

Atezolizumab and Bevacizumab

Care Team Contact Information: _____

Pharmacy Contact Information: _____

Diagnosis: _____

- This treatment is used for a type of liver cancer called hepatocellular carcinoma (HCC).
- It may also be used for other reasons.

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
Atezolizumab (A-teh-zoh-LIZ-yoo-mab): Tecentriq (teh-SEN-trik)	Boosts your immune system to help it attack cancer cells more effectively.	Infusion into a vein (intravenous (IV) infusion).
Bevacizumab (beh-vuh-SIH-zoo-mab): Avastin (uh-VAS-tin), Alymsys, Avzivi, Jobevne, Mvasi, Vegzelma, Zirabev	Slows down or stops cancer growth by blocking the blood vessels that tumors need to get the nutrients and oxygen they require.	Infusion into a vein (intravenous (IV) infusion).

Note: Your care team may give you atezolizumab and hyaluronidase (Tecentriq Hybreza) instead of atezolizumab. Atezolizumab and hyaluronidase is given as an injection under the skin (subcutaneous injection) in the thigh over about 7 minutes.

Treatment Administration and Schedule

Treatment is typically repeated every 3 weeks. This length of time is called a “cycle.”

Treatment Name	Cycle 1								Next Cycle
	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	...	Day 21	Day 1
Atezolizumab	✓								✓
Bevacizumab	✓								✓

Appointments

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

Supportive Care to Prevent and Treat Side Effects

Description	Supportive Care Given at the Clinic or Hospital	Supportive Care Taken at Home
Supportive care to prevent and treat side effects		

Common Side Effects

Side Effect	Important Information
Low White Blood Cell (WBC) Count (Neutropenia) and Increased Risk of Infection	Description: WBCs help protect your body from infections. A low WBC count increases your risk of infection. Recommendations: - Wash your hands often and bathe regularly. - Avoid crowded places and close contact with people who are sick. - Follow food safety and wound care advice from your care team. Talk to your care team if you have: - Fever of 100.4°F (38°C) or higher - Chills - New or worsening cough or sore throat - Painful urination or signs of a urinary infection - Feeling much more tired than usual - Red, swollen, warm, or painful areas on the skin (possible skin infection)
Low Platelet Count (Thrombocytopenia)	Description: Platelets help your blood clot and wounds heal. A low platelet count increases your risk of bruising and bleeding. Recommendations: - Blow your nose gently and avoid picking it. - Brush your teeth gently with a soft toothbrush and keep good oral hygiene. - Use an electric razor for shaving and a nail file instead of nail clippers. - Avoid over-the-counter medicines that can increase bleeding risk (for example, nonsteroidal anti-inflammatory drugs (NSAIDs) like ibuprofen). - Talk with your care team or dentist before medical or dental procedures — you may need to pause treatment. Talk to your care team if you have: - A nosebleed lasting more than 5 minutes despite pressure - A cut that continues to bleed - Heavy gum bleeding when brushing or flossing - Sudden or severe headache - Blood in your urine or stool - Blood in your spit after coughing
Low Red Blood Cell (RBC) Count and Hemoglobin (Hgb) (Anemia)	Description: RBCs and Hgb carry oxygen to your body's tissues and remove carbon dioxide. Low RBC or Hgb (anemia) can make you feel weak, very tired, or look pale. Recommendations: - Aim for 7 to 8 hours of sleep each night. - Do not drive, operate heavy machinery, or do other dangerous activities if you are very tired. - Balance activity and rest — stay as active as you can, but rest when needed. - Eat a balanced diet and follow any nutrition or supplement advice from your care team. Talk to your care team if you have: - Shortness of breath - Dizziness or fainting - Fast or irregular heartbeats - Sudden or severe headache

