet Count	Description: Platelets help the blood clot and heal wounds. If you have low platelet co Recommendations: Blow your nose gently and avoid picking it. Brush your teeth gently with a soft toothbrush and maintain good oral hygiene. Use an electric razor for shaving and a nail file instead of nail clippers. Avoid over-the-counter medications that may increase the risk of bleeding, such as NSAIDs. Consult your care team or dentist before medical or dental procedures, as you may need to pause your medication.	Talk to your care team if you have: Nosebleed lasting over 5 minutes despite pressure Cut that continues to bleed Significant gum bleeding when flossing or brushing Severe headaches Blood in your urine or stool Blood in your spit after a cough
Diarrhea	 Description: Diarrhea is when you have loose, watery stools. The need to use the batt Recommendations: Keep track of how many times you go to the bathroom each day. Drink 8 to 10 glasses of water or other fluids every day, unless your doctor tells you otherwise. Eat small meals of mild, low-fiber foods like bananas, applesauce, potatoes, chicken, rice, and toast. Stay away from foods with high fiber (like raw vegetables, fruits, and whole grains), foods that cause gas (like broccoli and beans), dairy foods (like yogurt and milk), and spicy, fried, and greasy foods. Your care team might suggest a medicine for diarrhea. 	hroom may occur urgently. Talk to your care team if you have:
Liver Problems	Description: Your liver may not work as well as it should, which may lead to symptoms performed to monitor liver function. Talk to your care team if you have: • Yellowing of the skin or whites of your eyes • Dark or brown urine • Bleeding or bruising	 like fatigue, nausea, or swelling in your belly. Lab tests might be Tiredness worse than baseline Loss of appetite Pain in the right upper stomach area









Fatigue	Description: Fatigue is a constant and sometimes strong feeling of tiredness.	Y
_	 Recommendations: Routine exercise has been shown to decrease levels of fatigue. Work with your care team to find the right type of exercise for you. Ask your family and friends for help with daily tasks and emotional support. Try healthy ways to feel better, like meditation, writing in a journal, doing yoga, and using guided imagery to lower anxiety and feel good. Make a regular sleep schedule and limit naps during the day so you can sleep better at night, aiming for 7 to 8 hours of sleep. Don't use heavy machines or do things that need your full attention if you're very tired to avoid accidents. 	 Talk to your care team if you have: Tiredness that affects your daily life Tiredness all the time, and it doesn't get better with rest Dizziness and weakness, along with being tired
Muscle or Joint Pain or Weakness	 Description: You may experience muscle or joint discomfort that makes daily activities weakness, which can hinder lifting objects or walking long distances. You may also for Recommendations: Track your pain levels, areas of discomfort, and any activities that worsen or improve your symptoms. Engage in gentle exercises like walking, stretching, or yoga to maintain mobility and strength, but consult your care team before starting any new exercise routine. Apply a warm compress to relax stiff muscles or use cold packs to reduce swelling and numb pain in affected areas. Your care team may prescribe or recommend medications, including overthe-counter pain relievers. 	
Infusion Reactions	Description: An infusion reaction is a bad response that happens during or not long a Talk to your care team if you have: Chills or shaking Itching, rash, or flushing Trouble breathing or wheezing; tongue-swelling	 Dizziness or feeling faint Fever of 100.4°F (or 38°C) or higher Pain in your back or neck

Select Rare and Serious Side Effects

Side Effect	Talk to Your Care Team if You Have Any of These Signs or Symptoms				
Low Immunoglobulin	Getting sick often (like colds or pneumonia)	Having skin infections or rashes			
Levels	Taking longer to feel better after being sick	 Getting upset stomachs or diarrhea more frequently 			
	Feeling tired or weak	 Possibly having allergies or other immune problems 			

Before starting treatment, ask your care team when to call 9-1-1 or seek emergency help. If you experience any new, worsening, or uncontrolled side effects, contact your care team immediately.









Intimacy, Pregnancy, and Breastfeeding

- Treatment may change how you feel about intimacy and your body. However, physical closeness—such as holding hands and hugging—remains safe. It is common to have questions about intimacy. If needed, talk to your care team for guidance.
- Treatment may harm an unborn baby.
 - If you might get pregnant, take a pregnancy test before starting treatment.
 - Use an effective method of birth control during treatment and for 3 months after your last dose.
 - If you think you might be pregnant or if you become pregnant, tell your care team right away.
 - If your partners could become pregnant, use an effective method of birth control—such as condoms—during treatment.
- **Do NOT breastfeed** during treatment and for 3 months after your last dose.

Additional Information

- Tell your care team about all the medicines you take.

 This includes prescriptions, over-the-counter drugs, vitamins, and herbal products. Before starting any new medicine, supplement, or vaccine, ask your care team first.
- The most common severe changes in laboratory test results are low white blood cell counts and low red blood cell counts.
- Your care team will monitor you for signs and symptoms of CRS and neurologic problems during treatment with linvoseltamab, as well as other side effects and treat
 you if needed. Your care provider may temporarily stop or completely stop your treatment with linvoseltamab if you develop CRS, neurologic problems, or any other side
 effects that are severe.
- Do not drive or operate heavy or dangerous machinery during and for 48 hours after completing each of your "step-up" doses or at any time during treatment with linvoseltamab if you develop new neurologic symptoms, until the symptoms go away.
- Linvoseltamab is available only through a special FDA program called the LYNOZYFIC Risk Evaluation and Mitigation Strategy (REMS). You will receive a Patient Wallet Card from your healthcare provider. Carry the Patient Wallet Card with you at all times and show it to all of your healthcare providers. The Patient Wallet Card lists signs and symptoms of CRS and neurologic problems.
- This Patient Education Sheet may not describe all possible side effects.
 Call your healthcare provider for medical advice about side effects. You may report side effects to the FDA at 1-800-FDA-1088.

Notes

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Scan the QR code below to access this education sheet.











Important notice: The Association of Cancer Care Centers (ACCC), Hematology/Oncology Pharmacy Association (HOPA), Network for Collaborative Oncology Development & Advancement, Inc. (NCODA), and Oncology Nursing Society (ONS) have collaborated in gathering information for and developing this patient education guide. This guide represents a brief summary of the medication derived from information provided by the drug manufacturer and other resources.

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