

If you have prescribed ZORYVE,

Get Patients Started

Consider including the following information in the notes to the pharmacist if clinically appropriate:



Down to ≥6 years

MILD TO MODERATE

ATOPIC DERMATITIS

ZORYVE cream, 0.15%

- ✓ Possible ICD-10 code(s)¹
 - › L20.0: Besnier's prurigo (atopic dermatitis)
 - › L20.8: Other atopic dermatitis
 - › L20.9: Atopic dermatitis, unspecified

- ✓ 1 or 2 medications tried and failed, if any²
 - › Topical corticosteroids
 - › Topical calcineurin inhibitors

- ✓ Special treatment location(s), if any
 - › Face/eyelids and skin folds



Down to ≥6 years

PLAQUE PSORIASIS

ZORYVE cream, 0.3%

- ✓ Possible ICD-10 code(s)¹
 - › L40.0: Psoriasis vulgaris
 - › L40.8: Other psoriasis
 - › L40.9: Psoriasis, unspecified

- ✓ 1 or 2 medications tried and failed, if any³
 - › Topical corticosteroids
 - › Topical vitamin D analogs
 - › Topical calcineurin inhibitors
 - › Combination therapy

- ✓ Special treatment location(s), if any
 - › Face/eyelids, genitals, and skin folds



Down to ≥9 years

SEBORRHEIC DERMATITIS

ZORYVE foam, 0.3%

- ✓ Possible ICD-10 code(s)¹
 - › L21.8: Other seborrheic dermatitis
 - › L21.9: Seborrheic dermatitis, unspecified

- ✓ 1 or 2 medications tried and failed, if any⁴
 - › Topical corticosteroids
 - › Topical antifungals
 - › Topical calcineurin inhibitors

- ✓ Special treatment location(s), if any
 - › Face/eyelids, genitals, and skin folds



Learn more about the ZORYVE Direct Savings Card Program for commercially insured patients at www.zoryvedirect.com

Please see Indications and Important Safety Information on the reverse side.

This information is provided for your background and not intended as comprehensive or directive. Payer requirements may vary or change over time. It is your responsibility to determine and submit the appropriate codes and supporting information for medically necessary treatment. This information is in no way a guarantee of reimbursement or coverage for any product or service. ICD-10=International Classification of Diseases, Tenth Revision.



IMPORTANT SAFETY INFORMATION



INDICATIONS

ZORYVE cream, 0.3%, is indicated for topical treatment of plaque psoriasis, including intertriginous areas, in adult and pediatric patients 6 years of age and older.

ZORYVE cream, 0.15%, is indicated for topical treatment of mild to moderate atopic dermatitis in adult and pediatric patients 6 years of age and older.

ZORYVE foam, 0.3%, is indicated for the treatment of seborrheic dermatitis in adult and pediatric patients 9 years of age and older.

IMPORTANT SAFETY INFORMATION

ZORYVE is contraindicated in patients with moderate to severe liver impairment (Child-Pugh B or C).

Flammability: The propellants in ZORYVE foam are flammable. Avoid fire, flame, and smoking during and immediately following application.

The most common adverse reactions ($\geq 1\%$) for ZORYVE cream 0.3% for plaque psoriasis include diarrhea (3.1%), headache (2.4%), insomnia (1.4%), nausea (1.2%), application site pain (1.0%), upper respiratory tract infection (1.0%), and urinary tract infection (1.0%).

The most common adverse reactions ($\geq 1\%$) for ZORYVE cream 0.15% for atopic dermatitis include headache (2.9%), nausea (1.9%), application site pain (1.5%), diarrhea (1.5%), and vomiting (1.5%).

The most common adverse reactions ($\geq 1\%$) for ZORYVE foam 0.3% for seborrheic dermatitis include nasopharyngitis (1.5%), nausea (1.3%), and headache (1.1%).

Please see full [Prescribing Information](#) for ZORYVE cream and full [Prescribing Information](#) for ZORYVE foam.

1. CMS.gov. 2024 ICD-10-CM. Centers for Medicare & Medicaid Services. Updated February 1, 2024. Accessed April 30, 2024. <https://www.cms.gov/medicare/coding-billing/icd-10-codes/2024-icd-10-cm> 2. Sidbury R, et al. *J Am Acad Dermatol*. 2023;89(1):e1-e20. 3. Elmets CA, et al. *J Am Acad Dermatol*. 2021;84(2):432-470. 4. Clark GW, et al. *Am Fam Physician*. 2015;91(3):185-190.