16.1.3.1 LIST OF INDEPENDENT ETHICS COMMITTEE (IEC) OR INSTITUTIONAL REVIEW BOARD (IRB)

ARGENTINA

Study Site Number	Independent Ethics Committee or Institutional Review Board Address(es)
1231	Comité Institucional de Revisión de Ensayos Clínicos (C.I.R.E.C.) del Hospital Militar Central "Cirujano Mayor Dr Cosme Argerich" Av. Luis María Campos 726, Edificio PACE Piso 5 CABA, 1426 ARGENTINA

BRAZIL

Study Site Number	Independent Ethics Committee or Institutional Review Board Address(es)
1226	CONEP (Comissao Nacional de Etica em Pesquisa) SRTV 701, Via W 5 Norte, lote D, Edificio PO 700, 3º andar - Asa Norte Brasilia, DF 70719-040 BRAZIL Comite de Etica em Pesquisa da Faculdade de Medicina do ABC\Fundacao do ABC-- FMABC Avenida Lauro Gomes, 2000 - Vila Sacadura Cabral Santo Andre/SP, 09060-870 BRAZIL
1241	Comite de Etica em Pesquisa do Hospital Santo Antonio /Obras Sociais Irma Dulce Avenida Luiz Tarquínio, snº, portao 9, 1º andar, sala 1, Roma Salvador, BA 40414-120 BRAZIL CONEP (Comissão Nacional de Ética em Pesquisa) SRTV 701, Via W 5 Norte, lote D, Edifício PO 700, 3° andar -Asa Norte Brasília/DF, 70719-040 BRAZIL

GERMANY

Study Site Number	Independent Ethics Committee or Institutional Review Board Address(es)
1185	Landesaerztekammer Baden-Wuerttemberg Liebknechtstr. 33 Stuttgart, 70565 GERMANY
1194	Landesaerztekammer Baden-Wuerttemberg Liebknechtstr. 33 Stuttgart, 70565 GERMANY
1195	Landesaerztekammer Baden-Wuerttemberg Liebknechtstr. 33 Stuttgart, 70565 GERMANY
1197	Landesaerztekammer Baden-Wuerttemberg Liebknechtstr. 33 Stuttgart, 70565 GERMANY
1202	Landesaerztekammer Baden-Wuerttemberg Liebknechtstr. 33 Stuttgart, 70565 GERMANY
1203	Landesaerztekammer Baden-Wuerttemberg Liebknechtstr. 33 Stuttgart, 70565 GERMANY

SOUTH AFRICA

Study Site Number	Independent Ethics Committee or Institutional Review Board Address(es)
1229	Pharma Ethics Independent Research Ethics committee 123 Amcor Road, Lyttelton Manor Centurion, 0157 SOUTH AFRICA
1230	Pharma-Ethics (Pty) Ltd 123 Amkor Road, Lyttelton Manor Centurion, 0157 SOUTH AFRICA
1246	Pharma-Ethics (Pty) Ltd 123 Amkor Road, Lyttelton Manor Centurion, 0157 SOUTH AFRICA
1247	Pharma-Ethics (Pty) Ltd 123 Amkor Road, Lyttelton Manor Centurion, 0157 SOUTH AFRICA

TURKEY

Study Site Number	Independent Ethics Committee or Institutional Review Board Address(es)
1205	Kocaeli Üniversitesi Klinik Arastirmalar Etik Kurulu Kocaeli Üniversitesi Tip Fakültesi Klinik, Arastirmalar Birimi Umuttepe Yerleskesi Kocaeli TURKEY
1207	Kocaeli Üniversitesi Klinik Arastirmalar Etik Kurulu Kocaeli Üniversitesi Tip Fakültesi Klinik, Arastirmalar Birimi Umuttepe Yerleskesi Kocaeli TURKEY
1208	Kocaeli Üniversitesi Klinik Arastirmalar Etik Kurulu Kocaeli Üniversitesi Tip Fakültesi Klinik, Arastirmalar Birimi Umuttepe Yerleskesi Kocaeli TURKEY
1209	Kocaeli Üniversitesi Klinik Arastirmalar Etik Kurulu Kocaeli Üniversitesi Tip Fakültesi Klinik, Arastirmalar Birimi Umuttepe Yerleskesi Kocaeli TURKEY
1210	Kocaeli Üniversitesi Klinik Arastirmalar Etik Kurulu Kocaeli Üniversitesi Tip Fakültesi Klinik, Arastirmalar Birimi Umuttepe Yerleskesi Kocaeli TURKEY
1212	Kocaeli Üniversitesi Klinik Arastirmalar Etik Kurulu Kocaeli Üniversitesi Tip Fakültesi Klinik, Arastirmalar Birimi Umuttepe Yerleskesi Kocaeli TURKEY
1213	Kocaeli Üniversitesi Klinik Arastirmalar Etik Kurulu Kocaeli Üniversitesi Tip Fakültesi Klinik, Arastirmalar Birimi Umuttepe Yerleskesi Kocaeli TURKEY

Study Site Number	Independent Ethics Committee or Institutional Review Board Address(es)
1214	Kocaeli Üniversitesi Klinik Arastirmalar Etik Kurulu Kocaeli Üniversitesi Tip Fakültesi Klinik, Arastirmalar Birimi Umuttepe Yerleskesi Kocaeli TURKEY
1217	Kocaeli Üniversitesi Klinik Arastirmalar Etik Kurulu Kocaeli Üniversitesi Tip Fakültesi Klinik, Arastirmalar Birimi Umuttepe Yerleskesi Kocaeli TURKEY

UNITED STATES

Study Site Number	Independent Ethics Committee or Institutional Review Board Address(es)
1001	NYU Langone Grossman School of Medicine IRB One Park Ave, 6th Fl New York, NY 10016 UNITED STATES
1002	Western Institutional Review Board 1019 39th Ave., SE, Ste 120 Puyallup, WA 98374 UNITED STATES
1003	Western Institutional Review Board 1019 39th Ave SE, Ste 120 Puyallup, WA 98374 UNITED STATES
1005	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1006	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1007	Cincinnati Children's Hospital Medical Center IRB 3333 Burnet Ave, MLC 5020 Cincinnati, OH 45229 UNITED STATES
1008	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES

Study Site Number	Independent Ethics Committee or Institutional Review Board Address(es)
1009	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1011	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1012	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1013	Copernicus Group IRB 5000 Centregreen Way, Ste 200 Cary, NORTH CAROLINA 27513 UNITED STATES
1015	WCG IRB 1019 39th Ave Se, Ste 120 Puyallup, WASHINGTON 98374 UNITED STATES
1016	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1018	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES

Study Site Number	Independent Ethics Committee or Institutional Review Board Address(es)
1019	Copernicus Group IRB 5000 CentreGreen Way, Ste 200 Cary, NORTH CAROLINA 27513 UNITED STATES
1021	Copernicus Group IRB 5000 Centregreen Way, Ste 200 Cary, NORTH CAROLINA 27513 UNITED STATES
1022	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1024	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1027	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1028	Copernicus Group IRB 5000 Centregreen Way, Ste 200 Cary, NORTH CAROLINA 27513 UNITED STATES
1030	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES

Study Site Number	Independent Ethics Committee or Institutional Review Board Address(es)
1036	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1037	Copernicus Group IRB 5000 Centregreen Way, Ste 200 Cary, NORTH CAROLINA 27513 UNITED STATES
1038	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1039	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1042	Copernicus Group IRB 5000 Centregreen Way, Ste 200 Cary, NORTH CAROLINA 27513 UNITED STATES
1044	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1046	Copernicus Group IRB 5000 Centregreen Way, Ste 200 Cary, NORTH CAROLINA 27513 UNITED STATES

Study Site Number	Independent Ethics Committee or Institutional Review Board Address(es)
1047	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1048	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1052	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1054	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1055	Copernicus Group IRB 5000 Centregreen Way, Ste 200 Cary, NORTH CAROLINA 27513 UNITED STATES
1056	Copernicus Group Institutional Review Board 5000 Centregreen Way, Ste 200 Cary, NORTH CAROLINA 27513 UNITED STATES
1057	Copernicus Group IRB 5000 Centregreen Way, Ste 200 Cary, NORTH CAROLINA 27513 UNITED STATES

Study Site Number	Independent Ethics Committee or Institutional Review Board Address(es)
1066	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1068	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1071	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1072	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1073	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1077	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1079	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES

Study Site Number	Independent Ethics Committee or Institutional Review Board Address(es)
1080	Copernicus Group IRB 5000 Centregreen Way, Ste 200 Cary, NORTH CAROLINA 27513 UNITED STATES
1081	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1082	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1083	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1084	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1085	Copernicus Group IRB 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1087	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES

Study Site Number	Independent Ethics Committee or Institutional Review Board Address(es)
1088	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1089	Copernicus Group IRB 5000 Centregreen Way, Ste 200 Cary, NORTH CAROLINA 27513 UNITED STATES
1090	Copernicus Group IRB 5000 Centregreen Way, Ste 200 Cary, NORTH CAROLINA 27513 UNITED STATES
1091	Copernicus Group IRB 5000 Centregreen Way, Ste 200 Cary, NORTH CAROLINA 27513 UNITED STATES
1092	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1093	Copernicus Group IRB 5000 Centregreen Way, Ste 200 Cary, NORTH CAROLINA 27513 UNITED STATES
1094	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES

Study Site Number	Independent Ethics Committee or Institutional Review Board Address(es)
1095	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1096	Copernicus Group IRB 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1097	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1098	Copernicus Group Institutional Review Board 5000 Centregreen Way, Ste 200 Cary, NORTH CAROLINA 27513 UNITED STATES
1101	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1107	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1109	Copernicus Group IRB 5000 CentreGreen Way, Ste 200 Cary, NORTH CAROLINA 27513 UNITED STATES

Study Site Number	Independent Ethics Committee or Institutional Review Board Address(es)
1110	WCG IRB 1019 39th Ave Se, Ste 120 Puyallup, WASHINGTON 98374 UNITED STATES
1111	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1112	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1114	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1116	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1117	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1118	Copernicus Group Institutional Review Board 5000 Centregreen Way, Ste 200 Cary, NORTH CAROLINA 27513 UNITED STATES

Study Site Number	Independent Ethics Committee or Institutional Review Board Address(es)
1120	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1121	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1122	WESTERN INSTITUTIONAL REVIEW BOARD 1019 39th Ave S.E, Ste 120 Puyallup, WA 98374 UNITED STATES
1123	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1124	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1125	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1126	Kaiser Permanente Northern California Institutional Review Board 1800 Harrison St, 10th Fl Oakland, CA 94612 UNITED STATES

Study Site Number	Independent Ethics Committee or Institutional Review Board Address(es)
1127	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1128	Copernicus Group IRB 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1129	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1130	Copernicus Group IRB 5000 Centregreen Way, Ste 200 Cary, NORTH CAROLINA 27513 UNITED STATES
1131	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1133	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1134	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES

Study Site Number	Independent Ethics Committee or Institutional Review Board Address(es)
1135	Copernicus Group IRB 5000 Centregreen Way, Ste 200 Cary, NORTH CAROLINA 27513 UNITED STATES
1136	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1139	WESTERN INSTITUTIONAL REVIEW BOARD 1019 39th Ave SE, Ste 120 Puyallup, WASHINGTON 98374-2115 UNITED STATES
1140	WESTERN INSTITUTIONAL REVIEW BOARD 1019 39th Ave S.E, Ste 120 Puyallup, WA 98374 UNITED STATES
1141	Western Institutional Review Board 1019 39th Ave SE, Ste 120 Puyallup, WASHINGTON 98374 UNITED STATES
1142	Copernicus Group IRB 5000 CentreGreen Way, Ste 200 Cary, NORTH CAROLINA 27513 UNITED STATES
1145	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES

Study Site Number	Independent Ethics Committee or Institutional Review Board Address(es)
1146	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1147	WCG IRB 1019 39th Ave Se, Ste 120 Puyallup, WASHINGTON 98374 UNITED STATES
1149	Copernicus Group IRB 5000 Centregreen Way, Ste 200 Cary, NORTH CAROLINA 27513 UNITED STATES
1150	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1152	Copernicus Group IRB 5000 Centregreen Way, Ste 200 Cary, NORTH CAROLINA 27513 UNITED STATES
1156	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1157	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES

Study Site Number	Independent Ethics Committee or Institutional Review Board Address(es)
1161	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1162	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1163	Copernicus Group IRB 5000 CentreGreen Way, Ste 200 Cary, NORTH CAROLINA 27513 UNITED STATES
1166	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1167	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1168	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1169	Lehigh Valley Health Network/Institutional Review Board/Research Participant Office 1255 S Cedar Crest Blvd, Ste 3200 Allentown, PA 18103 UNITED STATES

Study Site Number	Independent Ethics Committee or Institutional Review Board Address(es)
1170	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1171	Copernicus Group Institutional Review Board 5000 Centregreen Way, Ste 200 Cary, NORTH CAROLINA 27513 UNITED STATES
1174	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1177	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1178	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1179	Copernicus Group IRB 5000 Centregreen Way, Ste 200 Cary, NORTH CAROLINA 27513 UNITED STATES
1204	Western Institutional Review Board 1019 39th Ave SE, Ste 200 Puyallup, WA 98374-2115 UNITED STATES

Study Site Number	Independent Ethics Committee or Institutional Review Board Address(es)
1218	Indian Health Service National IRB 5600 Fishers Ln, MS 09E10D Rockville, MARYLAND 20857 UNITED STATES
	Johns Hopkins Bloomberg School of Public Health 615 N. Wolfe St, Rm E1100 Baltimore, MARYLAND 21205 UNITED STATES
1219	Navajo Nation Human Research Review Board Window Rock Blvd, Administration Bldg #2, Division of Health, P.O. Box 1390 Window Rock, ARIZONA 86515 UNITED STATES
	Johns Hopkins Bloomberg School of Public Health 615 N. Wolfe St, Rm E1100 Baltimore, MARYLAND 21205 UNITED STATES
1220	Navajo Nation Human Research Review Board Window Rock Blvd, Administration Bldg #2, Division of Health, P.O. Box 1390 Window Rock, ARIZONA 86515 UNITED STATES
	Johns Hopkins Bloomberg School of Public Health 615 N. Wolfe St, Rm E1100 Baltimore, MARYLAND 21205 UNITED STATES
1221	Johns Hopkins Bloomberg School of Public Health 615 N. Wolfe St, Rm E1100 Baltimore, MARYLAND 21205 UNITED STATES

Study Site Number	Independent Ethics Committee or Institutional Review Board Address(es)
	Navajo Nation Human Research Review Board Window Rock Blvd, Administration Bldg #2, Division of Health, P.O. Box 1390 Window Rock, ARIZONA 86515 UNITED STATES
1223	Yale University Human Research Protection Program (Human Investigation Committee) 25 Science Park, 3rd Fl, 150 Munson St New Haven, CT 06520 UNITED STATES
1224	Copernicus Group IRB 5000 Centregreen Way, Ste 200 Cary, NORTH CAROLINA 27513 UNITED STATES
1232	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1235	Western Institutional Review Board 1019 39th Ave. SE, Ste 120 Puyallup, WA 98374 UNITED STATES
1248	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1251	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES

Study Site Number	Independent Ethics Committee or Institutional Review Board Address(es)
1252	Copernicus Group Institutional Review Board 5000 Centregreen Way, Ste 200 Cary, NORTH CAROLINA 27513 UNITED STATES
1254	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1258	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1260	Western Institutional Review Board 1019 39th Ave SE, Ste 120 Puyallup, WA 98374 UNITED STATES
1261	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1264	Western Institutional Review Board 1019 39th Ave SE, Ste 120 Puyallup, WA 98374 UNITED STATES
1265	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES

Study Site Number	Independent Ethics Committee or Institutional Review Board Address(es)
1269	Copernicus Group Institutional Review Board 5000 CentreGreen Way, Ste 200 Cary, NC 27513 UNITED STATES
1270	Kaiser Permanente Northern California Institutional Review Board 1800 Harrison St, 10th Fl Oakland, CA 94612 UNITED STATES

Protocol Number: C4591001		**Assent Version Date: Phase 2/3, 03Feb2021**	
☑ **Study** ☐ **Country** ☐ **Site**	**Language: English**	**Center ID:** Not Applicable	**Country:** Not Applicable
Assent Derived From: Older Children Assent, Phase 2/3, 07Dec2020			

- This template is used by informed consent document authors to develop the assent document for 11-year-olds through legal age of adulthood.
- Do not delete the header at the top of this page until the assent is customized at the country/site-level.
- Before sending the assent to the institutional review board (IRB)/independent ethics committee (IEC), remove the header at the top of this page, remove all inapplicable text, remove all instructional green text, and replace all blue text with appropriate language.
- The assent must be filed in the Pfizer Trial Master File.

Protocol Number: C4591001		**Assent Version Date: Phase 2/3, 03Feb2021**	
☑ Study ☐ Country ☐ Site	**Language: English**	**Center ID:** Not Applicable	**Country:** Not Applicable
Assent Derived From: Older Children Assent, Phase 2/3, 07Dec2020			

A RESEARCH STUDY TO SEE IF A VACCINE AGAINST COVID-19 IS SAFE AND WORKS

We are asking if you would like to be in a research study to see if a vaccine to prevent COVID-19 is safe and if it can help prevent children and adults from getting COVID-19. Research studies are the way we find out if test medicines or vaccines are safe and if they work.

The study is being done with healthy children and adults and that is why the study doctor wants to know if you want to take part in the research study.

WHY ARE WE DOING THIS STUDY?

We are doing this study to collect information in children and adults to see if the vaccine is safe and if it can help prevent people from getting COVID-19.

The study doctor and nurses will explain the study and answer any questions that you have. You can circle or highlight things on this paper you want to know more about. If you don't understand something, just ask us. It is okay to ask questions now and anytime later that you think of them.

If you decide to be in this study, you will be asked to sign this form. Your parent(s) or your guardian(s) will sign another form. You can talk to your parent(s) or your guardian(s) and ask to read the information the study doctor gives them.

WHAT WILL HAPPEN TO ME IF I GO INTO THE STUDY?

The study starts with an appointment with the study doctor and some tests to see if you can be in the study. If you decide to take part in the study you will be given an injection in your arm at your first and second visit and will need to give at least 5 blood samples. There will be at least 6 visits to the study clinic over roughly the next 2 years.

If you get ill with COVID-19 like symptoms you will need to visit the study clinic and give another blood sample. This blood sample is 20 mL if you are 16 years of age or above, and it is 10 mL if you are between 12 to 15 years of age. If you would like to know what 10 mL or 20 mL looks like please ask the study team and they will be able to show you the tubes they will collect the blood in.

Protocol Number: C4591001		**Assent Version Date: Phase 2/3, 03Feb2021**	
☑ **Study** ☐ **Country** ☐ **Site**	**Language: English**	**Center ID:** Not Applicable	**Country:** Not Applicable
Assent Derived From: Older Children Assent, Phase 2/3, 07Dec2020			

At your first visit, the study doctor or nurse will give you or your parent(s)/ guardian(s) a device (a bit like a mobile phone) or ask to download an application ('app') to smart phone if you or your parent(s)/ guardian(s) have one. The device/app is secure and your information will be maintained in confidence. The study doctor will show you or your parent(s)/ guardian(s) on how to fill in the electronic diary (also called e-Diary).

There are 2 parts to the electronic diary. Everyone will need to complete the COVID-19 illness part of the e-Diary on the device or app on their smartphone. The COVID-19 illness e-Diary will prompt you or your parent(s)/ guardian(s) to record any COVID-19 symptoms every 7 days or at any time you have COVID-19 symptoms. You or your parent(s)/ guardian(s) may also receive text messages to your/ their device or your/ their own smartphone, or emails (if you or your parent(s)/ guardian(s) provide an email address) to remind you or your parent(s)/ guardian(s) to complete the COVID-19 illness part of the e-Diary.

If you are part of a selected group of participants, you or your parent(s)/ guardian(s) will also be asked to fill in an e-Diary about how you are feeling for 7 days afer your vaccine injections.

If you decide the take part the following will happen:

At your first visit:

- Before you are given your injection, the study doctor or nurse will take your temperature, measure your height and weight, do a physical exam and ask you some questions about your health.
- The study doctor or nurse will take a blood sample from your arm using a needle (this will be either 20mL or 10 mL depending on your age group) and take a sample from your nose using a swab (like a Q-tip).
- You will then be given an injection into the muscle at the top of your arm.
- If you are part of the selected group of participants, you or your parent(s)/ guardian(s) will be asked to complete an electronic diary about how you are feeling for 7 days after the visit.

At your second visit:

- You will be given your second injection, the study doctor or nurse will take your temperature and ask you some questions about your health before they give your injection in your arm.

- If you are part of the selected group of participants, you or your parent(s)/ guardian(s) will be asked to complete an electronic diary about how you are feeling for 7 days after the visit.

It is very important that you or your parent(s)/ guardian(s), as appropriate, complete the e-Diary regularly as instructed. If this was not completed, your study doctor or nurse will contact you or your parent(s)/ guardian(s) to check how you are doing.

At the other 4 visits the study doctor or nurse will ask you some questions about your health and will take a blood sample from your arm using a needle. Each blood sample will be either about 20mL (4 teaspoons) or 10 mL (2 teaspoons) depending on your age group.

When you visit the study doctor, the study doctor will write down information about you. Only people who are working on this study will see your information. They are required to keep your information private.

What are the Study Injections?

There are 2 types of injections in the study. The active study injection and a dummy placebo injection. A dummy placebo is a pretend vaccine that looks just like the test vaccine but has no active ingredients in it.

Once the study doctor has checked that it is OK for you to be in the study a computer will decide if you will get the active study injection or the dummy placebo. **You and your parent(s)/guardian(s) will not be told which injection you will get.**

For every 1 child/young person who receives the study vaccine, 1 child/young person will receive the placebo. No one (including you, your parents, your personal doctor or the study team) can choose which injection you will get.

WHAT ARE THE POSSIBLE BENEFITS TO ME IF I AGREE TO BE IN THIS STUDY?

Vaccination with BNT162b2 (which is active study injection) has been shown to be effective in preventing COVID-19 in the groups of people already studied, but not yet in children/young people like you. Because of this, and the fact that you may receive the placebo vaccination, you still need to follow local recommendations about how to avoid COVID-19 (for example, social distancing and mask use).

WHAT ARE THE POSSIBLE UNCOMFORTABLE OR HARMFUL THINGS THAT COULD HAPPEN TO ME IF I AGREE TO BE IN THIS STUDY?

There is a chance that during the study you could feel pain or feel bad or uncomfortable. Please let the study doctor know if you experience any of these things. The study team will monitor you for risks or discomforts during the study. However, the study team does not know all the effects that the vaccine, or your participation in this study, may have on you.

The injection could cause pain, swelling, and redness where it is given.

Other side effects could include fatigue (tiredness), increased body temperature (fever), chills, headache, joint aches, muscle aches, feeling sick (nausea), enlarged lymph glands, allergic reaction (symptoms may include rash, itching, hives, and swelling of the face or lips), pain in arm, feeling weak or unwell, and severe allergic reaction (anaphylaxis).

In addition,

- Taking a blood sample may:
  - hurt when the needle goes into your arm.
  - cause a red spot or bruise on your arm or your arm might feel sore.
  - make you feel dizzy.
  - cause an infection at the place where the needle went into your arm.
- Taking a swab from your nose may:
  - hurt when the sample is taken.
  - Cause your nose to bleed.
- You may feel embarrassed by the questions the study doctor or nurse asks you.

You might also feel other things. Remember to tell your parent(s) or your guardian(s) and the study doctor everything you are feeling while you are in the study including if you feel unwell.

Pregnancy, Contraceptives and Babies (do I need to use birth control?)

If you are a girl:

If you are pregnant, planning to become pregnant or breast feeding a baby, you cannot be in the study.

If you think you are pregnant during the study, you must tell the study doctor immediately. The study doctor may ask for information about the pregnancy and the birth of the baby. The study doctor may share this information with others who are working on this study.

If you have started to have periods, the study doctor or nurse will test your urine to make sure you are not pregnant before you are given your injections. The doctor or nurse will tell you if the test results show you are pregnant. Depending on the laws of your area, the study doctor or nurse may also tell your parent(s) or your guardian(s) about the results of the pregnancy test.

If you are sexually active, you must use birth control consistently and correctly during the study and for at least 28 days after your second injection. Your study doctor or nurse will discuss this with you if it is appropriate to do so.

If you are a boy:

If you are sexually active, you must use birth control (eg a condom) consistently and correctly during the study and for at least 28 days after your second injection. Your study doctor or nurse will discuss this with you if it is appropriate to do so.

If you think that you may have gotten a girl pregnant, you must tell your study doctor immediately. The study doctor may ask for information about the pregnancy and the birth of the baby. The study doctor may share this information with others who are working on this study.

WHAT OTHER OPTIONS ARE THERE?

This study is for research purposes only. Your alternative is to not take part in this study.

Taking part is voluntary and **you do not have to be in the study if you don't want to.**

It is your choice if you want to be in this study or not. No one will be mad if you choose not to take part.

Your doctors or your parent(s) or your guardian(s) cannot make you be in the study if you don't want to be in it. If you say okay now to being in the study and you change your mind about it later, you can stop being in the study. Just tell the study doctor or your parent(s) or your guardian(s) if you want to stop at any time. If you quit the study, you will be asked to come in for one last visit.

WHAT IF I HAVE QUESTIONS?

You can ask questions about the study at any time.

You can call the study doctor any time.

If you want to ask questions about what it means to be in a research study, you or your parent(s) or your guardian(s) can call [insert IRB/IEC name] (a group of people who review the study to protect your rights) at [insert IRB/IEC number].