Fatigue	Description: Fatigue is a constant and sometimes strong feeling of tiredness. Recommendations: • Routine exercise can help reduce fatigue. Talk with your care team to find the right type and amount of activity for you. • Ask family and friends for help with daily tasks and for emotional support. • Try healthy ways to feel better, such as meditation, journaling, yoga, or guided imagery, to reduce anxiety and improve well-being. • Aim for 7 to 8 hours of sleep each night. Limit daytime naps to help you sleep better at night. • Do not drive, operate heavy machinery, or do other potentially dangerous activities if you are very tired. Talk to your care team if you have: • Tiredness that affects your daily life or prevents you from doing normal activities • Tiredness that does not get better with rest • Dizziness or weakness along with severe tiredness
High Blood Pressure (Hypertension)	Description: High blood pressure means the force of blood against your artery walls is too high. Treatment can raise your blood pressure or make it harder to control. Recommendations: • Exercise regularly, maintain a healthy weight, and limit alcohol and salt (sodium). • Take blood pressure medicines as prescribed. Your care team may change your medicines if needed. • Your care team may ask you to check and record your blood pressure at home. Bring readings to appointments. • Follow diet and lifestyle advice from your care team. Talk to your care team if you have: • Severe or new headaches • Dizziness or lightheadedness • Blurred vision • Trouble breathing • Nosebleeds that do not stop • A pounding sensation in your chest, neck, or ears • Irregular or fast heartbeats • Chest pain or pressure

High Blood Sugar (Hyperglycemia)	Description: Treatment may cause high blood sugar levels. Your care team may perform blood tests to check for these changes and treat you if needed. Recommendations: • Eat a well-balanced diet. • Limit sugary drinks and foods. • Eat smaller, more frequent meals. • Be physically active for at least 30 minutes most days. • Your care team may ask you to check your blood sugar at home. If you are already doing this, they may ask you to do it more frequently. Talk to your care team if you have: • Frequent urination • Drowsiness • Increased thirst • Loss of appetite • Blurred vision • Fruity smell on your breath • Confusion • Nausea, vomiting, or stomach pain • It becomes harder to control your blood sugar
Liver Problems	Description: Treatment can cause liver injury. Your care team may check your liver with blood tests before and during treatment. Talk to your care team if you have: • Yellowing of your skin or the white part of your eyes (jaundice) • Severe nausea or vomiting • Pain on the right side of your stomach area (abdomen) • Dark, tea-colored urine • Bleeding or bruising more easily than normal
Changes in Electrolytes	Description: Treatment may cause low levels of sodium and calcium in your blood. Your care team will perform blood tests to check you for these changes and will treat you if needed. Talk to your care team if you have: • Severe muscle cramps or spasms • Tingling or numbness around the mouth, hands, or feet • New weakness or trouble breathing • Fast, irregular, or pounding heartbeat • Confusion, fainting, or seizures • Sudden weight gain • Swelling of your arms, hands, legs, or ankles • Severe headache or nausea/vomiting • Difficulty breathing

Select Rare Side Effects

Side Effect	Talk to Your Care Team if You Have Any of These Signs or Symptoms	
Heart Problems	- Swelling of your stomach area (abdomen), legs, hands, feet, or ankles - Shortness of breath - Nausea or vomiting - New or worsening chest discomfort, including pain or pressure	- Weight gain - Pain or discomfort in your arms, back, neck, or jaw - Protruding neck veins - Breaking out in a cold sweat - Feeling lightheaded or dizzy
Severe Bleeding (Hemorrhage)	- Vomiting blood or if your vomit looks like coffee grounds - Pink or brown urine - Red or black (looks like tar) stools - Coughing up blood or blood clots - Menstrual bleeding that is heavier than normal	- Unusual vaginal bleeding - Nosebleeds that happen often - Bruising - Lightheadedness
Blood Clots or Blockage (Thrombosis) in Your Blood Vessels (Arteries and Veins)	- Chest pain or pressure - Swelling or pain in your arms, back, neck, or jaw - Shortness of breath - Numbness or weakness on one side of your body	- Trouble talking - Headache - Vision changes
Lung Problems	- Cough - Shortness of breath	Chest pain or chest tightness
Intestinal Problems	- Diarrhea (loose stools) or more frequent bowel movements than usual - Stools that are black, tarry, sticky, or have blood or mucus	Severe stomach-area (abdominal) pain or tenderness
A Tear in Your Stomach or Intestinal Wall (Perforation) or an Abnormal Connection Between 2 Parts of Your Body (Fistula)	- Severe pain or tenderness in your stomach area (abdomen) - Swelling of the abdomen - Fever of 100.4°F (38°C) or higher - Chills	- Nausea - Vomiting - Signs of dehydration (very thirsty, dry mouth, dizziness, or dark urine)
Skin Problems	- Rash - Itching	- Skin blistering or peeling - Painful sores or ulcers in the mouth or nose, throat, or genital area

