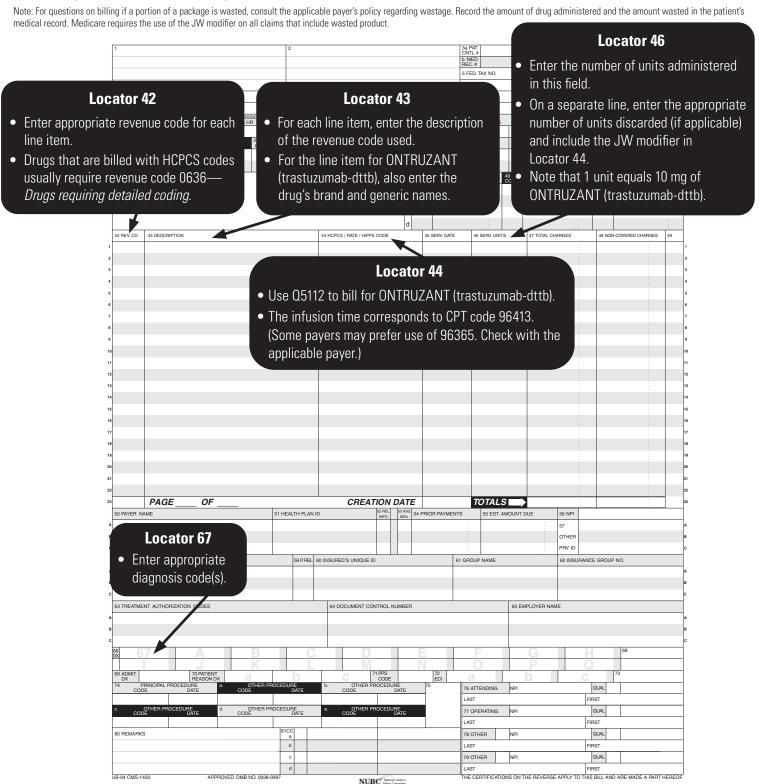
Sample UB-04 (also known as CMS 1450) Claim Form for Hospital Outpatient Department Billing: ONTRUZANT® (trastuzumab-dttb) for Injection, for Intravenous Use 21 mg/mL

Before prescribing ONTRUZANT, please read the accompanying <u>Prescribing Information</u>, including the Boxed Warning about cardiomyopathy, infusion reactions (pulmonary toxicity), and embryo-fetal toxicity.



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