For you to be in this study, you and your parent(s) or your guardian(s) must agree to you being in it. But it is still up to you if you *want* to do it.

Protocol Number: C4591001		**Assent Version Date: Phase 2/3, 03Feb2021**	
☑ **Study** ☐ **Country** ☐ **Site**	**Language: English**	**Center ID:** Not Applicable	**Country:** Not Applicable
Assent Derived From: Older Children Assent, Phase 2/3, 07Dec2020			

Please check one box below to show whether or not you want to be in this study.

☐ Yes, I want to be in this study.

☐ No, I do not want to be in this study.

_____
Printed Name of Child/Young Person

_____ _____ _____
Child/Young Person Signature Date Time

Statement of person conducting assent discussion:

1. I have explained all aspects of the research to the participant to the best of his or her ability to understand.
2. I have answered all questions of the participant relating to this research.
3. I believe the participant's decision to enroll or not enroll is voluntary.
4. If the participant decides to enroll, the study doctor and study staff agree to respect the participant's physical or emotional dissent at any time during this research when that dissent pertains to anything being done solely for the purpose of this research.

Printed Name of Person Obtaining Assent: _____

Signature of Person Obtaining Assent: _____ Date: _____ Time: _____

Protocol Number: C4591001		**ICD Version Date: Phase 2/3, 03Feb2021**	
☑ **Study** ☐ **Country** ☐ **Site**	**Language: English**	**Center ID:** Not Applicable	**Country:** Not Applicable
ICD Derived From: Study level, Phase 2/3, 08Dec2020			

Table of Contents

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Privacy Supplement

1. Key Study Information and Contact Information

The study team will address any questions, concerns or complaints you may have before, during and after you complete the study. The study team includes the study doctor, nurses, and others who work with the study doctor.

Phone numbers for the study team are listed below under "Study Site Contact Information." **You also will be given a card with important emergency contact information, including a 24-hour number.** Show this card to any doctor, nurse or other health care provider if you seek emergency care while you are taking part in this study. This card includes information about the study that will help them treat you.

If you have any general questions about your rights as a study participant, or would like to obtain information from, offer suggestions to, or speak with someone not directly involved in the study, you may contact **[**For the site-level ICD, include as appropriate: the Institutional Review Board ***or*** the Independent Ethics Committee, patient rights advocate, and/or bioethicist**]** listed below.

Name of Study: **A PHASE 1/2/3, PLACEBO-CONTROLLED, RANDOMIZED, OBSERVER-BLIND, DOSE-FINDING STUDY TO EVALUATE THE SAFETY, TOLERABILITY, IMMUNOGENICITY, AND EFFICACY OF SARS-COV-2 RNA VACCINE CANDIDATES AGAINST COVID-19 IN HEALTHY INDIVIDUALS**

[Institution] Study Number:

Sponsor Study Number: **C4591001**

Name of Company Sponsoring the Study: **BioNTech. Pfizer is conducting the study for BioNTech**

Name of Principal Investigator (Study Doctor):

Study Site Contact Information:

Contact Person:

Address:

Phone Number (Normal Business Hours):

Phone Number (Off-Hours or Emergency):

[Complete the following entries for the site-level ICD as appropriate.**]**

[Institutional Review Board *or* Independent Ethics Committee] Contact Information:

Contact Person:

Address:

Phone Number:

Patient Rights Advocate:

Contact Person:

Address:

Phone Number:

Bioethicist:

Contact Person:

Address:

Phone Number:

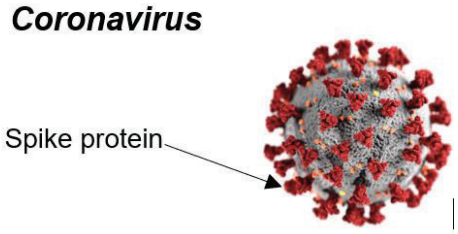
2. Brief Summary of this Study

This is a research study involving both Pfizer and BioNTech. Pfizer and BioNTech are separate companies who are cooperating to perform this study. Pfizer is responsible for conducting this study. BioNTech is the regulatory sponsor of this study. Funding for this study is provided by BioNTech and Pfizer and [the study doctor/institution] will be paid to conduct this study.

A new respiratory disease appeared in Wuhan, China in December 2019 and has since rapidly spread to many other countries around the world. In January 2020, the cause of this disease was found to be a new Coronavirus; and the disease it causes was named COVID-19 (Coronavirus disease 2019). Since then, many companies around the World have quickly started to look for treatments and ways to prevent COVID-19.

Vaccines help your body to produce antibodies to help you to fight off a disease. This research study involves 2 investigational vaccines to prevent COVID-19, that will be given to healthy volunteers. The vaccines are given by injection. The vaccines are slightly different but work in the same way. The study will also test each of these vaccines at different dose levels (amounts of vaccine).

These vaccines do not contain the whole virus, or the parts of the virus that can make you ill, instead the vaccines are made up of part of the virus's genetic code, surrounded by fatty particles called lipids. They use your own cells' protein making machinery to produce some, or all, of the spike protein seen on the outside of the virus. This spike protein, made by your own body, may help your body to produce antibodies to fight against COVID-19. We will check how many antibodies you make by taking blood samples and testing them.



This study is different from your regular medical care. The purpose of regular medical care is to improve or otherwise manage your health, but the purpose of research is to gather information to advance science and medicine and does not replace your regular medical care. If you need medical care during your time in the study, you should contact your regular provider and inform the study team, as described later in this document.

Taking part in this study is voluntary (your choice). There is no penalty or change to your regular medical care if you decide not to participate. You can choose to take part in the study now, and then change your mind later at any time without losing any benefits or medical care to which you are entitled. We encourage you to have conversations with your family, caregivers, doctors, and study team about taking part in this study and whether it is right for you. The study team will work with you to answer any questions that you may have about the study.

You will receive a signed copy of this consent document for your records. Please keep this consent document for your reference.

3. What is the purpose of this study?

The World Health Organization (WHO) has declared COVID-19 to be a pandemic (a disease that has spread all over the world and is affecting lots of people); finding a vaccine to prevent COVID-19 is an urgent need. To test this investigational vaccine as quickly as possible, this study has been separated into 2 phases. In both the phases we will try to see if the vaccine works to prevent COVID-19, as well as:

- **Phase 1** where we choose which vaccines at which dose levels are safest and make the most antibodies.
- **Phase 2/3** where we look at one vaccine at one dose level in lots of people to collect even more information about the safety of the vaccines and the amounts of antibodies they produce.

You are being asked to take part in **Phase 2/3.**

The study will compare the results of the people who receive the study vaccine (BNT162b2) with those who receive a placebo (a placebo does not contain any active ingredients). In this study the placebo will be salt-water, also known as normal saline. Everyone in Phase 2/3 of the study will receive 2 injections of either:

- Study vaccine followed by study vaccine
- Placebo followed by placebo

In Phase 2/3 everyone who receives the study vaccine will receive the same vaccine at the same dose, that was chosen based on the results from Phase 1.

The study doctor will determine whether you are eligible for the study. This study will require you to visit the study doctor to undergo study procedures and to provide information about your health. You will also be required to contact the study doctor if you experience any of the COVID-19 symptoms (explained later in this document).

4. How long will I participate in this study?

You could be in this study for up to about 26 months. You will need to visit the study site 6 to 7 planned times during the study, and any time after you have experienced COVID-19 symptoms and are feeling better in about a month's time.

5. How many people will take part in this study?

Approximately 44,193 healthy people could take part in the 2 phases of this study. In Phase 2/3 of the study up to 43,998 people will take part.

It is expected that about [number] people will participate in Phase 2/3 of the study at this location.

6. What will happen during this study?

Before any study procedures begin, or before you begin preparing for the study, you will be asked to read and sign this consent document.

After signing this consent document, the study doctor will check if you meet all of the requirements to take part in this study. If you do not meet the requirements, you will not be able to take part in the study and the study doctor will explain why this is the case.

Study Vaccines

Once the study doctor has confirmed you meet the study requirements, you will be randomly assigned (like flipping a coin) to receive the study vaccine or placebo. For every 1 person who receive the study vaccine, 1 person will receive the placebo. No one (including you, your personal doctor and the study team) can choose this assignment.

This is an 'observer-blind study', which means that you and the study doctor will not know whether you are receiving the study vaccine or placebo, but the person who gives you the vaccine will know because the vaccine and placebo do not look the same. However, the syringe will be covered with a label so the contents are not visible and the person that gives you the vaccine will not be able to talk about it with you. In case of

urgent need, the study doctor can learn quickly whether you have received study vaccine or placebo.

The study vaccine or placebo will be given to you through an injection into the muscle in your upper arm. Everyone will receive 2 injections, approximately 3 weeks apart. On the days you receive the study vaccine or placebo, you will be asked to wait at the study site for at least 30 minutes for observation after receiving the study vaccine or placebo.

Overview of Study Procedures and Assessments

The table below lists the tests and procedures or assessments that you will have done in this research study. In addition to the visits listed, your study doctor may ask you to come in for extra visit(s) if necessary, to protect your well-being.

For people taking part in Phase 2/3, the study doctor or nurse will:

Visit Number	1	2	3	4	5	6
Visit Description	**Study Vaccine 1**	**Study Vaccine 2**	**1-Month Visit**	**6-Month Visit**	**12-Month Visit**	**24-Month Visit**
Ask about Medical history as well as date of birth, sex, race and ethnicity	X					
Ask about medicines you are currently taking	X	X	X	X	X	X
Perform clinical assessment	X					
Record latest CD4 count and viral load (for HIV positive participants only)	X		X	X	X	X
Measure body temperature	X	X				
Measure height and weight	X					
Urine pregnancy test (if appropriate)	X	X				
Ask about other vaccinations you have had	X	X	X	X		
Check you meet all the study requirements	X	X				
Check contraceptives (if appropriate)	X	X	X			
Collect blood sample to test antibody levels	~20 mL		~20 mL	~20 mL	~20 mL	~20 mL
Take a nasal swab	X	X				
Get the study injection, followed by a 30mins observation period	X	X				
Give you an e-diary or help you download one	X					
Vaccination e-diary completion for 7 days (if you are part of chosen group to self-report potential side effects daily for 7 days following each vaccination)	X	X				
COVID-19 illness e-diary completion	X	X	X	X	X	X
Ask how you are feeling generally	X	X	X	X	X	X

Blood samples for antibody testing

You will have blood taken 5 times during the planned visits of the study. This will be used to test if you already had antibodies against the coronavirus that causes COVID-19 when you enrolled in the study and may be used to test your antibody levels after vaccination. About 20mL of blood (about 4 teaspoons) will be collected from your arm using a needle at these visits.

E-Diary

At Visit 1, the study team will show you how to fill in an electronic diary (or e-Diary). We will either give you a device (a bit like a mobile phone) or ask you to download an application ('app') to your smart phone if you have one. The device/app is secure and your confidentiality will be maintained.

There are 2 parts to the e-Diary. Everyone will need to complete the COVID-19 illness part of the e-Diary on the device or app on your smartphone. The COVID-19 illness e-Diary will prompt you to record any COVID-19 symptoms (see below) every 7 days or at any time you have COVID-19 symptoms. You may also receive text messages to the device or your own smartphone, or emails (if you provide your email address) to remind you to complete the COVID-19 illness part of the e-Diary.

If you are part of a subset of participants, you will also be instructed by the study team to complete the vaccination part of the e-Diary for 7 days after each vaccination, once a day in the evening with the first day being the day of the vaccination.

You will be given a thermometer and a measuring device to take home. You will use the thermometer to measure your temperature under your tongue and you will use the measuring device to measure any redness or swelling where the injection was given. You will need to record these measurements in the vaccination part of the e-Diary.

The vaccination part of the e-Diary will also ask other questions about potential side effects you may have after the injection. If you have any severe symptoms after your vaccination, you should contact your study doctor and the study doctor or nurse may schedule an extra visit.

It is very important that you complete the e-Diary regularly as instructed. If you do not, your study doctor or nurse will contact you to check how you are.

Urine pregnancy test

If you're a woman who is able to have children, you will have a urine pregnancy test to check you are not pregnant before you get the study injection.

What happens if I have positive nasal swab test result?

Nasal swabs obtained during the study (at Visits 1 and 2, and at the time of a potential COVID-19 illness – see below) will be tested in a research laboratory. Positive results from the Visit 1 and 2 swabs, and all results from the illness visit swabs, will be provided to your study doctor, but this will take some time so you should not rely on these for medical treatment. If you has a positive nasal swab test result for the coronavirus that causes COVID-19, either at Visit 1 or any time between Visit 1 and Visit 2, but with no potential COVID-19 related symptoms, you will continue to receive the second study vaccine as normal. However, if the positive COVID-19 test result is accompanied by potential COVID-19 related symptoms, you will not be given the second study vaccine but will be requested to remain in the study.

If You Get COVID-19 Symptoms

If you get any of the following you must contact the study doctor straight away. Note that this is not instead of your routine medical care. If you feel unwell enough that you would normally see a healthcare professional, please contact your usual provider, as well as the study doctor.

- **A diagnosis of COVID-19;**
- **Fever;**
- **New or increased cough;**
- **New or increased shortness of breath;**
- **Chills;**
- **New or increased muscle pain;**
- **New loss of taste/smell;**
- **Sore throat;**
- **Diarrhea;**
- **Vomiting.**

The study doctor may ask you to have a telephone conversation, video call or to visit the site to talk about how you are feeling and if you have needed any other medical care. They will also ask you to take a nose swab or take one from you to check for the coronavirus. We will give you separate instructions about how to take a nose swab yourself and how to ship the swab to the laboratory if needed. The result from this swab will be provided to the study doctor once it is available, but this will take some time, and cannot be used to diagnose you with COVID-19. This is why it is important that you contact your usual provider if you have COVID-19 symptoms and think you need medical care.

If you are diagnosed with COVID-19, for the purposes of the study, the study doctor will contact your usual provider, and any facility where you are treated, to obtain details and collect medical records: by signing this informed consent document, you agree to this.

The study doctor will arrange an extra visit to the study site about a month after you became unwell and you will give another 20 mL (about 4 teaspoons) blood sample to test your antibody levels.

After the study

The study vaccine is available only during this study and not after the study is over. If you leave the study before receiving the study vaccine, it may be available to you through an authorized healthcare professional.

7. Are there any special instructions to follow for this study?

It is important you follow all the instructions given to you by the study nurse or doctor and tell them if:

- You don't understand anything about the study
- You are not able to comply with the study requirements
- There are changes in your health
- You take any new medications or receive any other vaccines
- You are going away for a long period
- You wish to take part in another research study

8. What are the possible risks and discomforts of this study?

Any research has some risks, which may include negative effects that could make you unwell or uncomfortable and even potentially be serious or life-threatening. All research participants taking part in the study will be watched carefully for any negative effects; however, the study team does not know all the effects that the study vaccine may have on you.

If you take part in this study, the most likely risks or discomforts to happen to you are discussed below.

It is important that you report to the study team all symptoms and side effects as soon as they occur. Phone numbers for the study team are listed in [Section 1] of this consent document.

Study Vaccine Risks

Up until the end of 2020, the safety of BNT162b2 has been studied in clinical trials that have included 21,744 people 16 yrs of age and older who have received at least one dose of the vaccine. In addition, since the vaccine has been approved for emergency use in many countries, about 26 million doses have been distributed.

Based on the clinical study results, and information gathered during general use, the following risks have been determined to be caused by BNT162b2 vaccine:

Very common (occurring in more than 1 in 10 people): injection site pain, injection site swelling, fatigue (tiredness), increased body temperature (fever, more common after the second dose), chills, headache, joint aches, and muscle aches.

Common (between 1 in 10 and 1 in 100 people): feeling sick (nausea), and injection site redness.

Uncommon (between 1 in 100 and 1 in 1,000 people): enlarged lymph glands, allergic reactions (symptoms may include rash, itching, hives, and swelling of the face or lips), pain in arm, and feeling weak or unwell.

Frequency cannot be estimated from available data: severe allergic reaction (anaphylaxis).

As in all research studies, the COVID-19 vaccine may involve risks that might be expected based on results from studies of similar vaccines, as well as risks that are currently unknown.

Therefore, it is important that you report all symptoms and side effects that you experience as soon as they occur, whether or not you think they are caused by the study vaccine.

Due to the way in which the study vaccines are made, they cannot cause COVID-19 disease.

If I catch COVID-19 disease, could the vaccine make it worse?

For some other vaccines tested in animals against similar viruses (but not the coronavirus that causes COVID-19), there have been reports of the illness being more severe in the animals that received the vaccine than in those that did not. So far this has not been seen with BNT162b2. It remains important for you to contact your study doctor if you develop symptoms that might be caused by COVID-19 (for example, fever, cough, shortness of breath).

Placebo Risks

As the placebo injection contains salt-water and no active ingredients, the chances of having the side effects mentioned above are less likely. In other studies using the same placebo, some people who received the placebo injection reported pain, bruising, swelling and redness at the site of injection.

Risks from Study Procedures

Risks and possible discomforts you might have from the study procedures include:

- **Blood samples:** The risks and possible discomforts involved in taking blood include pain from inserting the needle, or less often, swelling, bruising, or infection around the vein where the blood is collected. You may feel dizzy or may faint. If you have a previous history of feeling dizzy or fainting during blood sample collection, you should talk to the study doctor.
- **Nasal Swabs:** The risks and possible discomforts involved in taking nasal swabs may include pain or general discomfort. Sometimes it may cause the nose to bleed.

Pregnancy-Related Risks; Use of Birth Control

If you are currently pregnant, plan to become pregnant, or are breastfeeding a child, you should not join this study.

If you are able to have children and you are sexually active, you must use birth control consistently and correctly for at least 28 days after you receive your last injection. This applies to men as well as women who take part in the research study. The study doctor will discuss with you the methods of birth control that you should use while you are in this research study and will help you select the method(s) that is appropriate for you. The study doctor will also check that you understand how to use the birth control method and may review this with you at each of your research study visits.

Birth control methods, even when used properly are not perfect. If you or your partner becomes pregnant during the research study, or you want to stop your required birth control during the research study, you should tell the study doctor immediately. You may be withdrawn from the research study if you stop using birth control or you become pregnant.

Pregnancy Follow-up

If you or your partner become pregnant during the study, up until 6 months after you last study injection, please tell the study doctor **immediately**. Please also tell the doctor who will be taking care of you/your partner during the pregnancy that you took part in this study. The study doctor will ask if you/your partner or your pregnancy doctor is willing to provide updates on the progress of the pregnancy and its outcome. If you/your partner agree, this information will be provided to BioNTech/Pfizer for safety follow-up.

9. What are possible benefits of this study?

Vaccination with BNT162b2 has been shown to be effective in preventing COVID-19 in the groups of people already studied, but not yet in people like you. Because of this, and the fact that you may receive the placebo vaccination, you still need to follow local recommendations about how to avoid COVID-19 (for example, social distancing and mask use).

10. What will happen to my blood and nasal swab samples?

Your blood and nasal swab samples will be used only for scientific research. Each sample will be labeled with a code so that the laboratory workers testing the samples will not know who you are. Some of the samples may be stored for future testing and may be kept for up to 15 years after the study ends, at which time they will be destroyed. In addition to testing for this study, any samples left over after the study is complete may be used for additional research related to the development of products. No testing of your DNA will be performed.

You may request that your samples, if they can be identified, be destroyed at any time. Any data already collected from those samples will still be used for the study. The samples will remain the property of BioNTech/Pfizer and may be shared with other researchers as long as confidentiality is maintained and no testing of your DNA will be performed. You will not be told of additional tests, nor will you receive results of any of these tests.

11. What other choices do I have if I do not join this study?

This study is for research purposes only. Your alternative is to not take part in this study.

12. What happens if I am injured during this study?

For mandatory research injury language, <**click here**> (retain this link in the study-level ICD). The country-specific research injury language must be included verbatim in the country-level ICD.

13. What if I join this study and then change my mind?

If you agree to participate and then change your mind for any reason, you are free to stop participating at any time. Your decision will not affect your regular medical care or any benefits to which you are entitled. Tell the study doctor if you are thinking about stopping or decide to stop so that you can end participation in the study in the safest way.

While you are participating, the study team will tell you in a timely manner if new information is learned during the course of the study that could change your mind about continuing in this study. If you decide to withdraw from the study, you may be asked to

continue to participate in the study procedures even though you would no longer receive the study vaccine.

If you agree to continue with the study, information about your health will continue to be collected as described in [Section 6].

If you decide to stop participating in this study, you must notify the study doctor. The study team will explain what other procedures or discussions would occur.

Sometimes the study doctor or BioNTech/Pfizer may decide to take you out of the study (even if you do not agree) if:

- You are unable or unwilling to follow the instructions of the study team;
- The study doctor decides that the study is not in your best interest or that you are no longer eligible to participate; or
- The study is stopped by BioNTech/Pfizer, the institutional review board (IRB) or independent ethics committee (IEC) (a group of people who review the study to protect your rights), or by a government or regulatory agency.

The study team will give you a Privacy Supplement, which is considered part of this consent document. It describes what happens to your personal information (including your biological samples) and how it may be used if you withdraw from the study.

14. What will I have to pay for if I take part in this study?

You will not need to pay for any of the study vaccines (COVID-19 Vaccine or placebo), study-related procedures, or study visits.

15. Will I be paid for taking part in this study?

You will not receive any payment for taking part in this study. However, for each visit you complete, you will be reimbursed by the study site to cover reasonable expenses (for example, parking, meals, travel) that you have as a result of taking part in this study. You will be reimbursed by [enter, as applicable, method of reimbursement; amounts; and reimbursement schedule; note whether receipts are required].

BioNTech/Pfizer may use information resulting from the study to develop products or processes from which they may make a profit. There are no plans to pay you or provide you with any products developed from this research. BioNTech/Pfizer will own all products or processes that are developed using information from the study.

16. What will happen to my personal information?

<click here> for language to be inserted into this section. This text must be inserted verbatim. Any requested changes must be approved by Clinical Development Legal. Note that the Privacy Supplement follows this consent document, after the signature section.

17. Where can I find additional information about this study or the study results?

A description of this clinical trial will be available on http://www.ClinicalTrials.gov, as required by U.S. Law. This Web site will not include information that can identify you. At most, the Web site will include a summary of the results. You can search this Web site at any time.

The study results, when available, may also be found on www.pfizer.com and https://www.clinicaltrialsregister.eu/.

In addition, a plain summary of the study results will be made available in the EU database at [insert link to the database]. This information will be provided no matter what the study's outcome. To the extent possible, you will be able to access these summaries in the EU database soon after they become available using the following EU trial number for the study: [insert trial number].

These Web sites are in English only. If you need assistance understanding these Web sites, please ask a member of the study team.

BioNTech/Pfizer will provide the study doctor with information about the study results when all participants have completed the study. At that time, certain of your individual study results may be given to you or your doctor (if different from the study doctor) in accordance with applicable law, but will not be given to your family, your employer or any insurance company.

If any exploratory research is done, it may not be possible to link any results from that exploratory research to specific individuals, including you. BioNTech/Pfizer does not plan to return information from any exploratory research to you, the study doctor, or your doctor (if different from the study doctor).

18. Signatures

Agreement to Participate and to Process Data
1. I confirm I have read (or, if I cannot read, a study team member has read to me) and understand this consent document for the study described above and have

had the opportunity to ask questions. I have had enough time to review this consent document. I also have had an opportunity to ask about the details of the study and to decide whether or not to participate.
2. I have read and understand the Privacy Supplement. I understand that taking part in the study will require the processing (including collection, use, transfer, storage, analysis and reporting) of my personal information, as explained in the Privacy Supplement. I understand and agree to the processing of my personal information within and outside my country of residence for health care, medical research and/or regulatory purposes.
3. I understand that taking part is voluntary and that I am free to stop taking part in this study or to withdraw my consent to the processing of my personal information at any time. I do not need to give any reason and my regular medical care and legal rights will not be affected. However, even if I withdraw my consent to processing, my personal information held at that time may be kept to comply with laws and regulations and to maintain the integrity of the study. I also understand that my biological samples may not be able to be destroyed because they may no longer be traceable to me, may have already been used, or may have been given to a third party.
4. I agree to the study team accessing my medical history, including information from medical records and test results and any medical treatment I receive during the course of the study, and if necessary, contacting my doctor or any other health care providers treating me for access to such information.
5. I understand that BioNTech/Pfizer and/or others working with or on behalf of BioNTech/Pfizer, institutional review boards (IRBs) or independent ethics committees (IECs), and regulatory agencies may need access to personal information about me generated at the study site or collected by the study team for the study and any other research. I agree that they may have access to my personal information.
6. I do not give up any of my legal rights by signing this consent document. I have been told that I will receive a signed and dated copy of this document.
7. I agree to take part in the study described in this document.

_____

Printed name of participant

_____ _____

Signature of participant Date of signature§

(If no legally acceptable representative is used)

§Participant must personally date their signature.

Person Obtaining Consent:

_____
Printed Name of the Person Conducting the Consent Discussion

_____ _____
Signature of the Person Conducting the Consent Discussion † Date of signature

†The investigator, or an appropriately qualified and trained person designated by the investigator to conduct the informed consent process, must sign and date the consent document during the same discussion when the participant signs the consent document.

PRIVACY SUPPLEMENT

For mandatory country-specific data privacy language to be inserted in this Privacy Supplement, <**click here**> (retain this link in the study-level ICD). The country-specific data privacy language must be included verbatim in the country-level ICD. Any requested changes must be approved by Clinical Development Legal.

Who will use my personal information, how will they use it, and where will it be stored?