Hormone Gland Problems	• Headaches that will not go away, or unusual headaches • Eye sensitivity to light • Eye problems • Rapid heartbeat • Increased sweating • Extreme tiredness • Weight gain or weight loss • Feeling more hungry or thirsty than usual	• Urinating more often than usual • Hair loss • Feeling cold • Constipation • Your voice gets deeper • Dizziness or fainting • Changes in mood or behavior, such as decreased sex drive, irritability, or forgetfulness
Protein in Your Urine and Possible Kidney Problems	Your care team may check your urine for protein before and during treatment. They may adjust or stop your treatment if protein is found. • Swelling in your hands, arms, legs, or feet	
Severe Jawbone Problems (Osteonecrosis of the Jaw)	Osteonecrosis of the jaw (ONJ) is a rare but serious condition in which jawbone cells die, sometimes causing the bone to become exposed through the gums and leading to further bone loss because blood cannot reach the exposed area. Your care team may ask you to see your dentist before starting and during treatment. • Jaw swelling or pain • Loose teeth • Mouth sores • Pus-like discharge in your gums and mouth	
Eye Problems	• Dry or red eyes • Eye pain or swelling • Vision changes	• Increased tears • Sensitivity to light • Blurred vision
Posterior Reversible Encephalopathy Syndrome (PRES)	A neurologic condition called PRES can happen during treatment with bevacizumab. • Severe headache • Confusion • Weakness • Seizures • Blindness or change in vision	
Problems in Other Organs and Tissues	• Confusion, sleepiness, memory problems, changes in mood or behavior, stiff neck, balance problems, tingling or numbness of the arms or legs	• Persistent or severe muscle pain or weakness, muscle cramps
Infusion-Related Reactions	• Chills or shaking • Itching, rash, or flushing • Trouble breathing, wheezing, or tongue swelling • Dizziness or feeling faint	• Feeling of impending doom • Fever of 100.4°F (38°C) or higher • New or severe pain in your back or neck

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 are able to become pregnant:
 - Your care team will verify your pregnancy status before treatment.
 - Use an effective method of birth control during treatment, for 5 months after your last dose of atezolizumab, and for 6 months after your last dose of bevacizumab.
 - If you think you might be pregnant or if you become pregnant, tell your care team right away.
 - If your partner is able to become pregnant, use an effective method of birth control—such as condoms—during treatment with atezolizumab and bevacizumab and for 6 months after your last dose of bevacizumab.
- **Do not breastfeed** during treatment, for 5 months after your last dose of atezolizumab, and for 6 months after your last dose of bevacizumab.

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.
- **Tell your care team about all your health problems.** This includes issues with your immune system, like Crohn's disease, ulcerative colitis, or lupus. Also, tell them if you have had an organ transplant, like a kidney or eye transplant. Let them know if you had a stem cell transplant from a donor, had radiation to your chest, or have a nerve problem like myasthenia gravis or Guillain-Barré syndrome.
- **Your treatment may cause side effects that need medicine or a break from treatment.** Your care team may give you corticosteroids or hormone medicines to help. Sometimes, they may need to delay or stop your treatment if you have certain side effects.
- **Wound healing problems.** Wounds may not heal properly during bevacizumab treatment. Tell your care team if you plan to have any surgery before starting or during treatment.
 - You should not receive bevacizumab for at least 28 days before planned surgery.
 - Your care team should tell you when you may start receiving bevacizumab again after surgery.
- **This Patient Education Sheet may not describe all possible side effects.**
 Call your care team 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 to gather information and develop this patient education guide. This guide is a summary of the medication, based on information provided by the drug manufacturer and other sources.

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