[Mandatory study language – retain the below paragraph and delete this green text before finalisation]

Any personal information collected about you during this study will be entered into records, including health records, maintained by the study team at your study site. Your records that include information that directly identifies you may be uploaded to secure systems maintained by a third party engaged by BioNTech/Pfizer so that BioNTech/Pfizer and/or BioNTech/Pfizer representatives can review and verify study data. Some of the uploaded records will be kept for XX years. The remaining records that are uploaded will be temporary and removed from the secure system after the study is over.

Protocol Number: C4591001		**ICD Version Date: Parent ICD, Phase 2/3, 03Feb2021**	
☑ **Study** ☐ **Country** ☐ **Site**	**Language: English**	**Center ID:** Not Applicable	**Country:** Not Applicable
ICD Derived From: Parent ICD, Phase 2/3, 08Dec2020			

Table of Contents

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Privacy Supplement

1. Key Study Information and Contact Information

The study team will address any questions, concerns or complaints you or your child may have before, during and after your child complete the study. The study team includes the study doctor, nurses, and others who work with the study doctor.

Phone numbers for the study team are listed below under "Study Site Contact Information." **You also will be given a card with important emergency contact information, including a 24-hour number.** Show this card to any doctor, nurse or other health care provider if your child seeks emergency care while taking part in this study. This card includes information about the study that will help them treat your child.

If you have any general questions about your child's rights as a study participant, or would like to obtain information from, offer suggestions to, or speak with someone not directly involved in the study, you may contact **[**For the site-level ICD, include as appropriate: the Institutional Review Board ***or*** the Independent Ethics Committee, patient rights advocate, and/or bioethicist**]** listed below.

Name of Study: **A PHASE 1/2/3, PLACEBO-CONTROLLED, RANDOMIZED, OBSERVER-BLIND, DOSE-FINDING STUDY TO EVALUATE THE SAFETY, TOLERABILITY, IMMUNOGENICITY, AND EFFICACY OF SARS-COV-2 RNA VACCINE CANDIDATES AGAINST COVID-19 IN HEALTHY INDIVIDUALS**

[Institution] Study Number:

Sponsor Study Number: **C4591001**

Name of Company Sponsoring the Study: **BioNTech. Pfizer is conducting the study for BioNTech**

Name of Principal Investigator (Study Doctor):

Study Site Contact Information:

Contact Person:

Address:

Phone Number (Normal Business Hours):

Phone Number (Off-Hours or Emergency):

[Complete the following entries for the site-level ICD as appropriate.**]**

[Institutional Review Board *or* Independent Ethics Committee] Contact Information:

Contact Person:

Address:

Phone Number:

Patient Rights Advocate:

Contact Person:

Address:

Phone Number:

Bioethicist:

Contact Person:

Address:

Phone Number:

2. Brief Summary of this Study

You are being asked to allow your child to take part in a research study that involves comparing an investigational (study) vaccine against a placebo (injection with no active ingredient) to see if the vaccine can prevent COVID-19. The vaccine is given by injection.

Depending on your child's age, mental status and local laws, the study team **may need to verify your child's agreement (called "assent") to take part in this study**. Your child may give assent verbally, or they may be asked to print or sign their name on an assent document similar to this consent document. They may have an opportunity to meet privately with a member of the study team to ask confidential questions. Your child will also be able to decide not to take part for confidential reasons, which, if they request, would not be shared with you unless required by local law. Also, if your child reaches the legally recognized age of majority (adulthood) during the study, they must separately provide their consent to continue taking part in the study.

You are being asked to allow your child to be in this research study because your child is healthy and over the age of 12.

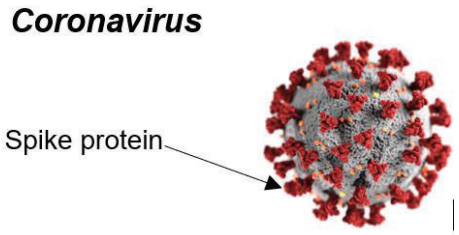
This is a research study involving both Pfizer and BioNTech. Pfizer and BioNTech are separate companies who are cooperating to perform this study. Pfizer is responsible for conducting this study. BioNTech is the regulatory sponsor of this study. Funding for this study is provided by BioNTech and Pfizer and [the study doctor/institution] will be paid to conduct this study.

A new respiratory disease appeared in Wuhan, China in December 2019 and has since rapidly spread to many other countries around the world. In January 2020, the cause of this disease was found to be a new Coronavirus; and the disease it causes was named COVID-19 (Coronavirus disease 2019). Since then, many companies around the World have quickly started to look for treatments and ways to prevent COVID-19.

Vaccines help your body to produce antibodies to help you to fight off a disease. This research study involves 2 investigational vaccines to prevent COVID-19, that will be

given to volunteers. The vaccines are given by injection. The vaccines are slightly different but work in the same way. The study will also test each of these vaccines at different dose levels (amounts of vaccine).

These vaccines do not contain the whole virus, or the parts of the virus that can make your child ill, instead the vaccines are made up of part of the virus's genetic code, surrounded by fatty particles called lipids. They use a persons cells' protein making machinery to produce some, or all, of the spike protein seen on the outside of the virus. This spike protein, made by your child's body, may help your child's body to produce antibodies to fight against COVID-19. We will check how many antibodies your child makes by taking blood samples and testing them.



This study is different from your child's regular medical care. The purpose of regular medical care is to improve or otherwise manage your child's health, but the purpose of research is to gather information to advance science and medicine and does not replace your child's regular medical care. If your child needs medical care during their time in the study, you should contact your regular provider and inform the study team, as described later in this document.

Allowing your child to taking part in this study is voluntary (your choice). There is no penalty or change to you or your child's regular medical care if you decide not to allow your child to participate. You can choose to let your child take part in the study now, and then change your mind later at any time without losing any benefits or medical care to which you or your child are entitled. We encourage you to have conversations with your family, friends, doctors, and study team about this study and whether it is right for your child. The study team will work with you to answer any questions that you may have about the study.

You will receive a signed copy of this consent document for your records. Please keep this consent document for your reference.

3. What is the purpose of this study?

The World Health Organization (WHO) has declared COVID-19 to be a pandemic (a disease that has spread all over the world and is affecting lots of people); finding a vaccine to prevent COVID-19 is an urgent need. To test this investigational vaccine as

quickly as possible, this study has been separated into 2 phases. In both the phases we will try to see if the vaccine works to prevent COVID-19, as well as:

- **Phase 1** where we choose which vaccines at which dose levels are safest and make the most antibodies.
- **Phase 2/3** where we look at one vaccine at one dose level in lots of people to collect even more information about the safety of the vaccines and the amounts of antibodies they produce.

Your child is being asked to take part in **Phase 2/3.**

The study will compare the results of the people who receive the study vaccine (BNT162b2) with those who receive a placebo (a placebo does not contain any active ingredients). In this study the placebo will be salt-water, also known as normal saline. Everyone in Phase 2/3 of the study will receive 2 injections of either:

- Study vaccine followed by study vaccine
- Placebo followed by placebo

In Phase 2/3 everyone who receives the study vaccine will receive the same vaccine at the same dose, that was chosen based on the results from Phase 1.

The study doctor will determine whether your child is eligible for the study. This study will require your child to visit the study doctor to undergo study procedures and to provide information about their health. You/your child will also be required to contact the study doctor if your child experience any of the COVID-19 symptoms (explained later in this document).

4. How long will my child participate in this study?

Your child could be in this study for up to about 26 months and will need to visit the study site 6 or 7 planned times during the study. Your child will also need to visit the study site if they experience COVID-19 symptoms and again after they have recovered from those symptoms approximately in a month's time.

5. How many adults and children will take part in this study?

Approximately 44,193 volunteers could take part in the 2 phases of this study.

In Phase 2/3 of the study up to 43,998 volunteers will take part, in which approximately 2000 will be of 12 to 15 years of age and the remaining will be above the age of 16 years.

6. What will happen during this study?

Before any study procedures begin, or before your child begins preparing for the study, you will be asked to read and sign this consent document. We may also ask your child to read and sign a similar document.

After signing this consent document, the study doctor will check if your child meets all of the requirements to take part in this study. If your child does not meet the requirements, they will not be able to take part in the study and the study doctor will explain why this is the case.

Study Vaccines

Once the study doctor has confirmed your child meets the study requirements, your child will be randomly assigned (like flipping a coin) to receive the study vaccine or placebo. For every 1 volunteer who receives the study vaccine, 1 volunteer will receive the placebo. No one (including you, your child, your child's personal doctor or the study team) can choose this assignment.

This is an 'observer-blind study', which means that you, your child and the study doctor will not know whether your child will receive the study vaccine or placebo. The person who gives your child the vaccine will know because the vaccine and placebo do not look the same. The syringe will be covered with a label so the contents are not visible and the person that gives your child the vaccine will not be able to talk about it. In case of urgent need, the study doctor can learn quickly whether your child received study vaccine or placebo.

The study vaccine or placebo will be given to your child through an injection into the muscle of the upper arm. All volunteers will receive 2 injections, approximately 3 weeks apart. On the days your child receives the study vaccine or placebo, you and your child will be asked to wait at the study site for at least 30 minutes for observation.

Overview of Study Procedures and Assessments

The table below lists the tests and procedures or assessments that will be done in this research study. In addition to the visits listed, the study doctor may ask your child to come in for extra visit(s) if necessary, to protect their well-being.

For people taking part in Phase 2/3, the study doctor or nurse will:

Visit Number	1	2	3	4	5	6
Visit Description	**Study Vaccine 1**	**Study Vaccine 2**	**1-Month Visit**	**6-Month Visit**	**12-Month Visit**	**24-Month Visit**
Ask about Medical history as well as date of birth, sex, race and ethnicity	X					
Ask about medicines your child is currently taking	X	X	X	X	X	X
Perform clinical assessment	X					
Record latest CD4 count and viral load (for HIV positive volunteers only)	X		X	X	X	X
Measure body temperature	X	X				
Measure height and weight	X					
If your child is female and started her periods, she will be asked to provide a urine sample for a pregnancy test.	X	X				
Ask about other vaccinations your child has had	X	X	X	X		
Check your child meets all the study requirements	X	X				
If needed, we will discuss with your child about appropriate birth control	X	X	X			
Collect blood sample to test antibody levels[a]	~20 mL/ ~10 mL		~20 mL/ ~10 mL	~20mL/ ~10 mL	~20 mL/ ~10 mL	~20 mL/ ~10 mL
Take a nasal swab	X	X				
Get the study injection, followed by a 30mins observations period	X	X				
Give you/your child an e-diary or help you/your child download one	X					
Vaccination e-diary completion for 7 days (if your child is part of a chosen group to report potential side effects daily for 7 days following vaccination)	X	X				

For people taking part in Phase 2/3, the study doctor or nurse will:

Visit Number	1	2	3	4	5	6
Visit Description	Study Vaccine 1	Study Vaccine 2	1-Month Visit	6-Month Visit	12-Month Visit	24-Month Visit
COVID-19 illness e-diary completion	X	X	X	X	X	X
Ask how your child is feeling generally	X	X	X	X	X	X

Abbreviations: HIV = human immunodeficiency virus; e-diary = electronic diary.

a. 20 mL is to be collected from participants ≥16 years of age; 10 mL is to be collected from participants 12 to 15 years of age.

Blood samples for antibody testing

Your child will have blood taken 5 times during the planned visits of the study. This will be used to test if they already had antibodies against the coronavirus that causes COVID-19 when they enrolled in the study and may be used to test their antibody levels after vaccination. If your child is 16 years of age or above, about 20 mL of blood (about 4 teaspoons) will be collected from their arm using a needle at these visits. Alternatively, if your child is between 12 to 15 years of age, about 10 mL of blood (about 2 teaspoons) will be collected from their arm using a needle at the above specified visits.

E-Diary

At Visit 1, the study team will show you or your child how to fill in an electronic diary (or e-Diary). Parent(s)/ legal guardian(s), as appropriate, will be required to complete the e-diary on behalf of younger age group children, whilst children in older age group might not require similar level of support from their parent(s)/ legal guardian(s). Therefore, older age group children (e.g. 16 years or above) are expected to complete the e-diary themselves.

We will either give you/ your child a device (a bit like a mobile phone) or ask to download an application ('app') to smart phone if you or your child has one. The device/app is secure, and your child's confidentiality will be maintained.

There are 2 parts to the e-Diary. Everyone will need to complete the COVID-19 illness part of the e-Diary on the device or app on their smartphone. The COVID-19 illness e-Diary will prompt you/ your child to record any COVID-19 symptoms (see below) every 7 days or at any time your child has COVID-19 symptoms. You or your child may also receive text messages to the device or your/your child's own smartphone, or emails (if you/they provide your/their email address) to remind you/your child to complete the COVID-19 illness part of the e-Diary.

If your child is part of a subset of participants, you/ your child will also be instructed by the study team to complete the vaccination part of the e-Diary for 7 days after each vaccination, once a day in the evening with the first day being the day of the vaccination.

You/ your child will be given a thermometer and a measuring device to take home. You/ your child will use the thermometer to measure temperature under the tongue and will use the measuring device to measure any redness or swelling where the injection was given. You/ your child will need to record these measurements in the vaccination part of the e-Diary.

The vaccination part of the e-Diary will also ask other questions about potential side effects your child may have after the injection. If your child has any severe symptoms

after vaccination, you/ your child should contact your study doctor and the study doctor or nurse may schedule an extra visit.

It is very important that you/ your child, as appropriate, complete the e-Diary regularly as instructed. If this was not completed, your study doctor or nurse will contact you/ your child to check how your child is doing.

Urine pregnancy test

If your child is female and has started her periods, she will be asked to provide a urine sample to check she is not pregnant before given the study injection.

What happens if my child has positive nasal swab test result?

Nasal swabs obtained during the study (at Visits 1 and 2, and at the time of a potential COVID-19 illness – see below) will be tested in a research laboratory. Positive results from the Visit 1 and 2 swabs, and all results from the illness visit swabs, will be provided to your study doctor, but this will take some time so you should not rely on these for your child's medical treatment. If your child has a positive nasal swab test result for the coronavirus that causes COVID-19, either at Visit 1 or any time between Visit 1 and Visit 2, but with no potential COVID-19 related symptoms, they will continue to receive the second study vaccine as normal. However, if the positive COVID-19 test result is accompanied by potential COVID-19 related symptoms, they will not be given the second study vaccine but will be requested to remain in the study.

<u>If Your Child Gets COVID-19 Symptoms</u>

If your child gets any of the following you must contact the study doctor straight away. Note that this is not instead of routine medical care. If your child feels unwell enough that you would normally see a healthcare professional, please contact your usual provider, as well as the study doctor.

- **A diagnosis of COVID-19;**
- **Fever;**
- **New or increased cough;**
- **New or increased shortness of breath;**
- **Chills;**
- **New or increased muscle pain;**
- **New loss of taste/smell;**
- **Sore throat;**
- **Diarrhea;**
- **Vomiting.**

The study doctor may ask you/your child to have a telephone conversation, video call or to visit the site to talk about how they are feeling and if they have needed any other medical care. The study team will also ask you to help your child to take a nose swab, or the study team may take a swab to check for the coronavirus. We will give you/your child separate instructions about how to take a nose swab and how to ship the swab to the laboratory if needed. The result from this swab will be provided to the study doctor once it is available, but this will take some time, and cannot be used to diagnose COVID-19. This is why it is important that you contact your usual provider if your child has COVID-19 symptoms and think your child needs medical care.

If your child is diagnosed with COVID-19, for the purposes of the study, the study doctor will contact your child's usual provider, and any facility where you child is treated, to obtain details and collect medical records: by signing this informed consent document, you agree to this.

The study team will arrange an extra visit to the study site about a month after your child became unwell and your child will need to give another 20 mL (about 4 teaspoons) or 10 mL (about 2 teaspoons) of blood sample, as appropriate, to test their antibody levels.

After the study

The study vaccine is available only during this study and not after the study is over. If you leave the study before receiving the study vaccine, it may be available to you through an authorized healthcare professional.

7. Are there any special instructions to follow for this study?

It is important you and your child follow all the instructions given by the study nurse or doctor and tell them if:

- You don't understand anything about the study
- You /your child are not able to comply with the study requirements
- There are changes in your child's health
- Your child takes any new medications or receive any other vaccines
- You or your child are going away for a long period
- Your child wishes to take part in another research study

8. What are the possible risks and discomforts of this study?

Any research has some risks, which may include negative effects that could make your child unwell or uncomfortable and even potentially be serious or life-threatening. All research participants taking part in the study will be watched carefully for any negative

effects; however, the study team does not know all the effects that the study vaccine may have on your child.

If your child takes part in this study, the most likely risks or discomforts are discussed below.

It is important that you/ your child report to the study team all symptoms and side effects as soon as they occur. Phone numbers for the study team are listed in [Section 1] of this consent document.

Study Vaccine Risks

Up until the end of 2020, the safety of BNT162b2 has been studied in clinical trials that have included 21,744 people 16 yrs of age and older who have received at least one dose of the vaccine. In addition, since the vaccine has been approved for emergency use in many countries, about 26 million doses have been distributed.

Based on the clinical study results, and information gathered during general use, the following risks have been determined to be caused by BNT162b2 vaccine:

Very common (occurring in more than 1 in 10 people): injection site pain, injection site swelling, fatigue (tiredness), increased body temperature (fever, more common after the second dose), chills, headache, joint aches, and muscle aches.

Common (between 1 in 10 and 1 in 100 people): feeling sick (nausea), and injection site redness.

Uncommon (between 1 in 100 and 1 in 1,000 people): enlarged lymph glands, allergic reactions (symptoms may include rash, itching, hives, and swelling of the face or lips), pain in arm, and feeling weak or unwell.

Frequency cannot be estimated from available data: severe allergic reaction (anaphylaxis).

As in all research studies, the COVID-19 vaccine may involve risks that might be expected based on results from studies of similar vaccines, as well as risks that are currently unknown.

Therefore, it is important that you/ your child report all symptoms and side effects that your child experiences as soon as they occur, whether or not you think they are caused by the study vaccine.

Due to the way in which the study vaccines are made, they cannot cause COVID-19 disease.

If my child catches COVID-19 disease, could the vaccine make it worse?

For some other vaccines tested in animals against similar viruses (but not the coronavirus that causes COVID-19), there have been reports of the illness being more severe in the animals that

received the vaccine than in those that did not. So far this has not been seen with BNT162b2. It remains important for you/ your child to contact your child's study doctor if your child develop symptoms that might be caused by COVID-19 (for example, fever, cough, shortness of breath).

Placebo Risks

As the placebo injection contains salt-water and no active ingredients, the chances of having the side effects mentioned above are less likely. In other studies, using the same placebo, some volunteers who received the placebo injection reported pain, bruising, swelling and redness at the site of injection.

Risks from Study Procedures

Risks and possible discomforts from the study procedures include:

- **Blood samples:** The risks and possible discomforts involved in taking blood include pain from inserting the needle, or less often, swelling, bruising, or infection around the vein where the blood is collected. Your child may feel dizzy or may faint. If your child has a previous history of feeling dizzy or fainting during blood sample collection, you should talk to the study doctor.
- **Nasal Swabs:** The risks and possible discomforts involved in taking nasal swabs may include pain or general discomfort. Sometimes it may cause the nose to bleed.

Pregnancy-Related Risks; Use of Birth Control

If your child is currently pregnant, plans to become pregnant, or is breastfeeding a child, they should not join this study.

If your child is able to have children and is sexually active, they must use birth control consistently and correctly for at least 28 days after they receive their last injection. This applies to males as well as females who take part in the research study. The study doctor will discuss with your child the methods of birth control that they should use while in this research study. The study doctor will help your child select the method that is appropriate for them. The study doctor will also check that your child understands how to use the birth control method and may review this with them at each of their research study visits.

Birth control methods, even when used properly are not perfect. If your child or their partner becomes pregnant during the research study, or if they want to stop their required birth control during the research study, they should tell the study doctor immediately. Your child may be withdrawn from the research study if they stop using birth control or they become pregnant.

Pregnancy Follow-up

If your child or their your partner become pregnant during the study, up until 6 months after their last study injection, please tell the study doctor **immediately**. Please also tell the doctor who will be taking care of your child/their partner during the pregnancy that your child took part in this study. The study doctor will ask if your child/their partner or their pregnancy doctor is willing to provide updates on the progress of the pregnancy and its outcome. If your child/their partner agree, this information will be provided to BioNTech/Pfizer for safety follow-up.

9. What are possible benefits of this study?

Vaccination with BNT162b2 has been shown to be effective in preventing COVID-19 in the groups of people already studied, but not yet in the case of your child. Because of this, and the fact that your child may receive the placebo vaccination, they still need to follow local recommendations about how to avoid COVID-19 (for example, social distancing and mask use).

10. What will happen to my child's blood and nasal swab samples?

Your child's blood and nasal swab samples will be used only for scientific research. Each sample will be labeled with a code so that the laboratory workers testing the samples will not know who your child is. Some of the samples may be stored for future testing and may be kept for up to 15 years after the study ends, at which time they will be destroyed. In addition to testing for this study, any samples left over after the study is complete may be used for additional research related to the development of products. No testing of your child's DNA will be performed.

You may request that your child's samples, if they can be identified, be destroyed at any time. Any data already collected from those samples will still be used for the study. The samples will remain the property of BioNTech/Pfizer and may be shared with other researchers as long as confidentiality is maintained, and no testing of your child's DNA will be performed. You and your child will not be told of additional tests, nor will you or your child receive results of any of these tests.

11. What other choices do I have if I do not want my child to join this study?

This study is for research purposes only. The only alternative is to not take part in this study.

12. What happens if my child is injured during this study?

For mandatory research injury language, <**click here**> (retain this link in the study-level ICD). The country-specific research injury language must be included verbatim in the country-level ICD.

13. Can I withdraw my child from the study?

Yes. You are free to withdraw your consent for your child and discontinue their participation in the research study at any time. Your decision will not affect your or your child's regular medical care or any benefits to which you/your child is are entitled. Tell the study doctor if you are thinking about stopping or decide to stop so that your child can end participation in the study in the safest way.

While your child is participating, the study team will tell you in a timely manner if new information is learned during the course of the study that could change your mind about your child continuing in this study. If you decide to withdraw your child from the study, your child may be asked to continue to participate in the study procedures even though they would no longer receive the study vaccine.

If your child continues with the study, information about their health will continue to be collected as described in [Section 6].

If you decide to stop your child participating in this study, you must notify the study doctor. The study team will explain what other procedures or discussions would occur.

Sometimes the study doctor or BioNTech/Pfizer may decide to take your child out of the study (even if you do not agree) if:

- You/your child are unable or unwilling to follow the instructions of the study team;
- The study doctor decides that the study is not in your child's best interest or that they are no longer eligible to participate; or
- The study is stopped by BioNTech/Pfizer, the institutional review board (IRB) or independent ethics committee (IEC) (a group of people who review the study to protect your rights), or by a government or regulatory agency.

The study team will give you a Privacy Supplement, which is considered part of this consent document. It describes what happens to your child's personal information (including biological samples) and how it may be used if you withdraw your child from the study.

14. What will I have to pay for if my child takes part in this study?

You will not need to pay for any of the study vaccines (COVID-19 Vaccine or placebo), study-related procedures, or study visits.

15. Will my child be paid for taking part in this study?

You will not receive any payment for your child taking part in this study. However, for each visit you/your child completes, you will be reimbursed by the study site to cover reasonable expenses (for example, parking, meals, travel) that you have as a result of taking part in this study. You will be reimbursed by [enter, as applicable, method of reimbursement; amounts; and reimbursement schedule; note whether receipts are required].

BioNTech/Pfizer may use information resulting from the study to develop products or processes from which they may make a profit. There are no plans to pay you/your child or provide you/your child with any products developed from this research. BioNTech/Pfizer will own all products or processes that are developed using information from the study.

16. What will happen to my child' personal information?

<**click here**> for language to be inserted into this section. This text must be inserted verbatim. Any requested changes must be approved by Clinical Development Legal. Note that the Privacy Supplement follows this consent document, after the signature section.

17. Where can I find additional information about this study or the study results?

A description of this clinical trial will be available on http://www.ClinicalTrials.gov, as required by U.S. Law. This Web site will not include information that can identify your child. At most, the Web site will include a summary of the results. You can search this Web site at any time.

The study results, when available, may also be found on www.pfizer.com and https://www.clinicaltrialsregister.eu/.

In addition, a plain summary of the study results will be made available in the EU database at [insert link to the database]. This information will be provided no matter what the study's outcome. To the extent possible, you will be able to access these summaries in the EU database soon after they become available using the following EU trial number for the study: [insert trial number].

These Web sites are in English only. If you need assistance understanding these Web sites, please ask a member of the study team.

BioNTech/Pfizer will provide the study doctor with information about the study results when all participants have completed the study. At that time, certain of your child's individual study results may be given to you or your child's doctor (if different from the study doctor) in accordance with applicable law, but will not be given to your family, your employer or any insurance company.

If any exploratory research is done, it may not be possible to link any results from that exploratory research to specific individuals, including your child. BioNTech/Pfizer does not plan to return information from any exploratory research to you/your child, the study doctor, or your doctor (if different from the study doctor).

18. Signatures

Agreement to Participate and to Process Data
1. I confirm I have read (or, if I cannot read, a study team member has read to me) and understand this consent document for the study described above and have had the opportunity to ask questions. I have had enough time to review this consent document. I also have had an opportunity to ask about the details of the study and to decide whether or not to participate.
2. I have read and understand the Privacy Supplement. I understand that taking part in the study will require the processing (including collection, use, transfer, storage, analysis and reporting) of my child's personal information, as explained in the Privacy Supplement. I understand and agree to the processing of my child's personal information within and outside my country of residence for health care, medical research and/or regulatory purposes.
3. I understand that taking part is voluntary and that I am free to stop my child taking part in this study or to withdraw my consent to the processing of my child's personal information at any time. I do not need to give any reason and my child's regular medical care and legal rights will not be affected. However, even if I withdraw my consent to processing, my child's personal information held at that time may be kept to comply with laws and regulations and to maintain the integrity of the study. I also understand that my child's biological samples may not be able to be destroyed because they may no longer be traceable to my child, may have already been used, or may have been given to a third party.
4. I agree to the study team accessing my child's medical history, including information from medical records and test results and any medical treatment my child receive during the course of the study, and if necessary, contacting my child's doctor or any other health care providers treating my child for access to such information.
5. I understand that BioNTech/Pfizer and/or others working with or on behalf of BioNTech/Pfizer, institutional review boards (IRBs) or independent ethics committees (IECs), and regulatory agencies may need access to personal

information about my child generated at the study site or collected by the study team for the study and any other research. I agree that they may have access to my child's personal information.
6. I do not give up any of my child's legal rights by signing this consent document. I have been told that I will receive a signed and dated copy of this document.
7. I agree for my child to take part in the study described in this document.

In the section below, the term "legally acceptable representative" should be replaced with the term required per local regulation (country-level).

As the consenting adult providing permission for this child to participate in the study, I acknowledge that (Please check one of the following):

☐ I am the biological or adoptive parent of the child.

☐ I am the legal guardian or legally acceptable representative of the child.

[If neither option below is checked, then the consent of the second parent/guardian/legally acceptable representative must be obtained. If there are two parents/guardians/legally acceptable representatives available to give permission, and they disagree about allowing the child to participate in the study, the child should not be enrolled unless that disagreement can be resolved.**]**

I also acknowledge that (Please check one of the following):

☐ I have sole legal responsibility for the care and custody of the child.

☐ The other adult(s) with whom I share legal responsibility for the care and custody of the child (for example, biological parent, adoptive parent, or legal guardian or representative) is (1) aware of and agrees with my granting permission for this child to participate in the study OR (2) deceased, unknown, incompetent, or not reasonably available (someone is "not reasonably available" when he/she cannot be reached by phone/mail/email because, for example, he/she is on active military duty or is incarcerated).

_____

Printed name of parent/guardian/legally acceptable representative

_____ _____

Signature of parent/guardian/legally acceptable representative Date of signature§

[Include the statements and signature lines below for a second parent/guardian/legally acceptable representative if (1) required by the IRB/IEC; (2) required by local law (*e.g.*, parents are divorced and have shared custody of the child); or (3) the second parent/guardian/legally acceptable representative is (or would like to be) involved in the consent process and there is reason to believe that he/she may disagree with the decision of the first parent/guardian/legally acceptable representative.

Consent of Second Parent/Guardian/Legally Acceptable Representative:

As the consenting adult providing permission for this child to participate in the study, I acknowledge that (Please check one of the following):

☐ I am the biological or adoptive parent of the child.

☐ I am the legal guardian or legally acceptable representative of the child.

_____

Printed name of parent/guardian/legally acceptable representative

_____ _____

Signature of parent/guardian/legally acceptable representative Date of signature[§]]

Person Obtaining Consent:

_____

Printed name of person conducting the consent discussion

_____ _____

Signature of person conducting the consent discussion[†] Date of signature

§ Participant/parent/guardian/legally acceptable representative must personally date their respective signatures.

† The investigator, or an appropriately qualified and trained person designated by the investigator to conduct the informed consent process, must sign and date the consent document during the same discussion when the participant's parent/guardian/legally acceptable representative signs the consent document.

PRIVACY SUPPLEMENT

For mandatory country-specific data privacy language to be inserted in this Privacy Supplement, <**click here**> (retain this link in the study-level ICD). The country-specific data privacy language must be included verbatim in the country-level ICD. Any requested changes must be approved by Clinical Development Legal.

Who will use my child's personal information, how will they use it, and where will it be stored?

[Mandatory study language – retain the below paragraph and delete this green text before finalisation]

Any personal information collected about you/your child during this study will be entered into records, including health records, maintained by the study team at your study site. You/your child's records that include information that directly identifies you/your child may be uploaded to secure systems maintained by a third party engaged by BioNTech/Pfizer so that BioNTech/Pfizer and/or BioNTech/Pfizer representatives can review and verify study data. Some of the uploaded records will be kept for XX years. The remaining records that are uploaded will be temporary and removed from the secure system after the study is over.

INFORMED CONSENT ADDENDUM FOR A PHASE 1/2/3, PLACEBO-CONTROLLED, RANDOMIZED, OBSERVER-BLIND, DOSE-FINDING STUDY TO EVALUATE THE SAFETY, TOLERABILITY, IMMUNOGENICITY, AND EFFICACY OF SARS-COV-2 RNA VACCINE CANDIDATES AGAINST COVID-19 IN HEALTHY INDIVIDUALS

Protocol Number: C4591001

In this informed consent addendum, "you" always refers to the study participant. If you are a parent/guardian/legally acceptable representative, please remember that "you" refers to the study participant.

You have already signed a consent form to participate in the research study mentioned above. This addendum is part of the consent procedure. It has been written to provide you with additional information on your new schedule of study visits, tests, and procedures and the recent update to vaccine study risks section that you will want to know. All other information in the main consent form not addressed in this addendum still applies.

Administration of BNT162b2 to Participants Originally Assigned to Placebo

You were asked by the study site whether you would consider receiving BNT162b2 vaccine (active study vaccine) if you received placebo during the earlier part of the study. Since it is confirmed that you received placebo, and you have expressed willingness to receive the BNT162b2 vaccine, you are now being asked to read and sign this consent document before commencing any new set of study-related procedures.

After signing this consent document, the study doctor will check if you meet all the requirements to receive BNT162b2 vaccine. If you do not meet the requirements, you will not be able to receive the vaccine and the study doctor will explain why this is the case.

Once the study doctor has confirmed you meet the study requirements to receive BNT162b2 vaccine, you will receive 2 injections, approximately 3 weeks apart. The injection will be given into the muscle in your upper arm and will be asked to wait at the study site for at least 30 minutes for observation after receiving the vaccine.

Overview of Study Procedures and Assessments:

The table below lists the tests and procedures or assessments that you will have done for the remaining duration of the study. In addition to the visits listed, your study doctor may ask you to come in for extra visit(s) if necessary, to protect your well-being.

You may have blood taken once and this will be used to test if you already had antibodies against coronavirus that causes COVID-19. About 20mL of blood (about 4 teaspoons) will be collected from your arm using a needle at Visit-1.

For placebo participants receiving BNT162b2, the study doctor or nurse will:

Visit Number	1	2	3	4	5
Visit Description	BNT162b2 Vaccine 1	BNT162b2 Vaccine 2	1-Month Telephone Visit	6-Month Telephone Visit	18-Month Telephone Visit
Obtain urine pregnancy test (if appropriate)	X	X			
Check contraceptives (if appropriate)	X	X			
Ask about medicines you are currently taking	X	X	X	X	X
Record latest CD4 count and viral load (for HIV positive participants only)	X		X	X	X
Check you meet all the study requirements	X	X			
Collect blood sample to test antibody levels[a]	~20 mL				
Take a nasal swab	X	X			
Get the study injection, followed by a 30mins observation period	X	X			
COVID-19 illness e-diary completion	X	X	X	X	X
Ask how you are feeling generally	X	X	X	X	
Request to return the e-diary or assist to delete the app					X

a. Only if the sample was not taken as part of the study in last 7days

Key Reminders

- Vaccination with BNT162b2 has been shown to be effective in preventing COVID-19 but you still need to follow local recommendations about how to avoid COVID-19 (for example, social distancing and mask use).
- It is also very important that you continue to complete the COVID-19 Illness e-Diary regularly as instructed. If you do not, your study doctor or nurse will contact you to check how you are.

Study Vaccine Risks

Up until the end of 2020, the safety of BNT162b2 has been studied in clinical trials that have included 21,744 people 16 yrs of age and older who have received at least one dose of the vaccine. In addition, since the vaccine has been approved for emergency use in many countries, about 26 million doses have been distributed.

Based on the clinical study results, and information gathered during general use, the following risks have been determined to be caused by BNT162b2 vaccine:

Very common (occurring in more than 1 in 10 people): injection site pain, injection site swelling, fatigue (tiredness), increased body temperature (fever, more common after the second dose), chills, headache, joint aches, and muscle aches.

Common (between 1 in 10 and 1 in 100 people): feeling sick (nausea), and injection site redness.

Uncommon (between 1 in 100 and 1 in 1,000 people): enlarged lymph glands, allergic reactions (symptoms may include rash, itching, hives, and swelling of the face or lips), pain in arm, and feeling weak or unwell.

Frequency cannot be estimated from available data: severe allergic reaction (anaphylaxis).

As in all research studies, the COVID-19 vaccine may involve risks that might be expected based on results from studies of similar vaccines, as well as risks that are currently unknown.

Therefore, it is important that you report all symptoms and side effects that you experience as soon as they occur, whether or not you think they are caused by the study vaccine.

Due to the way in which the study vaccines are made, they cannot cause COVID-19 disease.

If I catch COVID-19 disease, could the vaccine make it worse?
For some other vaccines tested in animals against similar viruses (but not the coronavirus that causes COVID-19), there have been reports of the illness being more severe in the animals that received the vaccine than in those that did not. So far this has not been seen with BNT162b2. It remains important for you to contact your study doctor if you develop symptoms that might be caused by COVID-19 (for example, fever, cough, shortness of breath).

Please take as much time as you need to ask questions from the research study team before agreeing to continue. If after receiving this information you agree to continue taking part in this research study, please sign below.

SIGNATURES:

- I have read the information in this addendum to the informed consent document.
- I have had an opportunity to ask questions and all of my questions have been answered to my satisfaction.
- I have been given enough time to decide whether or not I want to continue in the study.
- I voluntarily agree to continue taking part in this study.
- I do not give up any of my legal rights by signing this consent document.
- I have been told that I will receive a signed and dated copy of this document.

_____

Printed name of participant

SIGNATURE LINE TO BE COMPLETED FOR AN ADULT PARTICIPANT:

_____ _____

Signature of participant Date of signature§

SIGNATURE LINE(S) TO BE COMPLETED FOR A CHILD PARTICIPANT:

As the consenting adult providing permission for this child to participate in the study, I acknowledge that (Please check one of the following):

☐ I am the biological or adoptive parent of the child.

☐ I am the legal guardian or legally acceptable representative of the child.

I also acknowledge that (Please check one of the following):

☐ I have sole legal responsibility for the care and custody of the child.

☐ The other adult(s) with whom I share legal responsibility for the care and custody of the child (for example, biological parent, adoptive parent, or legal guardian or representative) is (1) aware of and agrees with my granting permission for this child to participate in the study OR (2) deceased, unknown, incompetent, or not reasonably available (someone is "not reasonably available" when he/she cannot be reached by phone/mail/email because, for example, he/she is on active military duty or is incarcerated).

_____

Printed Name of Parent / Guardian / Legally Acceptable Representative

_____ _____

Signature of Parent / Guardian / Legally Acceptable Representative Date of signature§

Consent of Second Parent/Guardian/Legally Acceptable Representative:

As the consenting adult providing permission for this child to participate in the study, I acknowledge that (Please check one of the following):

☐ I am the biological or adoptive parent of the child.

☐ I am the legal guardian or legally acceptable representative of the child.

_____ _____

Printed Name of Parent / Guardian / Legally Acceptable Representative

Relationship to study participant

_____ _____

Signature of Parent / Guardian / Legally Acceptable Representative

Date of signature§

If local IRB/IEC permits assent of older children to be obtained by the co-signature, include appropriate signature line.

_____ _____

Signature of Child Date of signature§

_____

Printed name of legally acceptable representative and relationship

_____ _____

Signature of legally acceptable representative Date of signature§

PERSON OBTAINING CONSENT

_____

Printed Name of the Person Conducting the Consent Discussion

_____ _____

Signature of the Person Conducting the Consent Discussion † Date of signature

§Participant/parent/guardian/legally acceptable representative must personally date their signature

†The investigator, or an appropriately qualified and trained person designated by the investigator to conduct the informed consent process, must sign and date the consent document during the same interview when the participant/parent/guardian/legally acceptable representative signs the addendum.

C4591001-Post-12-July-2020

TrialMax App™, TrialManager®
Site User Guide

Document index: A-1426-0086-5150UG
Document version: 5
Template version: 12
02NOV2020

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Trademark Notice

IMPORTANT POINTS

- Keep devices charged at all times – when stored at site, please ensure the device(s) are charged at least once per week, even if not in use. If the device battery runs flat, it might have an incorrect date and time when it is turned back on again. If this happens, send data from the device and it will sync to your current time zone.
- Data will send automatically each time the participant logs into the App as long as the device is charged, in an area where there is mobile phone service or Wi-Fi is available.
- Participants should bring their assigned device with the App to each clinic visit.
- Participant setup should occur on the day of vaccination, whilst the participant is at the study clinic.
- Each participant will be able to set their own PIN code when they first log in to the TrialMax device. Please recommend to them to select the same code for each device as it will be easier for them to remember.
- When setting up a participant for the study, make sure this is done on a computer with a printer, as you will need to print the activation information for the participant. You will only have the opportunity to print this once; however, it will also be emailed to the participant if their email address is provided during setup or sent via a text message if a mobile phone number is provided during setup.
- To receive SMS notifications in the US, please refer to 'Setting up SMS notifications' section for more details.
- Use the TrialManager web portal to regularly monitor participant data for the study.

- It is recommended to leave 0.5GB of free storage space on the participant's personal device to allow the TrialMax app to function properly. Please provide a provisioned device to the participant in the event the participant does not have the free space or does not want to make that space available. The participant may check their available storage below:
    - iPhone: Select 'Settings'->'General'->'iPhone Storage'
    - Android: Select 'Settings' ->'Device Care'->'Storage'
- If you cannot find help in this guide, then please call the Helpdesk.

Role	PIN Code
Default Participant	1234
Logistics Access PIN Code	7777
Logistics PIN Code	3311

TrialManager Website URL
http://trialmax.crfhealth.net/c4591001-Post-12-July-2020
TrialManager login details will be sent to you via email

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1 Signant Health Overview

Signant Health is the provider of the eCOA (electronic Clinical Outcome Assessment) system for this study. The eCOA system comprises the components as displayed below, along with 24/7 Helpdesk support. TrialMax App is the brand name, but we will refer to it simply as the “App”.

Data entered by Participant into the App

Data sent from App to Signant Health servers

Data available for sites, monitors and study team in web portal and TrialManager

TRIALMAX app

TRIALMANAGER®

2 Helpdesk

You may call the Helpdesk for any issue related to the TrialMax App, or TrialManager website.

Please have the following information ready when you call:

- The study protocol number: **C4591001-Post-12-July-2020**
- Helpdesk Priority PIN: **19**
- Signant Health project code: **A-1426-0086**
- Your site number
- The participant number (if applicable)
- The specific problem

2.1 Helpdesk Operating Hours

The Helpdesk is available 24 hours a day, 365 days a year.

If you are unable to reach an agent when you call, you can also leave a voicemail or send an email giving your contact information. The Helpdesk will contact you as soon as possible, at the latest by next business day.

2.2 Helpdesk Telephone Numbers

Country	Number
USA	(1) 866 402 1154
Helpdesk Priority Code	19

Note: Toll Free numbers are free from a landline; however local operator charges might be applied if calling from a mobile phone.

2.3 Helpdesk Email Address

For non-urgent issues, you can contact the Helpdesk by email:

C4591001-Post-12-July-2020_TM@support.signanthealth.com

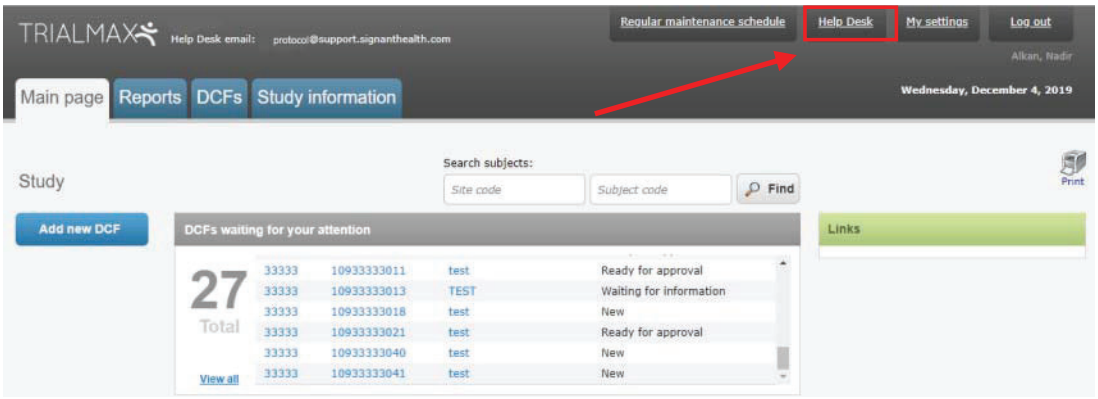
Note: Do not share this email address with participant. The participant's identity might be unintentionally revealed during communication via email.

Helpdesk Web Chat via TrialManager

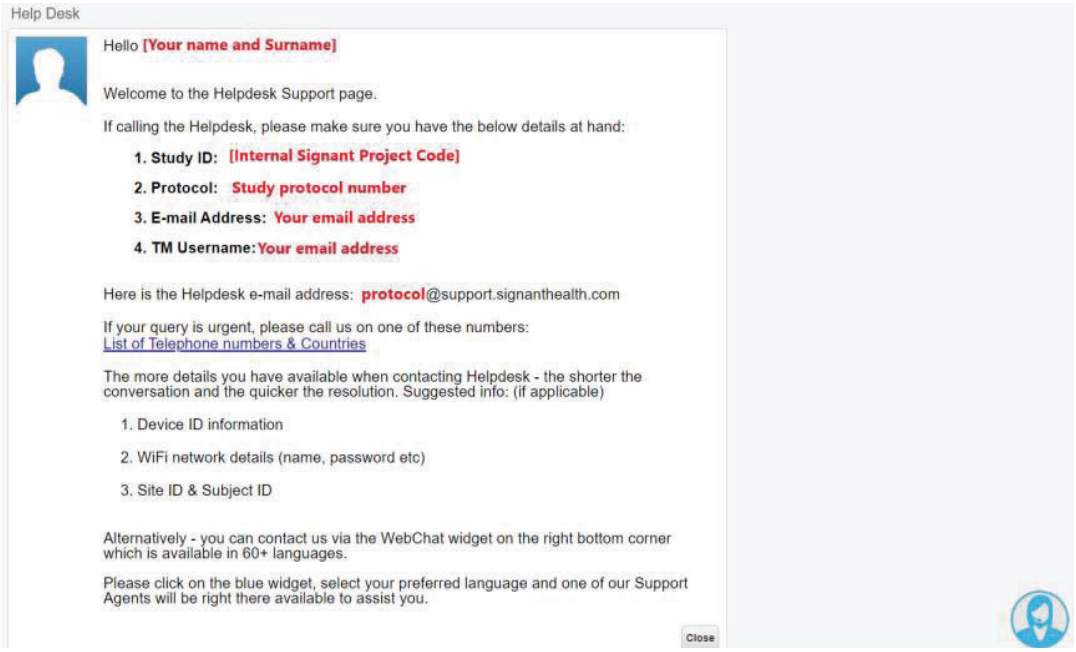
The Helpdesk Web-chat is available via the TrialManager Portal.

Helpdesk Web-chat can be accessed via the steps below:

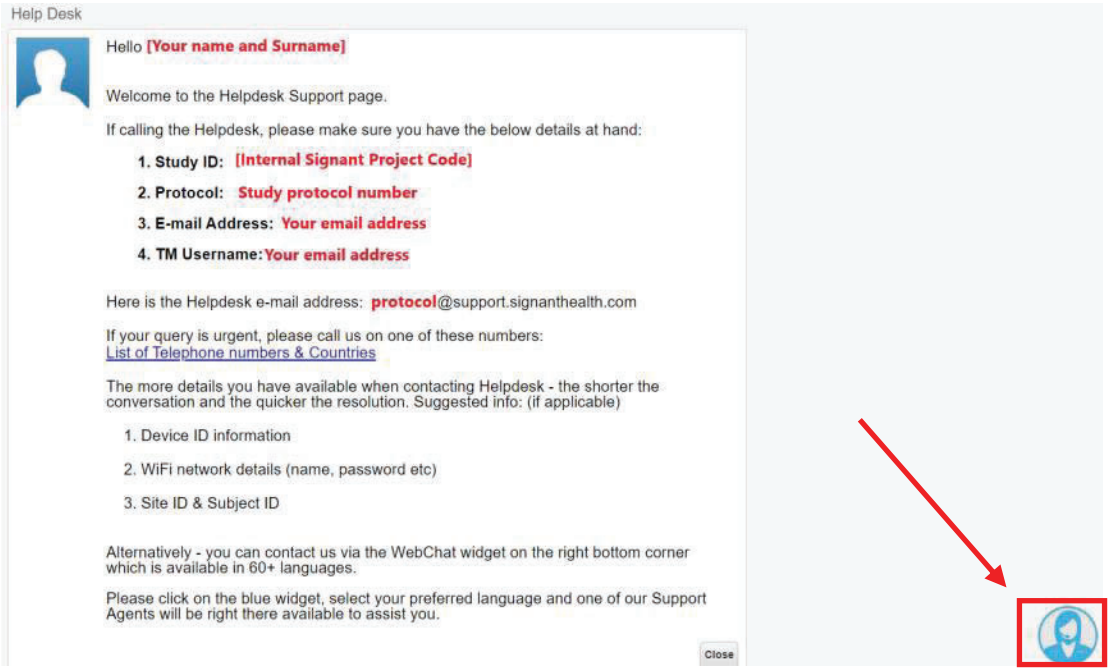
1) Please click the Help Desk button in the upper right corner of your screen.



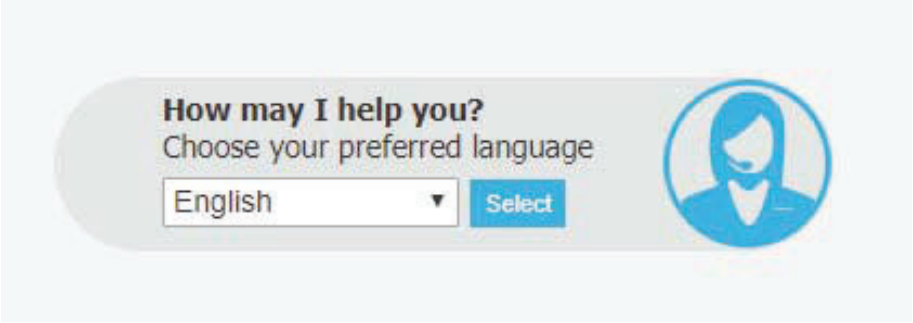
2) You will see a welcome page where all the texts highlighted in red will be pre-filled.

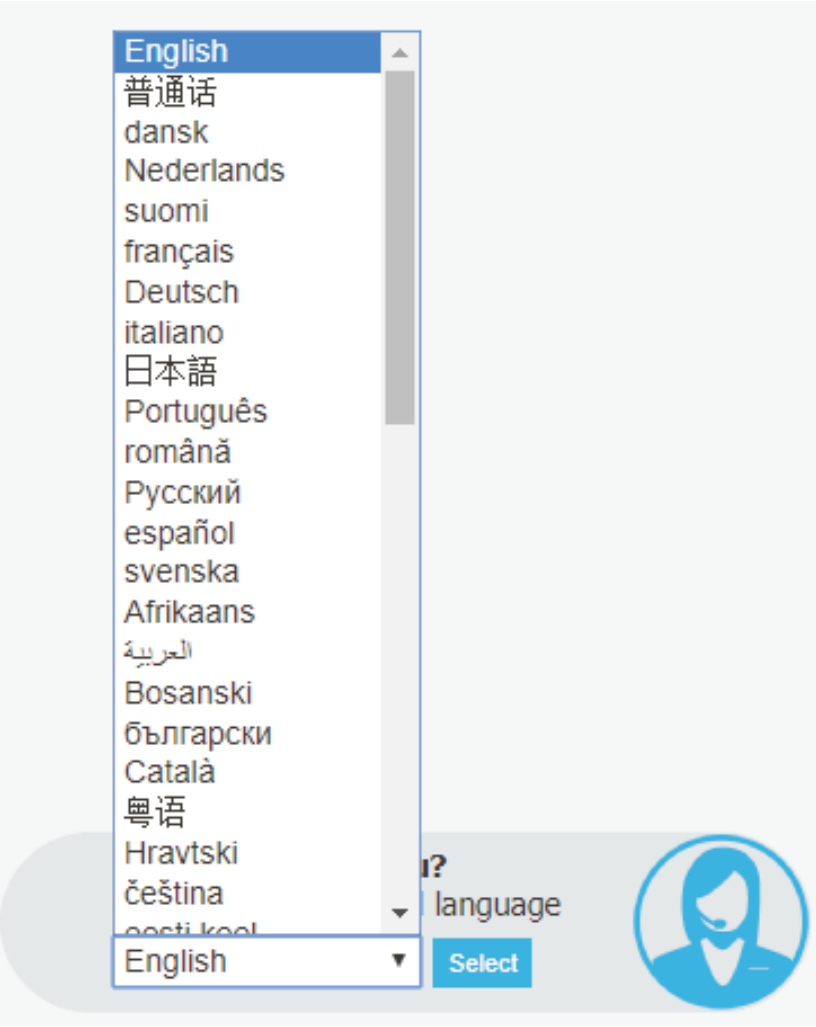


3) You can open the web-chat, available in 60+ languages, by clicking the blue widget in the lower left corner of the screen to start your live chat with one of our Support Agents.

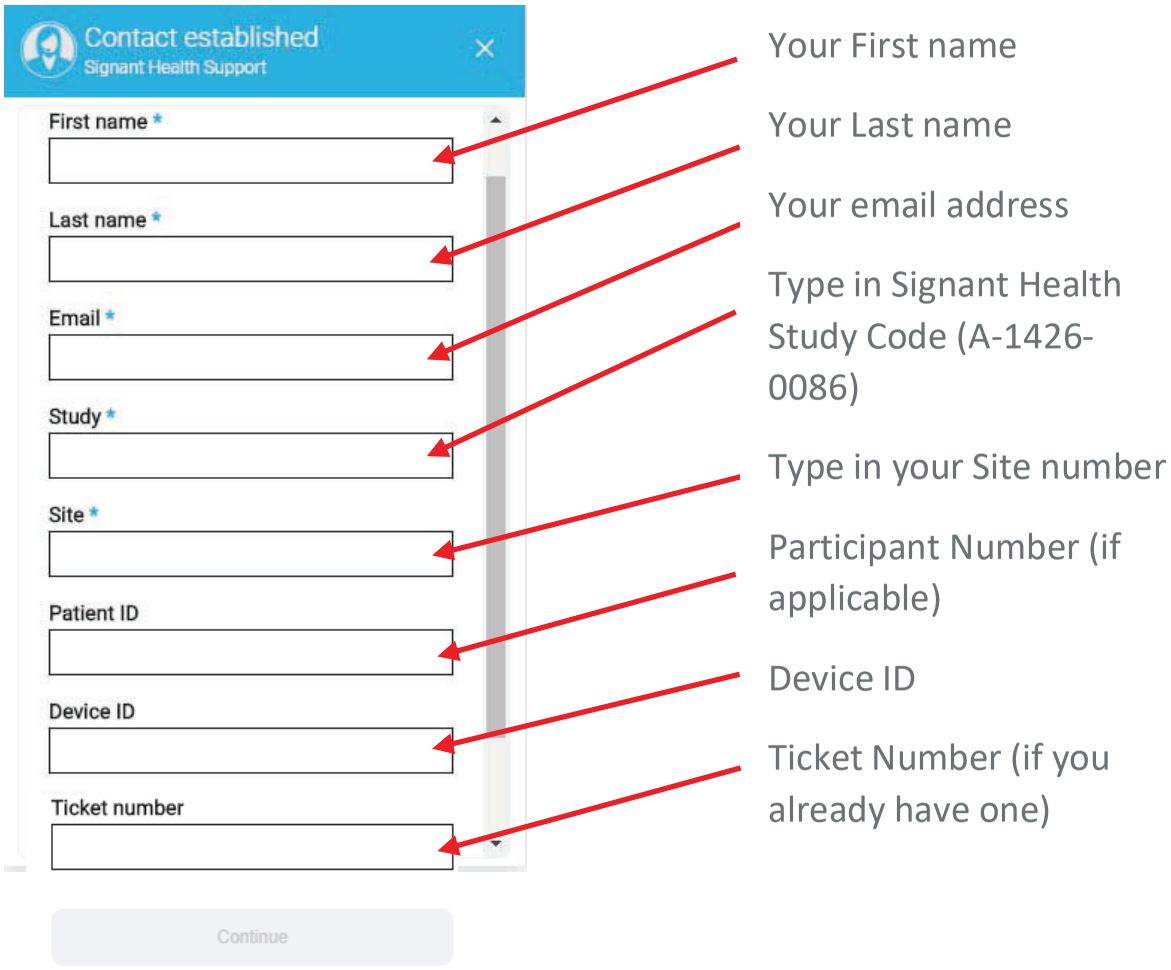


4) Once you click on this widget, you will be able to select your preferred language from the drop-down menu.





5) After selecting your language, you will need to complete the necessary information in the below screen and click the Continue button, then you will be connected to the next available support agent.



Fields with an asterisk (*) are required.

Once you click on "Continue", you will be connected to the Signant Health Helpdesk specialist, who will discuss your issue with you.

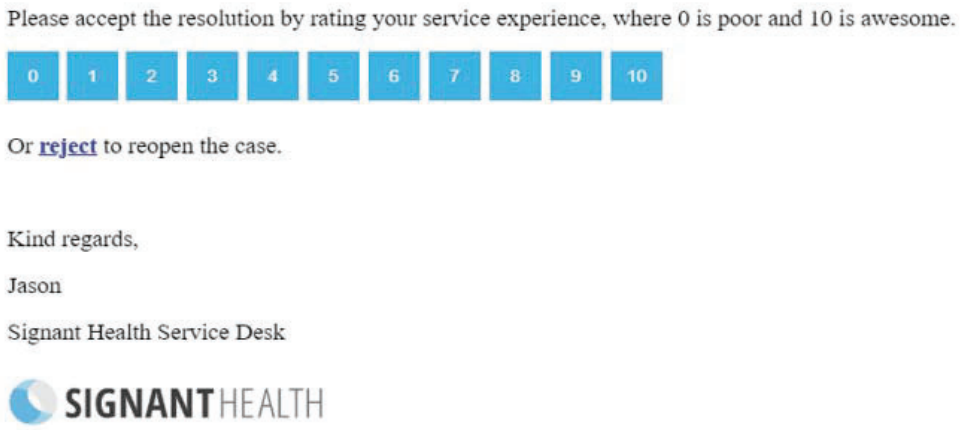
Please note that if a telephone call has already been placed make sure that you enter the Ticket Number you received from your telephone call into the web chat to ensure the background information is linked. If the ticket number is not entered, it will be counted as 2 separate calls.

Providing feedback about Helpdesk performance

Each time you request support from the Helpdesk, you can rate the level of your satisfaction from the provided service. This is important, as it helps us continuously improve to exceed your expectations.

You can provide the feedback in 2 ways:

- Each time you have spoken to the Helpdesk on the phone you can remain on the line and rate your experience on the scale 0 to 5, where 5 is awesome and 0 poor.
- When your request has been completed, you will receive an email, enabling you to evaluate the service or reject the resolution of the incident.


Please accept the resolution by rating your service experience, where 0 is poor and 10 is awesome.

0 1 2 3 4 5 6 7 8 9 10

Or reject to reopen the case.

Kind regards,

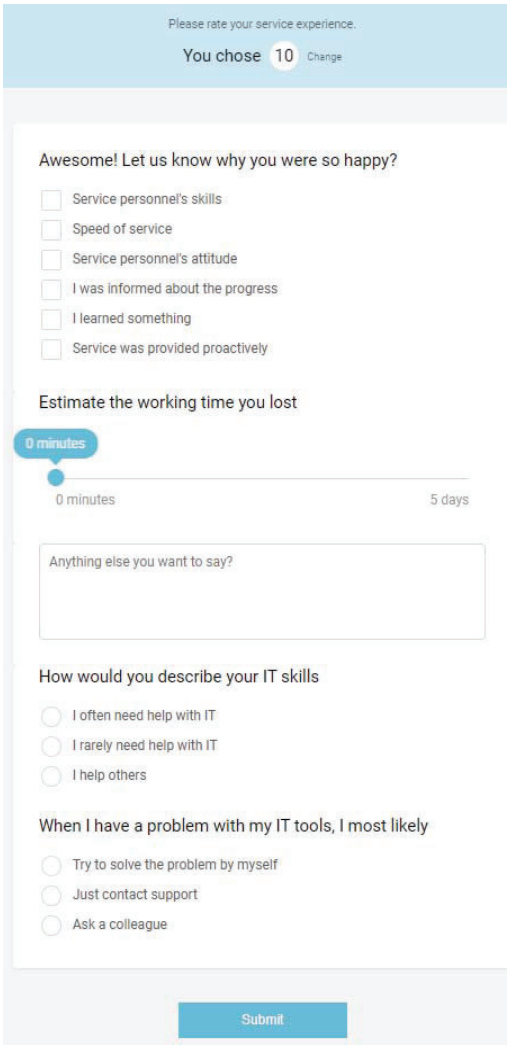
Jason

Signant Health Service Desk

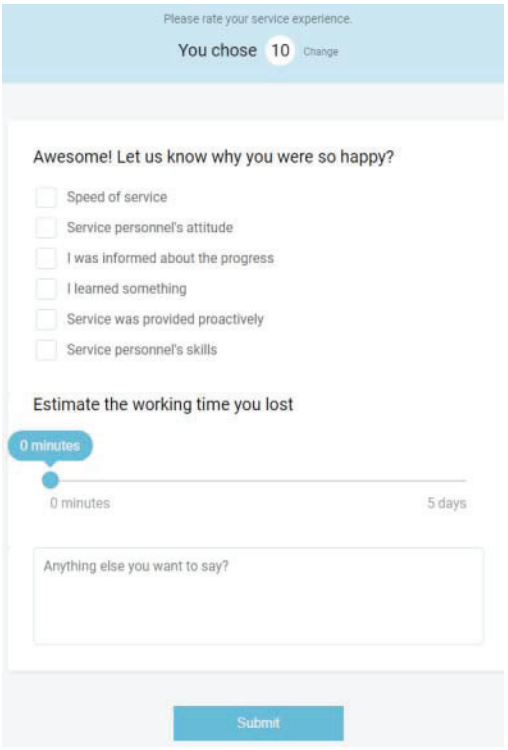
SIGNANTHEALTH

To provide feedback, you would click one of the numbered boxes (0-10), where 0 means poor and 10 awesome. Selecting any rating will take you to a form, where additional information can be provided. The form is a bit longer when you use it the first time and will be shorter with every further use (IT profile information needs only to be provided once).

Evaluation form 1st use

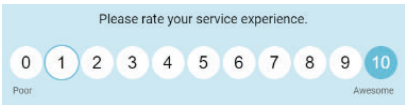


Evaluation form consecutive uses



Please remember that only 9 and 10 mean positive feedback, 7-8 average, 6 and below means negative feedback.

You can change your rating on the top of the form any time before submitting it.



3 Equipment

3.1 Supplies for participant

Provisioned device supplies -

- Motorola device with TrialMax App installed (if not using personal iOS or Android device), accompanied by an incorporated SD memory card (this backs up the data for recovery if needed) and a SIM card installed for mobile data sending.
- A device charger (power-cord and charging brick)
- TrialMax App sticker with country specific Helpdesk number
- Quick Reference Guide in the participant's language
- App Activation Guide in the participant's language
  Participant card with App activation details to be sent via email or SMS

Bring Your Own Device supplies -

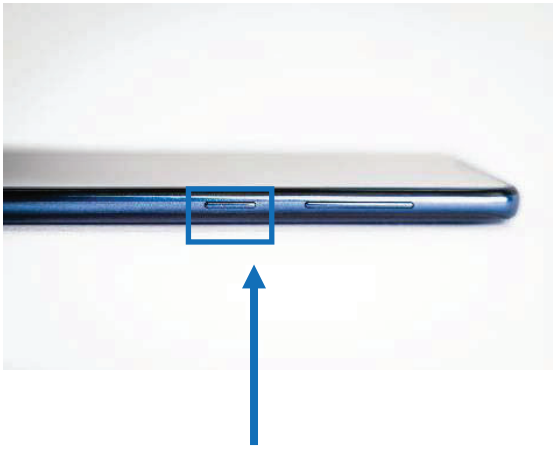
- TrialMax App sticker with country specific Helpdesk number
- Quick Reference Guide in the participant's language
- App Activation Guide in the participant's language
- Participant card with App activation details to be sent via email or SMS

3.2 Provisioned Device Basics

Each TrialMax App device has a sticker applied to it that contains the country specific Helpdesk phone number.

Please contact the Signant Health Helpdesk if a device is not working properly. The Helpdesk agents will assist you or the participant with technical questions.

3.3 How to turn on the Provisioned device



Press the power button on the side

The Motorola device is the provisioned device for this study.

Turn the Device on by pressing the power button on the right side of the device.

If the Device is left on for ten (10) minutes without use, it will hibernate and perform automatic log out.

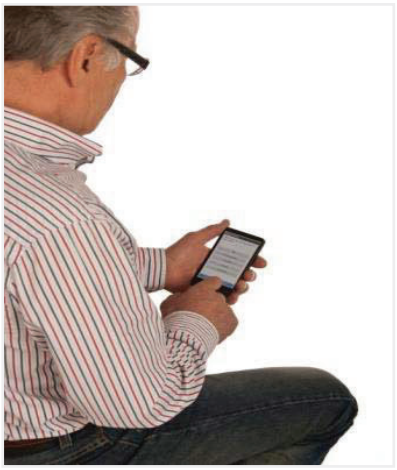
3.4 How to charge the Provisioned Device

The device has a rechargeable battery. Please remember to instruct the participant to **charge the battery <u>every day</u>.** If the device prompts the participant with a message that the battery is low, they should charge the device immediately. When the device is powered on it will display a battery status symbol on the top right side of the screen that indicates the amount of charge remaining in the device.

The participant can use the device while it is being charged but if discharged fully, it may take a little time to charge before use.

Connect the power charger cable to the provisioned device.
The device will usually fully charge in approximately 2 hours.

3.5 Device Navigation



Use your finger to navigate through the device.

Please do not use a stylus or sharp points as these will not function on the device and will damage the screen.

3.6 Additional Site Supplies

- Quick Reference Guide for the participant and TrialMax App device sticker
- App Activation Guide

4 TrialManager

TrialManager is an online, internet-based application used by investigators, coordinators, monitors and study personnel to view and monitor study progress. TrialManager enables the users to follow overall participant compliance and view the participant's Diary data.

TrialManager supports the following Internet browsers:

- Firefox 33 and up
- Internet Explorer 11 and up
- Chrome 32 and up
- Apple Safari v9 and up

4.1 Functions of TrialManager

After answering the questions on the electronic device, the participant will need to send their answers to the study database (TrialManager). Within minutes of sending data, you can view the data (and reports of the data) sent.

By using TrialManager, you can:

- View the participant's Diary answers
- Monitor participant compliance and other reports
- Monitor the number of days since the participant has last completed their Diary
- Raise Data Clarification Forms (DCFs) and monitor their progression through to closure
- View data audit trails for questionnaire entries (including changes to forms)
- Deactivate the participant

Note: You should be logging in to TrialManager only with your own login details (which will be sent to your email). Do not share your

password with your colleagues. It is also important to note that while the term "Participant" is used to describe the patient in this study, you will see the terms "Subjects" and "Participants" used interchangeably throughout the App and TrialManager platforms.

4.2 Accessing the TrialManager website

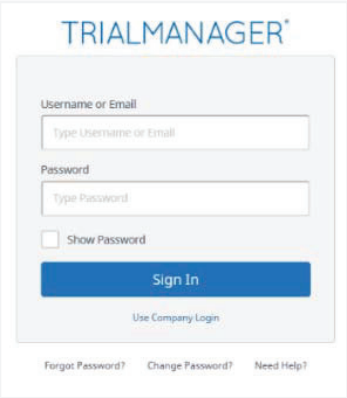
All people will have separate access based on their role within the study.

Your TrialManager username and initial password will be emailed to you. You will be prompted to change this password at your first login (see How to change your TrialManager password for more information). Your TrialManager password has no relation to the Site personnel PIN codes on the TrialMax App.

Note: If you have access to TrialManager for another Clinical Study, then you will be able to use the same Username and Password for each TrialManager. Please note that this feature is only available for the studies that started after September 1st, 2019. If you have a TrialManager account for older studies, you will not be able to use the same Username and Password for each TrialManager unless you change them manually to match with the rest of your credentials.

Type the following address into your web browser:

http://trialmax.crfhealth.net/c4591001-Post-12-July-2020



A login window will open. Bookmark this address for easy future access. Next, enter the username and password that was emailed to you.

4.2.1 How to change your TrialManager password

If you need to change your password, select 'My settings' in the top right-hand corner of the screen or "Change Password" from the Login Screen. There you will find an option to change your password.

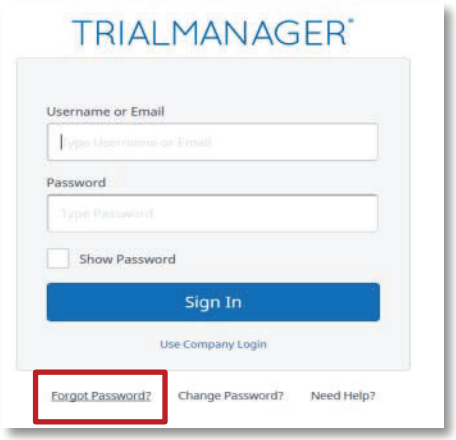
When you decide to change your password, you will be asked to type in your current password, your new password, and verify your new password by typing it in again. Click the 'Change' button to activate your new password.

Rules for creating new password:

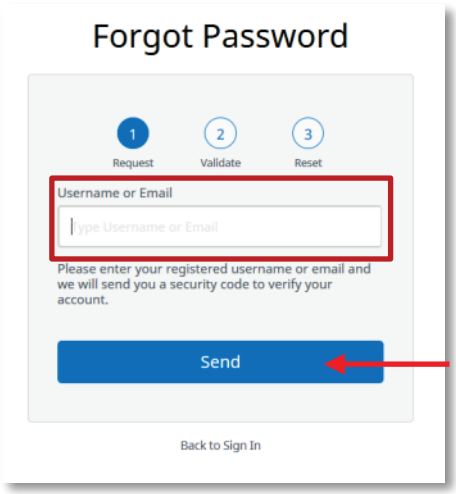
- Must be at least 8 characters.
- Must contain at least one lower case character.
- Must contain at least one upper case character.
- Must contain at least one number.
- Must not contain Unicode characters.
- Special characters in password are not necessary.
- Must not contain spaces, line breaks or new lines.

4.2.2 How to Reset your TrialManager Password

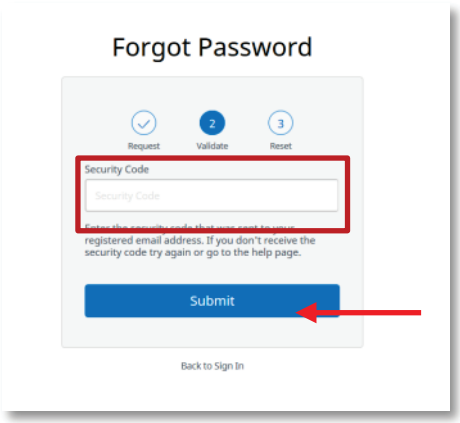
If you have forgotten your password to your TrialManager Account, you are able to reset the password directly within the TrialManager Portal.



From the log in page, select "Forgot Password"



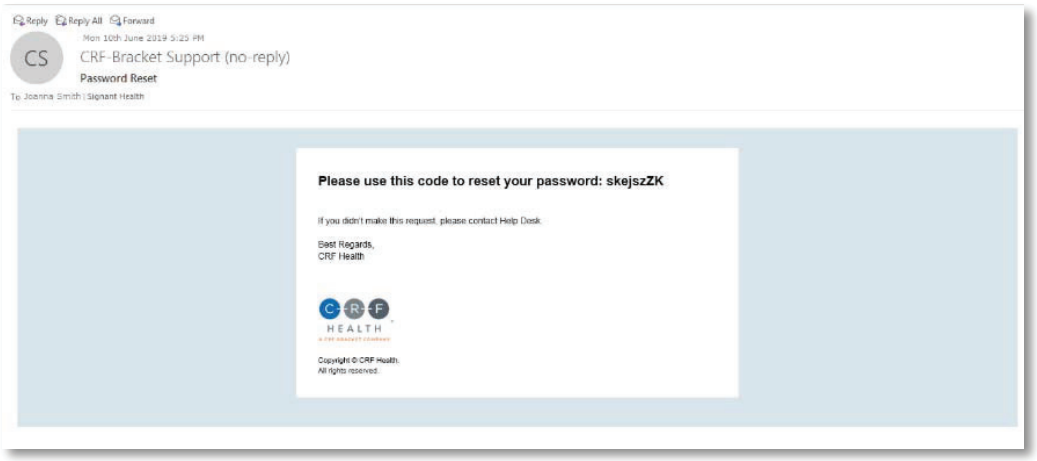
You will be asked to enter your email address so that the system can send you a security code for the password reset

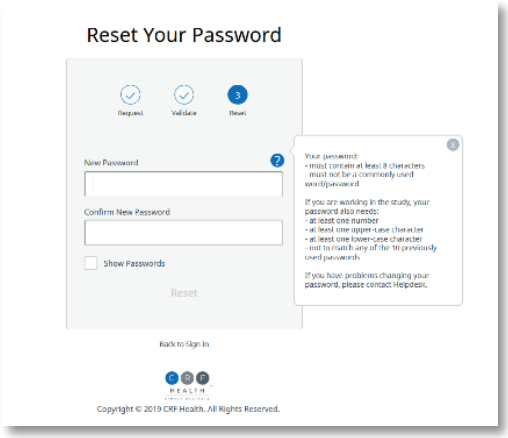


You will be taken to this screen

Check your email inbox and enter the security code, which has been sent to you

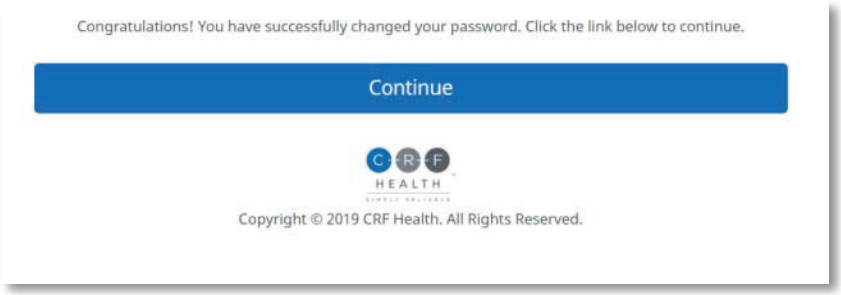
This is an example of the email which will be sent to you:





Enter a new password following the guidance on the screen

Once your reset has been successful, then you should see this screen:



4.2.3 How to request TrialManager access for new team members

In order to request TrialManager accounts for new team members you should add their information into the 'TrialManager User Order Form' and send the updated form to the Signant Health 'TM accounts' team, collating requests into 1 email per week.

Allow 5 business days to create new TrialManager accounts/make updates.

Urgent TrialManager requests can be requested via Helpdesk or directly contacting the Pfizer Study Team via your CRA/Monitor.

4.3 How to navigate the TrialManager website

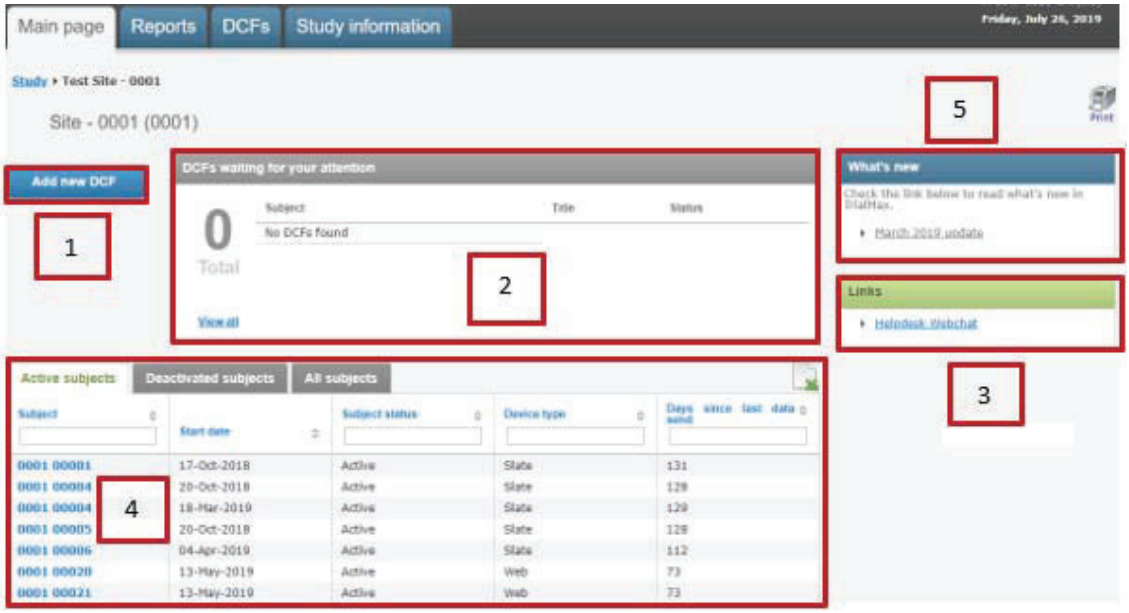
Investigators and Study Coordinators will see several tabs at the top of the screen. They are the 'Main Page', 'Reports', 'DCFs', and 'Study Information' tabs. These are selected by clicking on them.

The points below highlight the main functions and features of the tabs:

- **Main Page:** View a list of all your participants, navigate to individual participant pages, view open DCFs and navigate to the DCF tool, view the latest TrialMax updates
- **Reports:** Review, filter, and print information associated with your site and participants, such as compliance, DCFs, and administrative data
- **DCFs:** Create, approve, and monitor all requested data changes for your participants
- **Study Information:** Access supplemental reference content, such as electronic versions of the Site User Manual and DCF Guide

4.3.1 Main Page Tab

When you select “Main page” the following screen appears:



1. With this button, you are able to add DCFs (see Where to create DCFs in TrialManager).
2. This section is called the DCF Notice Board and will display all DCFs for your site that require your action. Simply click on the title of a particular DCF to see further details displayed. All DCFs created by you or anyone else will also need to be approved by a site user with DCF approval rights. Signant Health will be the one to implement the corrections requested in the DCFs.
3. Some useful web links for the study are displayed on the right-hand side of the screen, including the Helpdesk web chat.
4. The participant list section at the bottom of the screen will display all participants at your site.
    a. By default, this will display Active participants at the site. Click on the ‘Deactivated subjects’ or ‘All subjects’ to also

view participants that have already been deactivated from the TrialMax App.

b. You are able to sort and filter by any of the column headings by typing into the text boxes below the column headings.

c. Clicking on a subject number will take you to more detailed information regarding that participant (see Participant Details Card).

5. You can see the latest updates regarding any TrialManager system updates.

4.4 Add a new participant

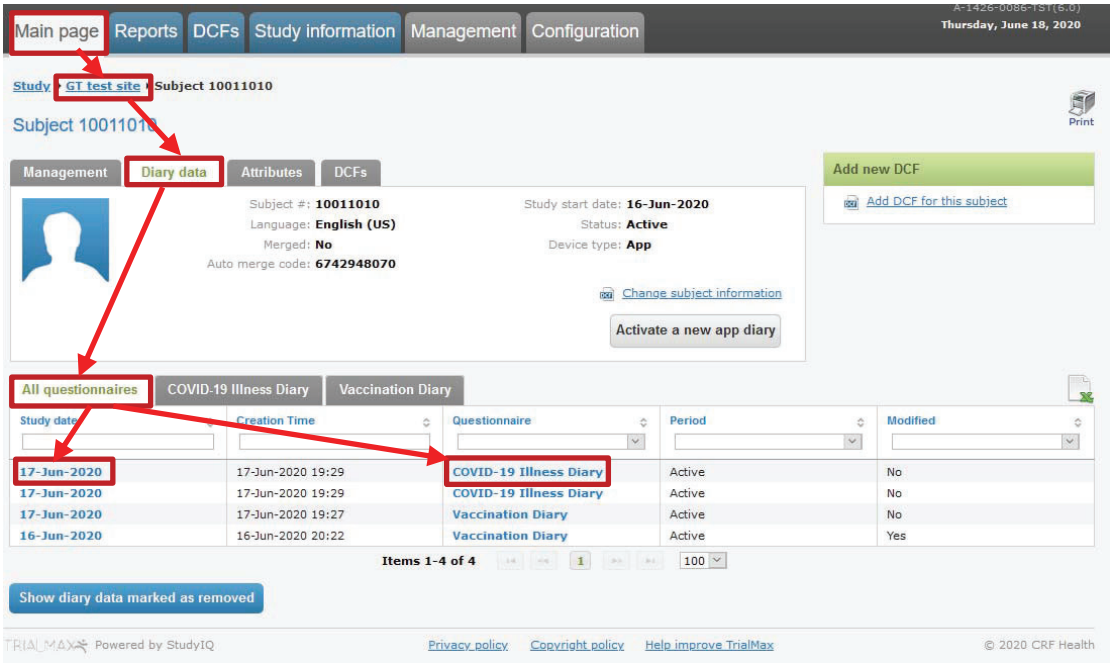
Please see **'How to set up a participant in TrialManager'**.

4.4.1 Participant Details Card

Upon clicking on a participant from the main page, the participant/subject's information card will display:

This will show details for the participant including: language, participant status, study start date, device type, and the participant's auto merge code, which is necessary for replacement devices.

Below the participant details card, you will be able to review the Diary forms submitted by the participant on the TrialMax App.

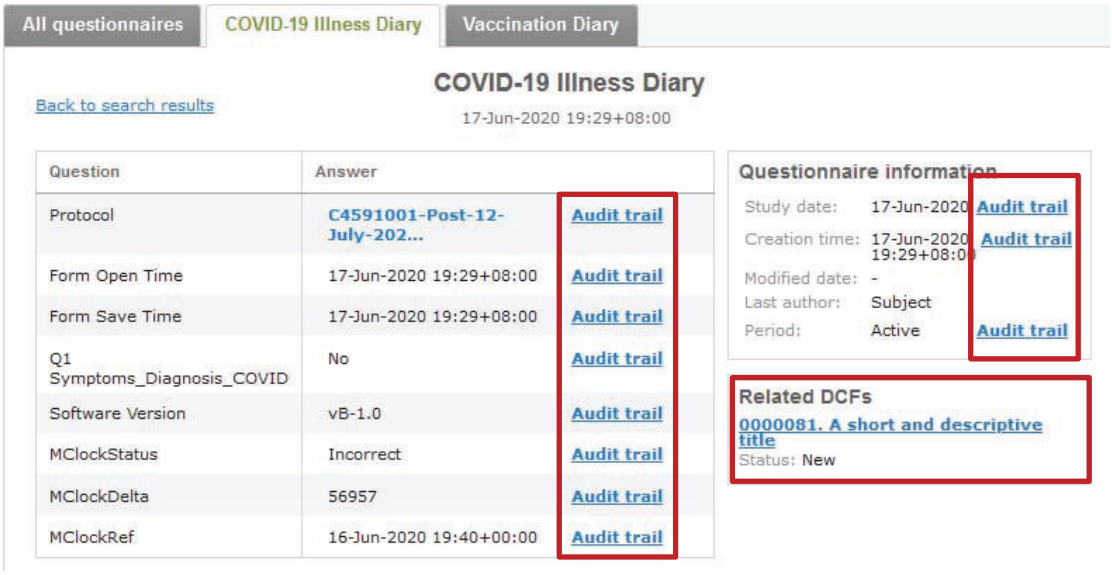


'All questionnaires' tab which contains 'Study date' and 'Questionnaire' links to each completed form. Each column can be filtered and sorted. Upon selecting a form link the form will open,

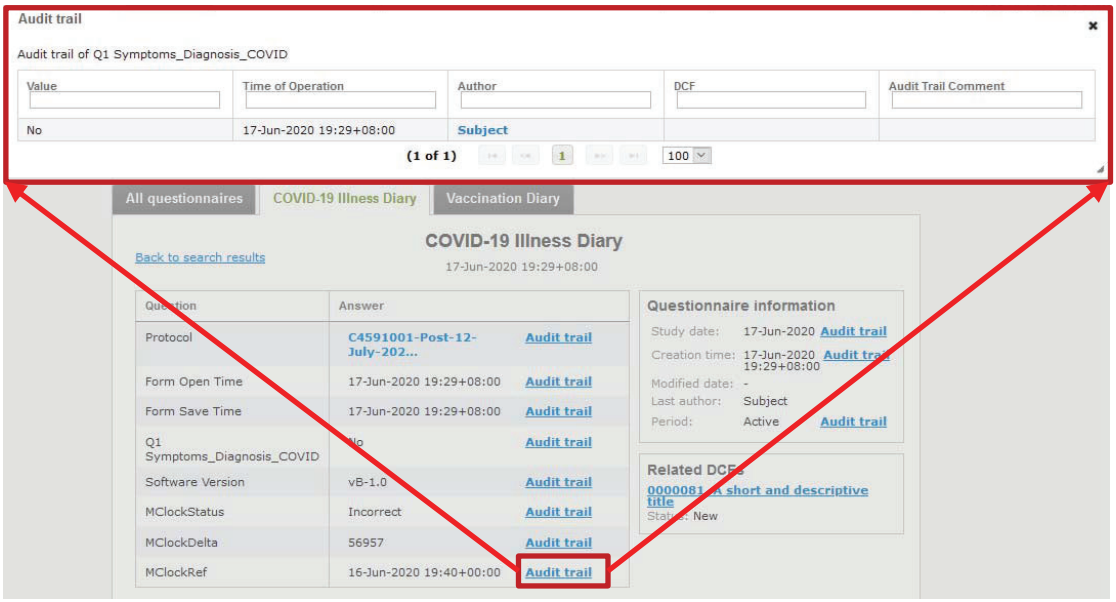
displaying a list of all form data items, including the questionnaire items and responses completed by the participant, and administrative items such as the date and time a completed form was saved.

4.4.2 Data Item Audit Trails

You will also be able to view the audit trails for each questionnaire data item from within these form pages. You can use the audit trails to review the original values and a full change history of any data item if changes were made via the TrialManager DCF tool. If there was a DCF associated with a questionnaire form, this will be displayed to the right of the form with a direct link to the DCF itself and the current DCF status.



To view the full audit trail of any available form item, including the original value and any changes, click the 'Audit trail' link to the right of the desired item. An audit trail of the item will open displaying a list of the data item elements, sorted newest to oldest from top to bottom. If only 1 row is displayed, this indicates that this is the original value of the data item, and that it has not been modified.



The Audit trail column headers are defined as follows:

- **Value:** the value of the data item itself
- **Time of Operation:** the date and time associated with the data item entry or modification
- **Author:** the user that committed the associated operation (participant, site, or Signant Health Data Management)
- **DCF:** the DCF ID number if a DCF was used to execute a change to the form
- **Audit Trail Comment:** free text field where the Signant Health data change implementer may post the DCF number, an external DCR number (if DCF was not used), or other useful reference information

Note: if a data item was modified via DCF within TrialManager, it will display a small clipboard icon to its right. Hovering with the mouse over the clipboard icon will trigger a pop-up with a brief summary of the change.

4.5 Reports Tab

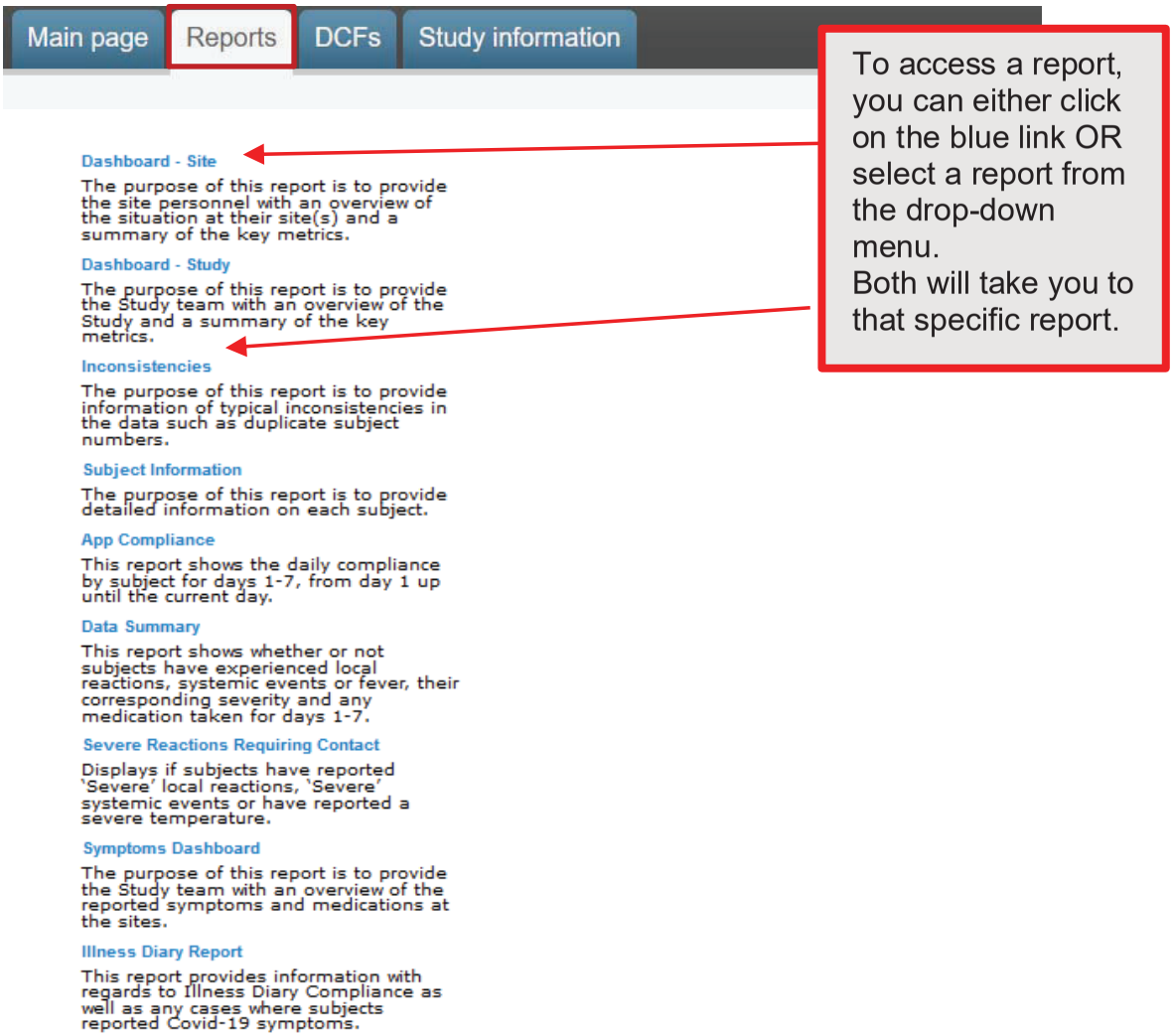
The ‘Reports’ tab will contain reports for you to view. These reports should be reviewed on a regular basis to ensure the participants are completing the questionnaires correctly with good compliance.

Note: TrialManager reports accessibility may not be available on the initial login of the user. The user may have to logout and log back in to view these reports.

The following reports will be available for this study:

- **Dashboard - Site:** The purpose of this report is to provide the site personnel with an overview of the situation at their site(s) and a summary of the key metrics.
- **Dashboard – Study:** The purpose of this report is to provide the Study team with an overview of the Study and a summary of the key metrics.
- **Inconsistencies:** The purpose of this report is to provide information of typical inconsistencies in the data such as duplicate participant numbers.
- **Subject Information:** The purpose of this report is to provide detailed information on each participant.
- **App Compliance**: This report shows the daily compliance by participant for days 1-7, from day 1 up until the current day.
- **Data Summary**: This report shows whether or not participants have experienced local reactions, systemic events or fever, their corresponding severity and any medication taken for days 1-7 following each vaccination.
- **Severe Reactions Requiring Contact**: Displays if participants have reported ‘Severe’ local reactions, ‘Severe’ systemic events or have reported a severe temperature.

- **Symptoms Dashboard**: The purpose of this report is to provide the Study team with an overview of the reported symptoms and medications at the sites.
- **Illness Diary Report**: This report provides information with regards to Illness Diary Compliance as well as any cases where subjects reported Covid-19 symptoms.

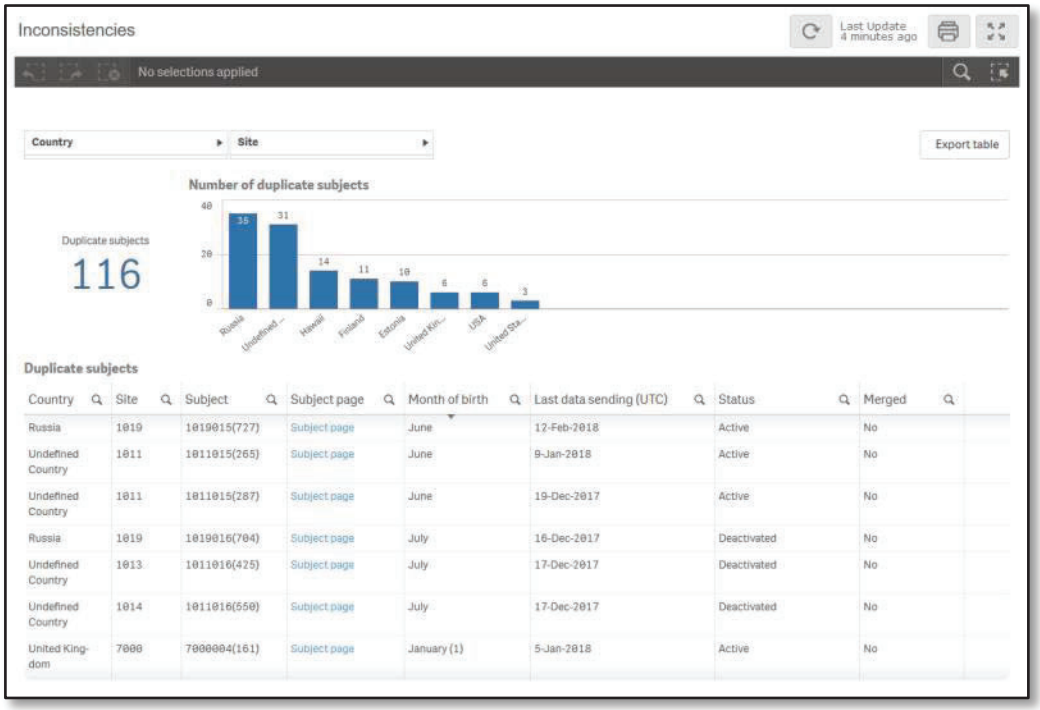


4.6 How To Review Reports

For monitoring purposes, you can view near real-time, graphical reports about the state of the study right inside TrialManager. Graphical visualizations allow you to identify quickly any deviations from the study protocol and take corrective action. For example, you can verify which study participants are still compliant (if they are completing their questionnaires on schedule) or verify the progress on resolving DCFs.

4.6.1 Reports User Guide

The Signant Health Reporting Solution supports a variety of visualizations, including bar charts and data tables. Below is an example of the Inconsistencies Report.



These report visualizations are interactive. When you select parts of the displayed data in report, all other sections update to filter for the selection automatically. This even works between reports in the same drop-down list and allows the user to ask questions about the data. Depending on your user role, you can select your site and/or participant number from the drop-down options at the top of the page. The report will automatically repopulate using the criteria

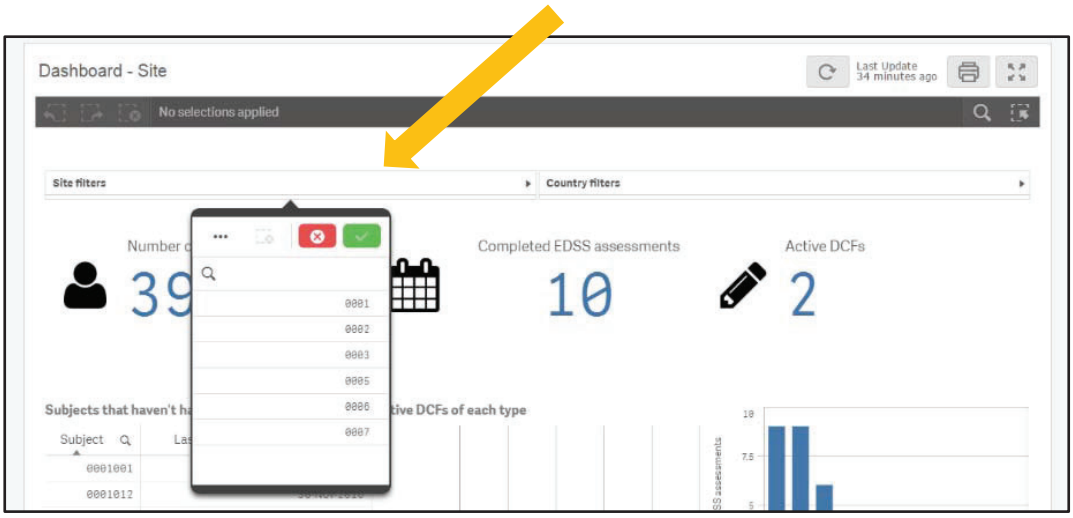
selected. Clicking on the drop-down options will automatically filter the whole report.

4.6.2 Hints and Tips for Viewing Reports

The reports used in this study are designed to give you easy access to key study details. Below are some hints and tips on how to get the best from the reports available in the study:

Filtering

Reports can be filtered in several ways. One way is by selecting from the drop-down filters appearing at the top of the reports, as shown below.



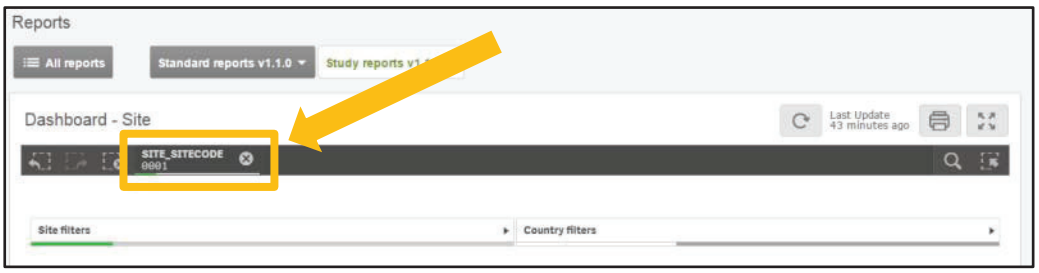
To use the drop-down filters, select an item or items, from the list and select the green tick to apply the filter. Select the red cross to close the filter list without applying the change.

Reports can also be filtered by selecting part of a table or chart, for example selecting a participant from a list, or selecting a bar in a chart.

Selecting the icon in column headings can also be used to filter reports.

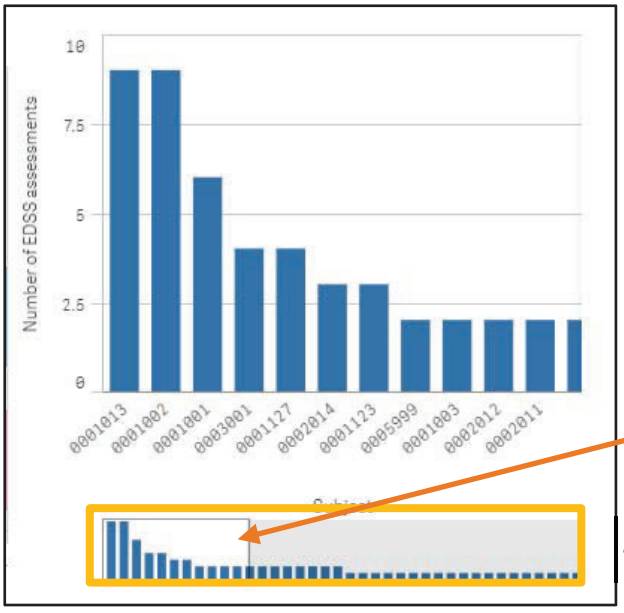
Once a filter selection has been made, all parts of the report and other reports viewed, will have this filter applied. All filters that are applied can be seen in the banner at the top of the report.

To remove a filter, select the “X” next to the filter in the banner at the top of the screen, as per the image below:



Viewing Bar Charts

Some reports contain bar charts to display specific data information. For bar charts with many data bars, it may not be possible to view all bars at the same time. When this is the case, a smaller ‘scroll bar’ version of the report can be seen. Move the white ‘viewing area’ box to the left or right on the scroll bar view to change the data shown in the main part of the report.



Hovering over a bar within a bar chart will display additional information.

Viewing Reports with Tables

For reports with large tables, you may wish to resize columns to ensure the best view in your browser. To do this, simply select the line between columns, and resize as required to fit all the columns in the view. If a column name is too wide to be displayed fully, hover over the column name with the mouse to view the full name.

You can rearrange the order that the columns will appear in by clicking on and dragging a column header into a different position, allowing you to focus on the columns you require.

You can select column headings to sort the report by that item. One click will sort the report in ascending order, a second click will sort the report in descending order. An arrow will appear on the column header to indicate the sorting applied.

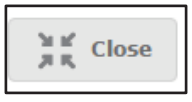
Select the 

button, where seen, to export information in a table to excel.

Standard Report Icons

The icons seen below can be found at the top left corner of all reports in the study.


This icon can be used to expand the viewing area for any report to full screen.



This icon will be seen to exit the full screen view.

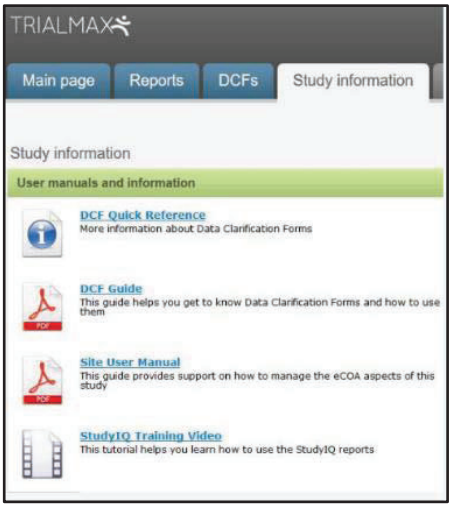
This icon can be used to print to pdf the report being viewed. This pdf copy of the report can be printed or saved, as required.

This icon can be used to reload of the data within the report.

To switch between reports, you can either return to the full list of reports by selecting the 'All Reports' option, or you can switch between reports using the drop-down options 'Standard reports' and 'Study reports'.

Note: Any filters applied to one report will also remain active on other reports viewed in the same drop-down list, unless specifically removed.

Further information and video training on how to use the reports can be found in the 'Study information' tab in Trial Manager.

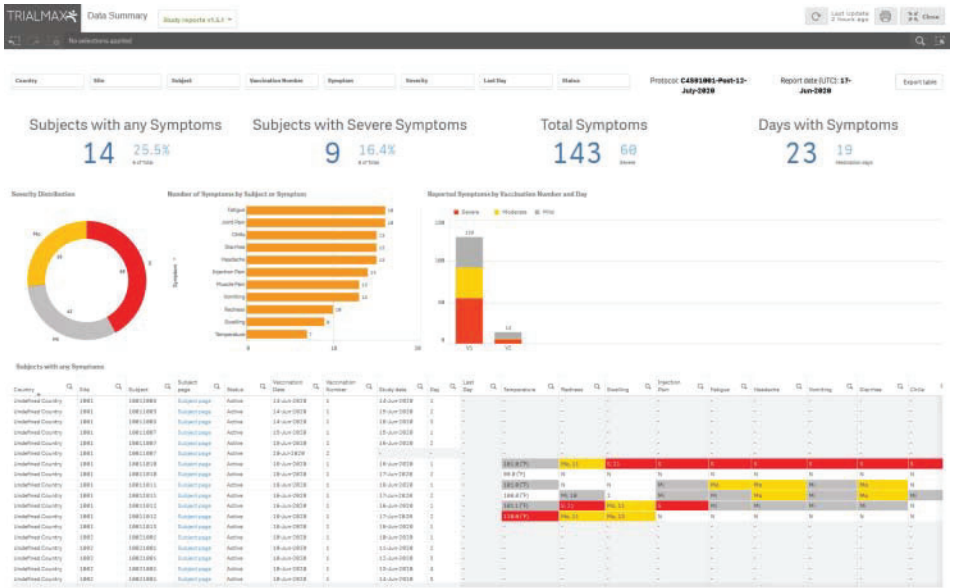


4.7 C4591001-Post-12-July-2020 Custom reports

4.7.1 Data Summary Report

This report shows whether or not participants have experienced local reactions, systemic events or fever, their corresponding severity and any medication taken for days 1-7.

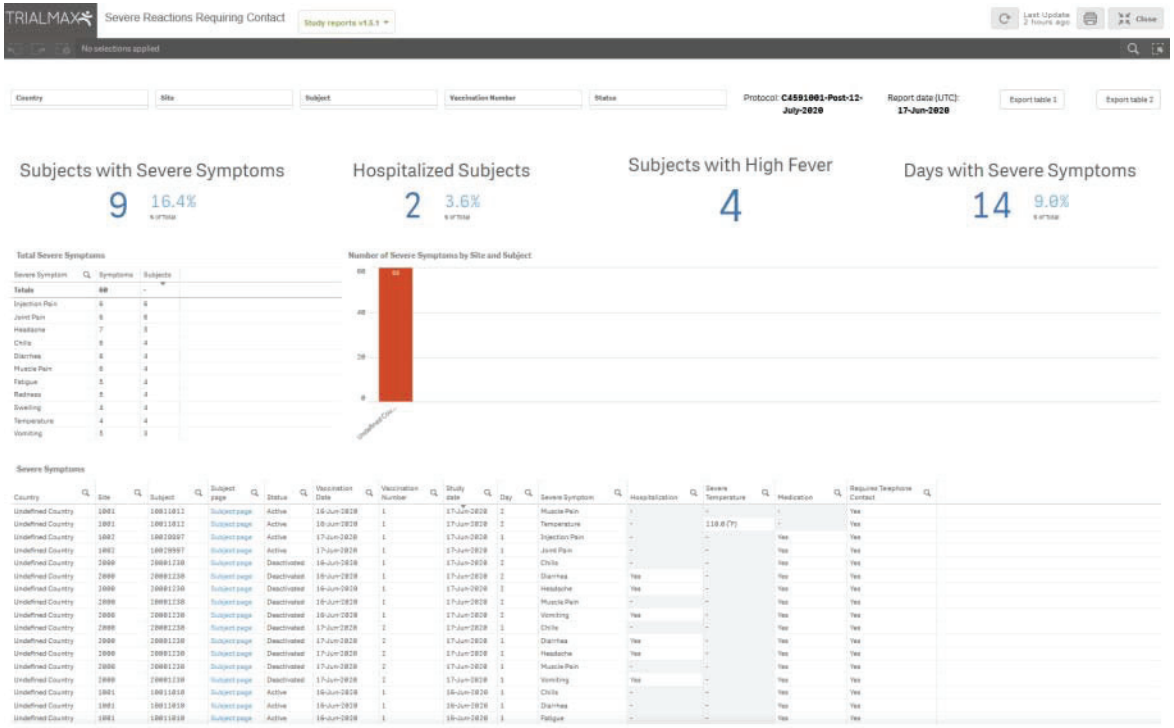
Columns will include: ”Country”, “Site”, “Participant”, “Participant page” (hyperlink which takes you to the participant page in TrialManager), “Status”, “Vaccination Date”, “Vaccination Number” (displays the vaccination number entered in the TrialManager), “Study Date” (displays date when diary form was opened. Future/ uncompleted diary dates will appear as [blank]), “Study Day” (fixed column listing ‘1’ – ‘7’ representing each of the study days for each participant), “Temperature”, “Injection Site Pain”, “Swelling”, “Redness”, “Fatigue”, “Chills”, “Diarrhea”, “Vomiting”, “Headache”, “Joint Pain”, “Muscle Pain”, and “Medication”.



4.7.2 Severe Reactions Requiring Contact Report

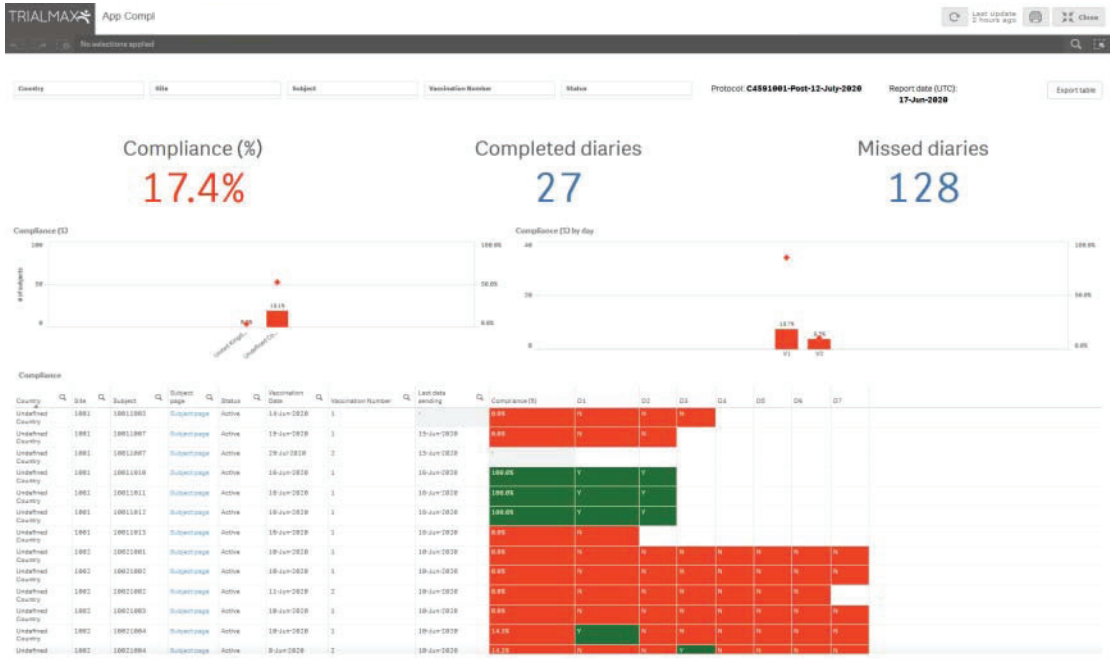
Displays if participant have reported 'Severe' local reactions, 'Severe' systemic events or has reported a severe temperature.

Columns will include: "Country", "Site", "Participant", "Participant page" (hyperlink which takes you to the participant page in TrialManager), "status", "Vaccination date", "Vaccination number" (displays the vaccination number entered in the TrialManager), "Study date", (displays date when diary form was opened. Future/ uncompleted diary dates will appear as [blank]) "Study Day" (fixed column listing '1' – '7' representing each of the study days for each participant), "Severe Symptoms", "Hospitalization", "Severe Temperature" (Any Temperature higher than 102°F), "Medication", and "Require Telephone Contact" .



4.7.3 Vaccination Diary Compliance Report

This report shows the daily compliance by participant for days 1-7, from day 1 up until the current day.



Columns will include: “Country”, “Site”, “Participant”, ”Participant page”, “Status”, “Vaccination date”, “Vaccination number”, “Last data sending” , & “% Compliance”.

Compliance (%): Displays the compliance rate.

D1-D7: represent the study days and will display the status of the participant’s diary completion for each day.

Color scheme display for the Compliance (%):

- Red: <40%
- Yellow: ≥ 40% - < 80%
- Green: ≥ 80%

Expected diary compliance will follow the standard color-coding scheme and thresholds. For active participants, diary completion expectations will be based on the current date. Once a participant is vaccinated, the participant will be expected to complete the diary every day for 7 days including on the day of the vaccination, for the participant. As each study day passes, the previous study days become expected and should have one diary completed. For deactivated participants, diary completion expectations will be based on the deactivation date. The participant will thus be expected to have completed one diary for each study day starting from the vaccination day and until the day before the Deactivation date. The exception here is that if the participant completed a diary on the day they were deactivated, that day will also be considered as expected.

4.7.4 Symptoms Dashboard Report

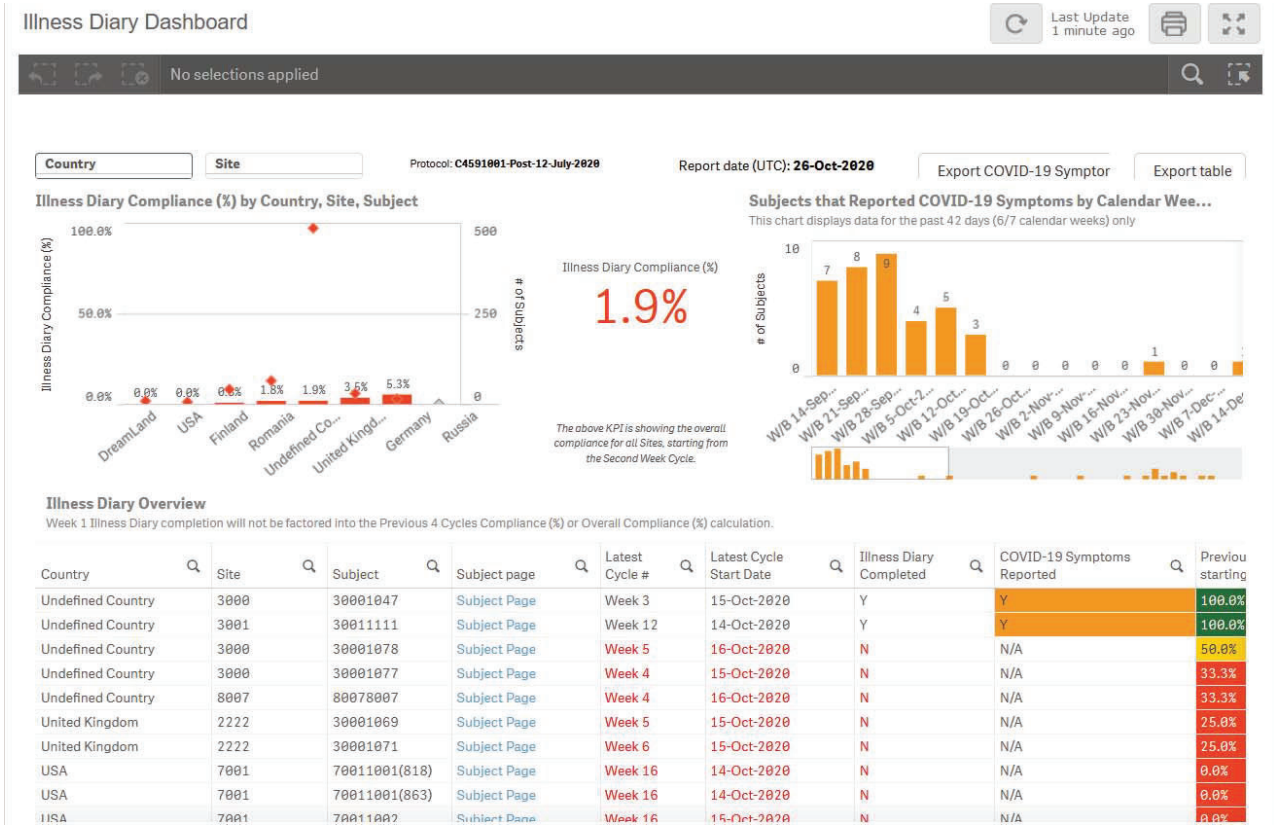
The purpose of this report is to provide the Study team with an overview of the reported symptoms and medications at the sites.

Symptom Distribution columns will include: “Symptom”, “S” (Severe), “Mo” (Moderate), “Mi” (Mild), & “Total”.

4.7.5 Illness Diary Report

This report provides information with regards to Illness Diary Compliance as well as any cases where subjects reported COVID-19 symptoms.

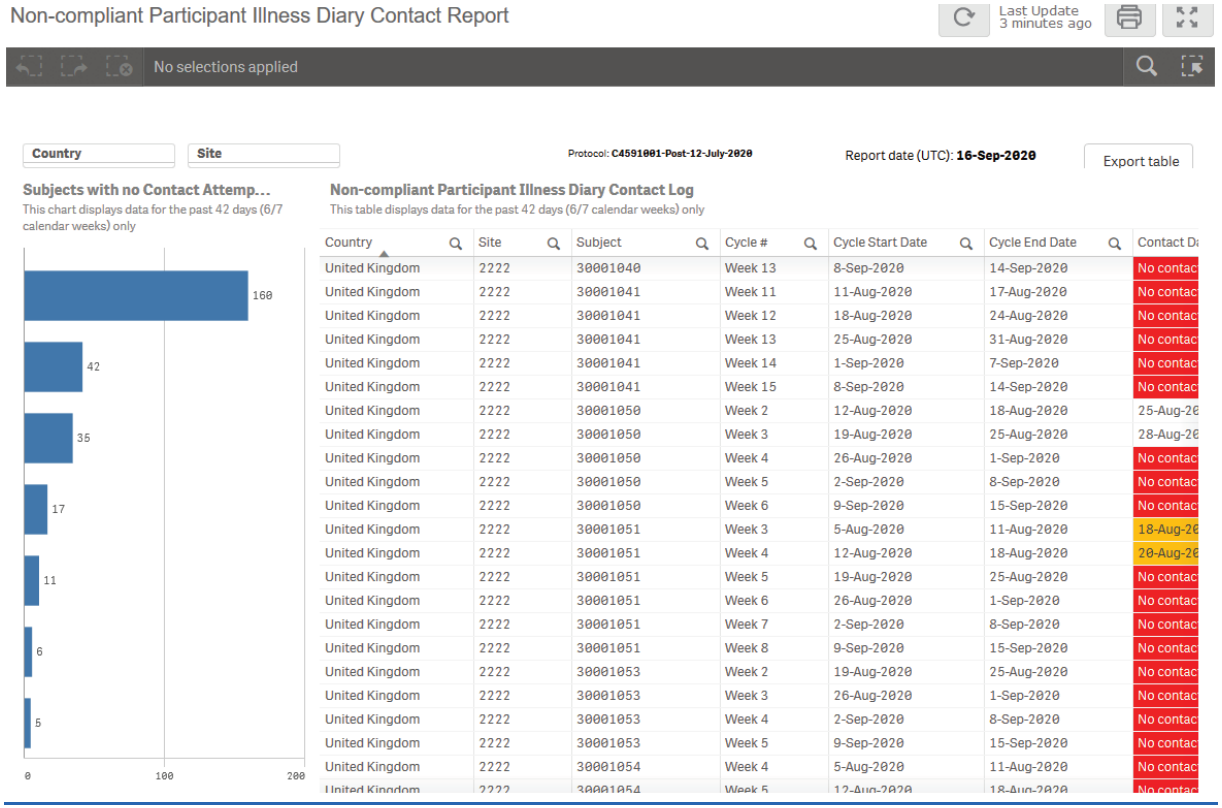
Columns will include: “Country”, “Site” “Subject”, “Subject page” (hyperlink which takes you to the participant page in TrialManager), “Latest Cycle #”, “Latest Cycle Start Date”, “Illness Diary Completed”, “COVID-19 Symptoms Reported”, “Previous 4 Cycles Compliance (%) starting from Cycle # 2”, “Overall Compliance (%)”



4.7.6 Non-compliant Participant Illness Diary Contact Report

This report provides information with regards to Non-Compliant Illness Diary subjects and attempts by the site to contact these subjects. The report will display each cycle (7 day period) where a subject has not completed an expected Illness Diary.

Columns will include: “Country”, “Site” “Subject”, “Cycle #”, “Cycle Start Date” “Cycle Start Date “Contact Date (latest)”, “Successful Contacts”, “Un-successful Contacts”



5 DATA CLARIFICATION FORM (DCF)

5.1 What is a DCF

TrialManager allows authorized personnel to request modifications to certain data items via the DCF process. The data reported by the sites and participant is considered to be the original electronic source data. This data is very rarely, if ever, changed, however, in some situations data changes are needed. The DCF is the audit trail for data changes. Each DCF and its full history are available for review during the study via TrialManager and will be provided to the sites and client at the end of the study via the site archive.

5.2 Types of data changes allowed:

The following data modifications are permitted for this study:

- Changes to data previously reported by the participant, i.e., increase or decrease in the severity of a local reaction or systemic event previously reported on a given day. It is the investigational sites responsibility to ensure such changes are only requested if supported by appropriate source documentation, e.g., telephone contact report detailing the initial data entered and the corrected data.

- Changes to device set-up information, i.e., corrections to the following when previously entered incorrectly:
    - Site number
    - Participant number
    - Vaccination number or date of vaccination

- Other administrative changes, i.e.:
    - Merging participant data and removal of duplicate data – allows cleaning of data issues that may result

from replacement or multiple devices being issued to participants.
    - Modifying timestamps - allow cleaning of data issues arising from when the diary device internal clock is inaccurate.
    - Changing participant status

When data is modified or duplicate data removed, no data is ever fully deleted, all data will remain in the data base audit trail.

The following data modifications are not permitted for this study:

- Addition of a form, e.g., addition of a diary that has previously been reported as missed, or if the device fails and the participant is unable to record their diary.

5.3 Where to create DCFs in TrialManager

You can add a new DCF for any participant where ever you see the 'Add new DCF' button in TrialManager.

It is also possible to add a DCF for a specific participant from the participant page (so the participant instance will be preselected), or from a participant's form view while reviewing data (so the participant instance and the specific form will be preselected).

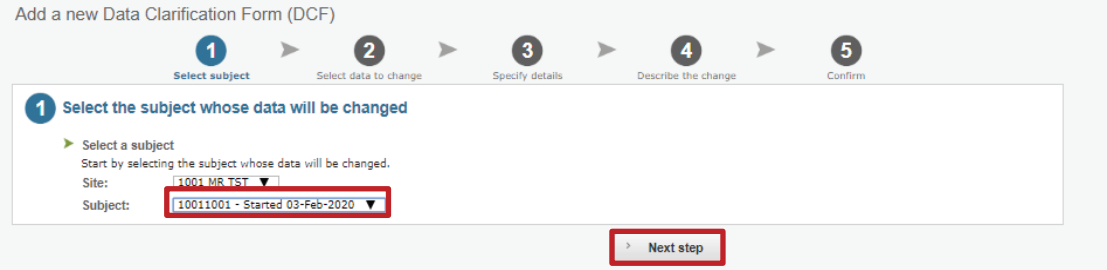
5.4 How to create a DCF

The steps required to complete a new DCF are detailed below. For certain DCFs, additional steps may be required to provide the necessary level of information. The system will guide you to select the necessary information, where this is required.

After initiating the DCF as outlined in Where to create DCFs in TrialManager:

1. **Select Site and Participant**

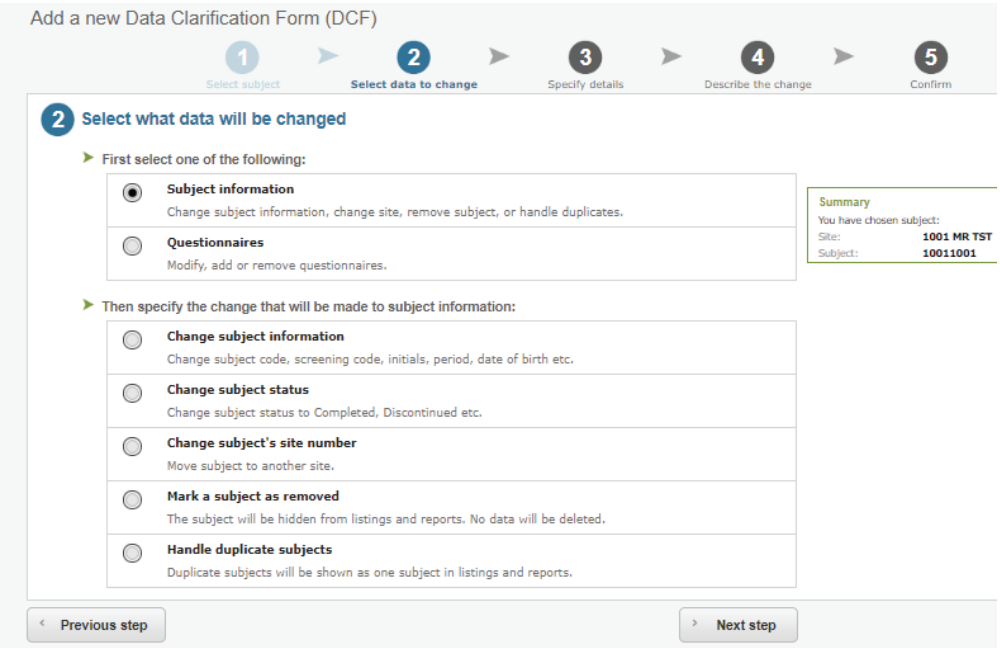
Note: If the DCF was raised at the participant or form level, entering the site and participant in the dropdown will not be necessary.



If there are multiple instances for the participant (i.e. multiple Diary instance) you must select the correct one based on the start date (found in the site index). Alternatively, raise the DCF from the participant level of the correct instance to pre-select the participant details.

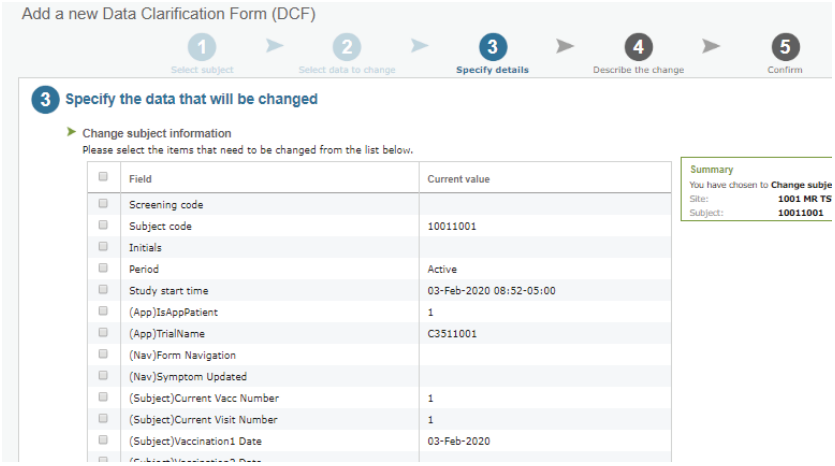
2. Select data to change

Select the data to be changed, either Participant Information or Questionnaires. Based on the selection a further list will appear, as per the example screenshots below. Select the option that best fits the change, then select 'Next step' to proceed to step 3.



3. Specify details (required for some DCF types)

Based on the options selected in the previous step, additional information may be required.



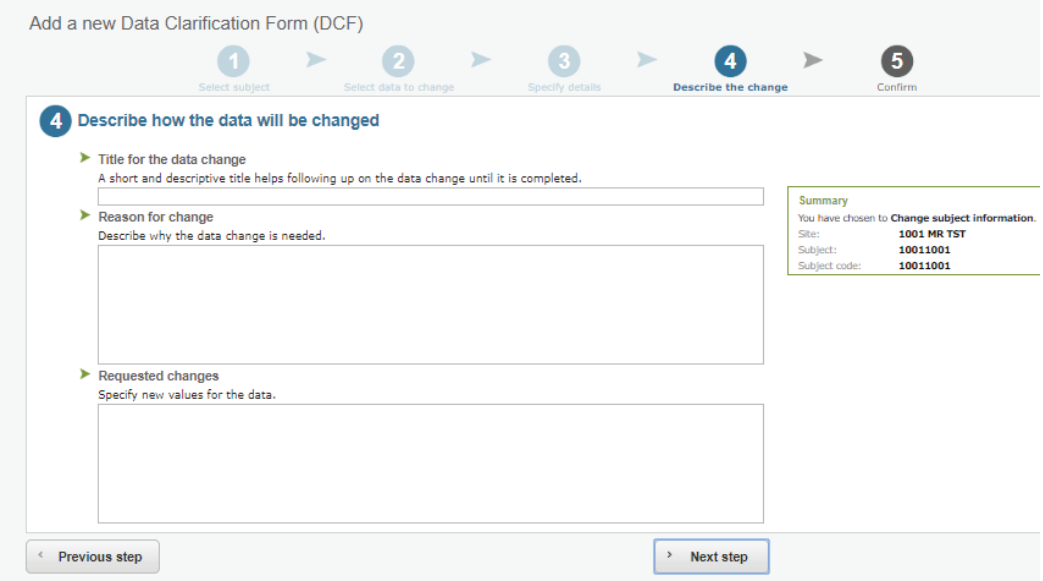
4. Describe the change

Fill in the 3 required free text boxes to describe the change, in as much detail as you can provide. When finished, click 'Next step':

a. **Title for the data change:** Give the DCF a brief title that describes the change (*e.g. 'Update participant number'*).

b. **Reason for change:** Describe the issue with as many details as possible. If this is not specific, processing may be delayed. This should not simply outline what change must be made but rather provide reason for the change explicitly, to act as the audit trail. (*e.g. 'Participant number was entered incorrectly on the device'*)

c. **Requested changes:** Detail the requested changes. Specify any values that need to be changed, including the original value and new value *(e.g. 'Please change X to Y.')*.



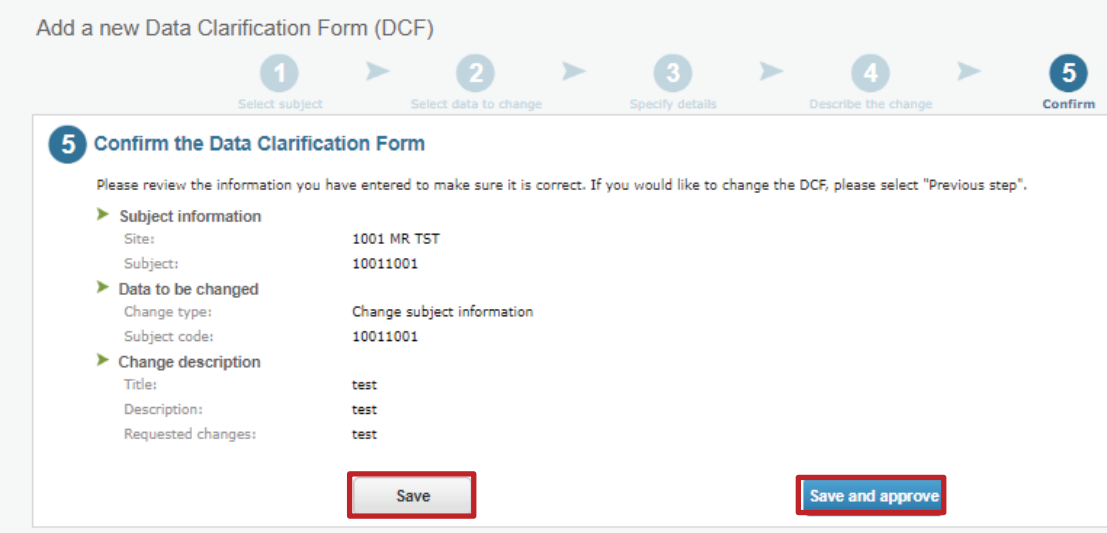
Additional information required for some DCF types:

- Requesting to change a participant's status: be sure to include the date of when the participant status has changed in Step 4 (Describe the change). This DCF type cannot be processed without a date when the new status started.

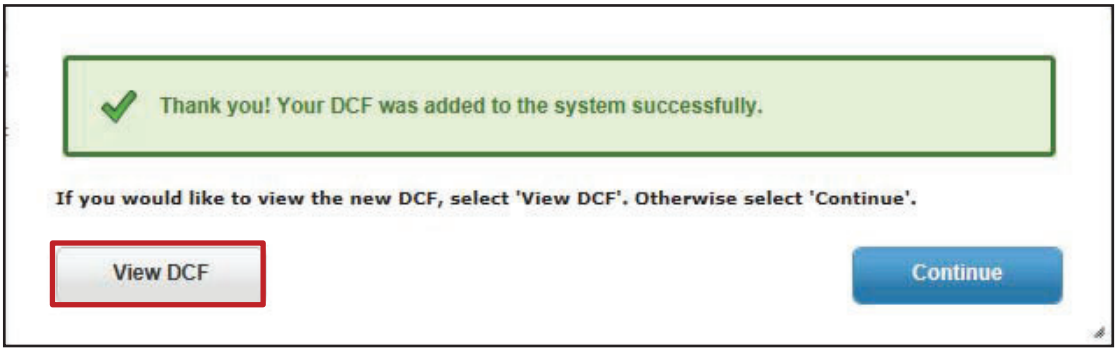
Marking a participant as removed: be sure to specify if forms saved under the participant should also be marked as 'removed' in Step 4 (Requested changes).

5. Confirm

When the DCF has been drafted, you will see a screen where you can review the information entered and click 'Save' to save the information required; or press 'Previous Step' to return to the last step and amend the information. The 'Save and approve' button can also be seen if your user role allows you to approve the DCF request. This button should only be used if you are sure the data entered in the DCF is correct and the request does not need to be reviewed by anyone else before sending to Signant Health Data Management.



You will receive a confirmation that the DCF was created successfully after pressing either 'Save' or 'Save and approve'. Select 'View DCF' to change the status of the DCF for processing by the Signant Health Data Management Team, if 'Save and approve' was not selected.



5.5 Approval of DCFs

When to approve DCFs

DCFs must be approved once they have been created and confirmed to have all the necessary and required information. This may be completed separately, once the DCF is created, or during the DCF creation process if the user has DCF approval rights. **Before Signant Health can implement a DCF, it must first be approved by the Site**.

How to Approve DCFs

DCFs pending site approval can be monitored in the weekly DCF notification emails, which will include links to each DCF, or by reviewing the DCF Dashboard on the study's TrialManager Main Page.

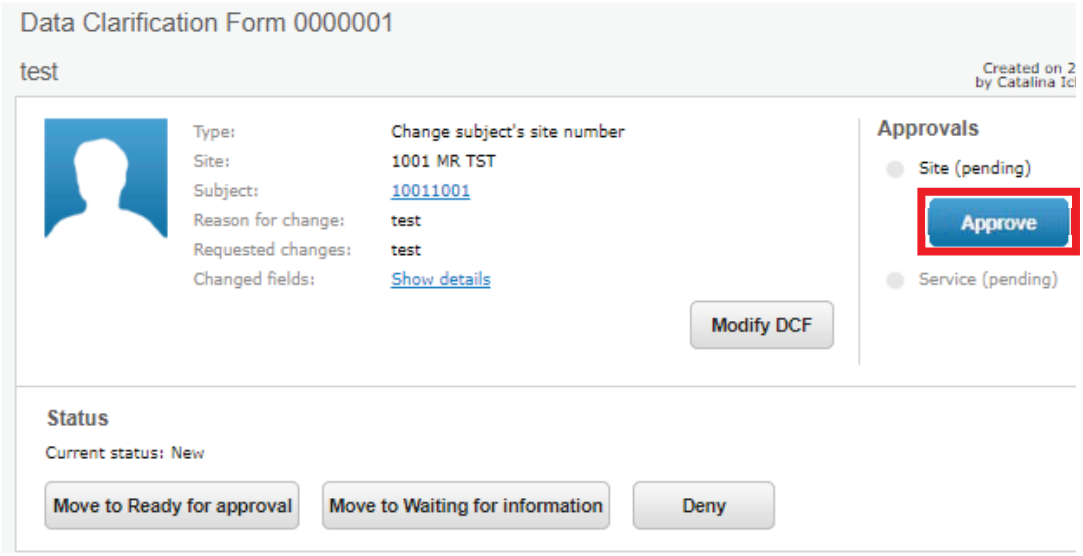
After clicking the DCF link from the email notification, the user will be taken directly to the page where the status of the DCF can be changed. User can also select the appropriate DCF from DCF Dashboard on TrialManager home page by clicking on the DCF title.

Before the change requested can be implemented, the DCF must be approved by the following levels:

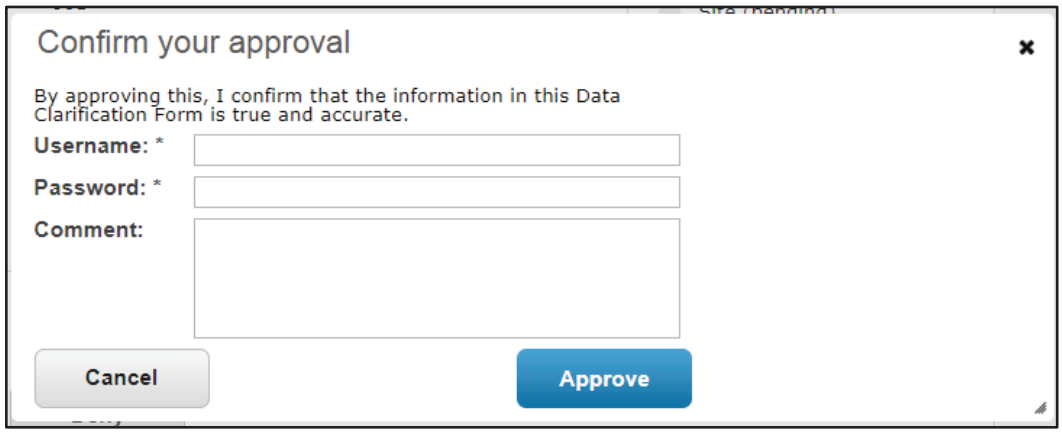
> **Level 1 (Site):** The first level of approval is the Site/Investigator approval. Steps below describe how site personnel can approve DCFs.
>
> **Level 2 (Service):** Finally, Signant Health Data Management Team approval is added once all approvals are received, and Signant Health have confirmed that the DCF includes all necessary information to implement the requested changes.

Follow the instructions below in order to ensure the DCF is approved for processing:

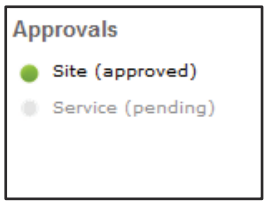
1. Navigate to the DCF and select the **'Approve'** button.



2. Next, a confirmation screen will appear which allows you to add a comment (*optional*) and approve the DCF. After entering your credentials, you can select approve. Please note only Investigator and Study Coordinator (DCF) roles can approve DCF.



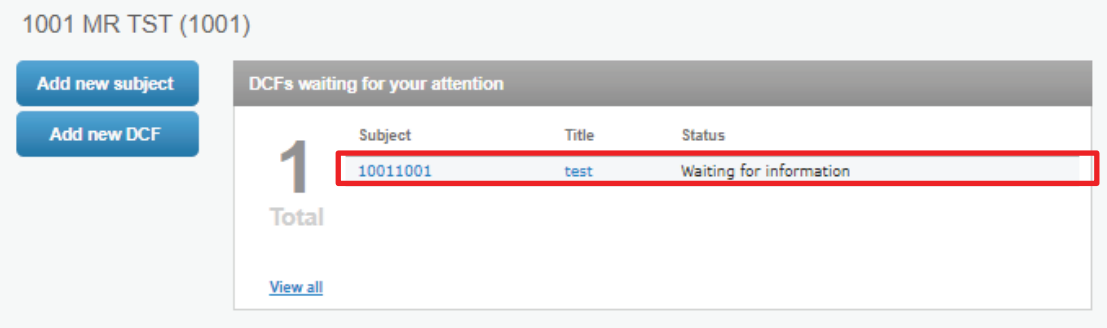
3. The DCF is now approved by the site; approval status is listed on the upper right corner of the DCF. Signant Health can now approve the DCF and implement the changes. **Note: Signant Health may change the status and request additional information see How to Answer Comments: Waiting for Information.)**



You can follow the progress by selecting the DCF and checking the status in the 'DCF' tab of TrialManager and the comments within the DCF.

5.6 Adding Additional Information to DCFs

How to Answer Comments: Waiting for Information



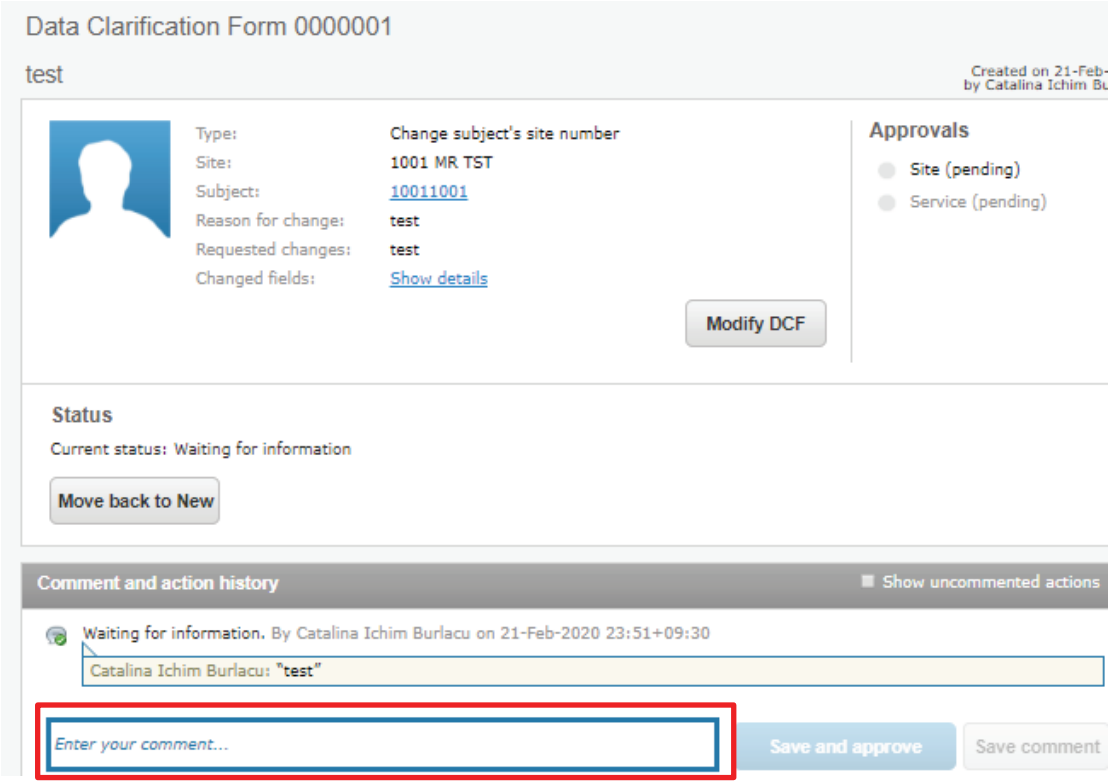
Sometimes, DCFs will need additional clarification and will be changed to the 'Waiting for information' status with questions that the site will need to answer. The DCFs waiting for information can be found on the 'Main page' tab of the TrialManager.

DCFs may be placed in a 'Waiting for information' status for the following reasons:

- DCF wording is unclear
- Wrong type of DCF was selected
- There is missing information that needs to be confirmed

The following steps will be required in order to add comments to DCFs in a 'Waiting for information' status:

1. Click on the Title link to review and read the comment history for the DCF in the 'Waiting for information' status.
2. Review the comments that details the information that needs to be clarified. Enter a clarifying comment in the 'Enter your comment…' text box. Try to respond to all questions raised with as much detail as possible**. If you are still unsure about what information is needed, please state this in your comment**. Press the 'Save comment' button when finished.



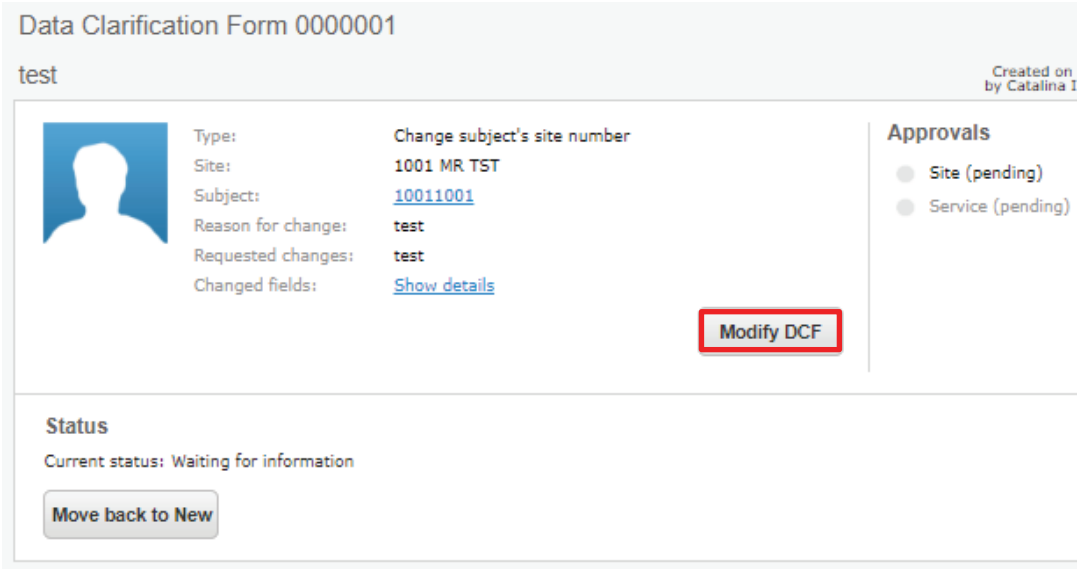
3. Once the necessary additional information has been added via a comment, **the DCF must be approved again**. Follow the steps outlined in How to Approve DCFs above.

You will notice that the DCF no longer appears on the DCF Notice Board on the Main page – this means that no further action is needed on that DCF. Continue the process with all remaining DCFs in your notice board until no DCFs appear in the DCF Notice Board. **Note: The DCF may be moved to a 'Waiting for information' status again if the comments in the DCF are not clear or do not clearly answer the questions from the Signant Health Data Management Team.**

How to Modify DCFs

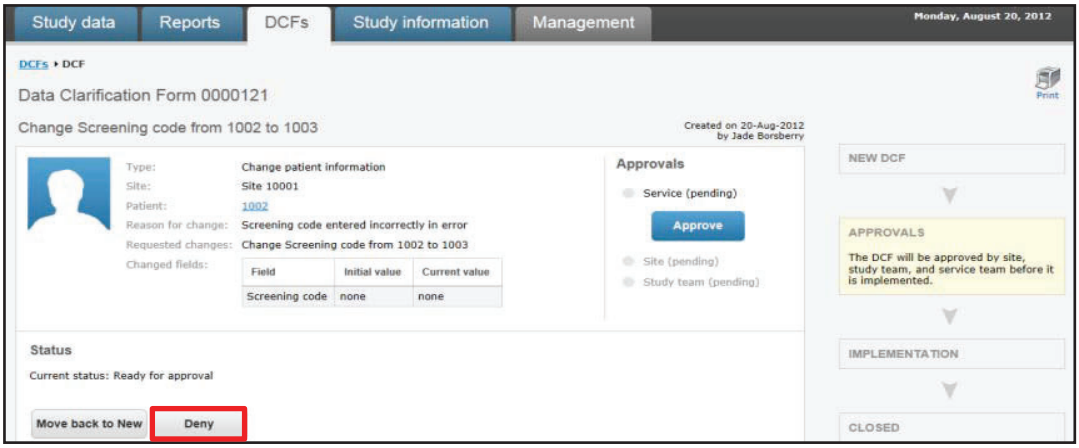
Until a DCF is either under 'Ready for approval' or any 'Approved' status, the site is able to modify the DCF. This can be accomplished by simply selecting the **'Modify DCF'** button on the DCF itself.

When making modifications, be sure to save all updates made to the DCF and move to 'Ready for approval' for processing.



How to Cancel/Deny DCFs

The site can cancel their entered DCF at any time prior to their first approval, by selecting the **'Deny'** button on the DCF page.

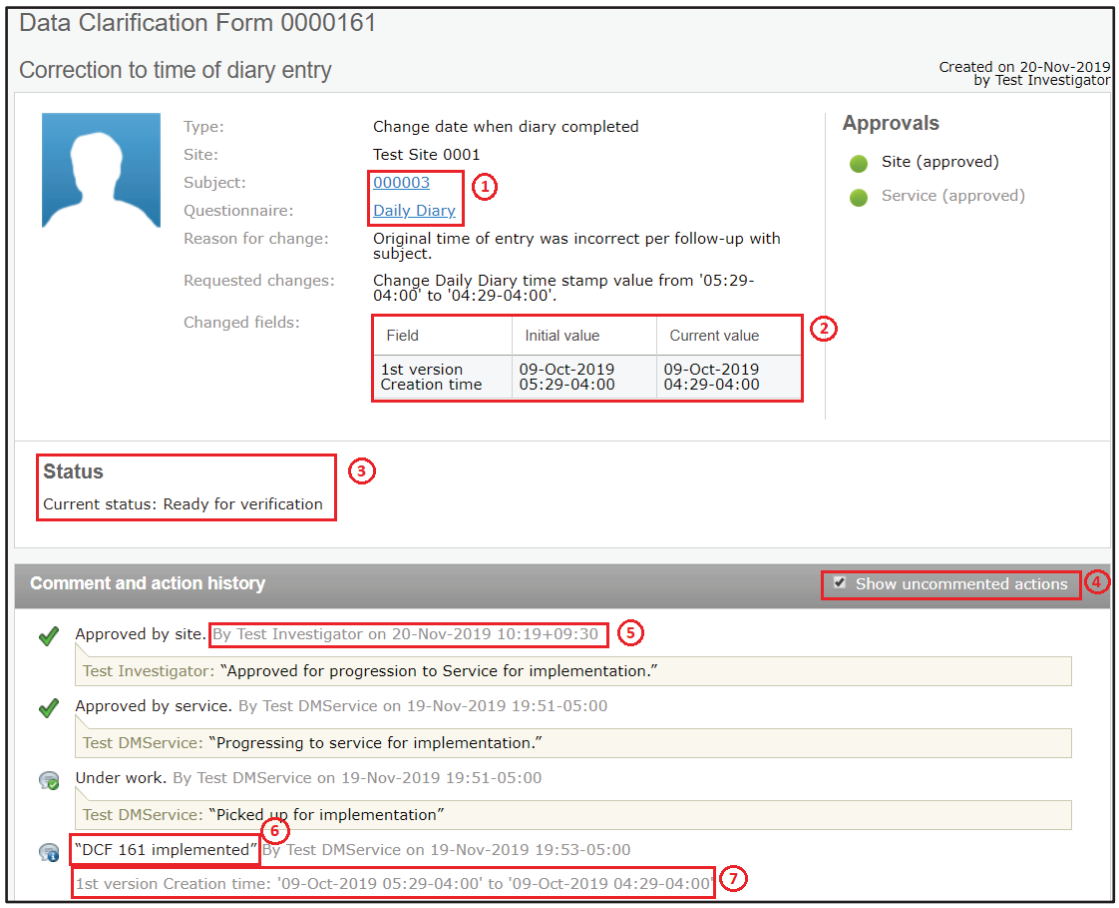


By selecting the 'Deny' button, this signals to the Signant Health Data Management Team that the change requested in the DCF should not be processed.

Note: The Signant Heath Data Management Team may deny DCFs that are not applicable for your protocol or are duplicate requests.

5.7 Viewing DCF Comment and Action History

A DCF will always retain the full history of all comments and actions committed. To view the latest activity for a DCF, navigate to the 'DCFs' tab, select the sub-tab, 'All', and then click the desired DCF link to view the DCF detail. Select the check box, 'Show uncommented actions', and the full history of actions committed in that DCF will be displayed in order of oldest to newest, top-to-bottom.



The elements of the DCF detail view pictured above are defined as follows:

1. Direct links to Participant card and the questionnaire under change, as applicable to the DCF
2. Changed fields will be displayed if specific fields were selected for change during DCF creation. 'Field' will display the data item, 'Initial value' will display the original data item value captured via the TrialMax device, and 'Current value' will display the data item's present value (this may match the 'Initial value' if the DCF has not been implemented yet)
3. The current status of the DCF will be displayed
4. Check box to show uncommented actions, such as a status change can be selected for a comprehensive view of the DCF's history or deselected for a reduced listing. The checkbox will default to unchecked when first opening the DCF
5. The name of the individual committing the action and the commit timestamp will display next to each committed comment or action
6. Comments entered will display within quotation marks
7. Committed changes directly associated with the DCF will display in grey text without quotations

Note: DCF comment and action history items comprise an audit trail of all comments and actions committed in the DCF and cannot be modified once committed.

5.8 DCF Timelines and Tips for Success

DCF Timelines

Once a DCF has been approved, Signant Health Data Management will review and implement the request within 5 working days. If a DCF must go to "Waiting for information" status, then the implementation time will restart on re-approval of the updated DCF.

Tips for Success

It is important that all the data that has been uploaded be reviewed and cleaned throughout the study. Please find below some important guidelines on best practices:

1. It is highly important that data is reviewed and DCFs are raised and approved on an ongoing basis to avoid high volumes of DCFs ahead of interim and final database locks.
   For example, you can use the **Inconsistencies report** to identify participants with potentially incorrect participant numbers, or who may need to be merged, and you should check the participant data to ensure visits are labelled correctly.
2. Sites should continuously review any DCFs waiting for more information to provide Signant Health with the information required to implement prior to lock dates. Regularly review the 'DCFs waiting for your attention' noticeboard on the TrialManager Main Page to find any DCFs that need action to be taken.
3. Sites should ensure that all devices at site have sent data so that all data is uploaded and visible in TrialManager.
4. Please be aware that Signant Health does not review data or raise DCFs.

6 Setting up SMS notifications

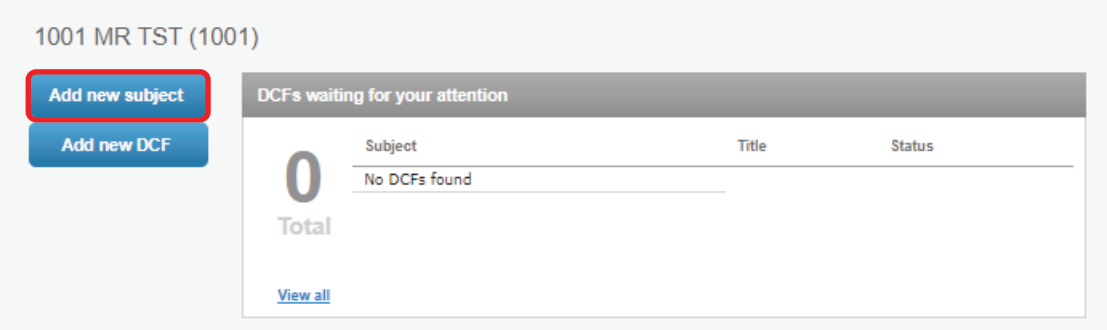
As part of participant setup, you can choose to enter a participant's personal mobile number to receive activation details via SMS. **US participants will need to** subscribe with the mobile phone number they wish to receive this message on. **This should be completed before setting up a participant.**

To opt-in to receive SMS activation code, send a text message with the word **SUBSCRIBE** to phone number **42526**. When you opt-in to the service, you will receive a reply confirming your signup. Once confirmation of subscription message is received, the participant will be able to receive SMS activation code.

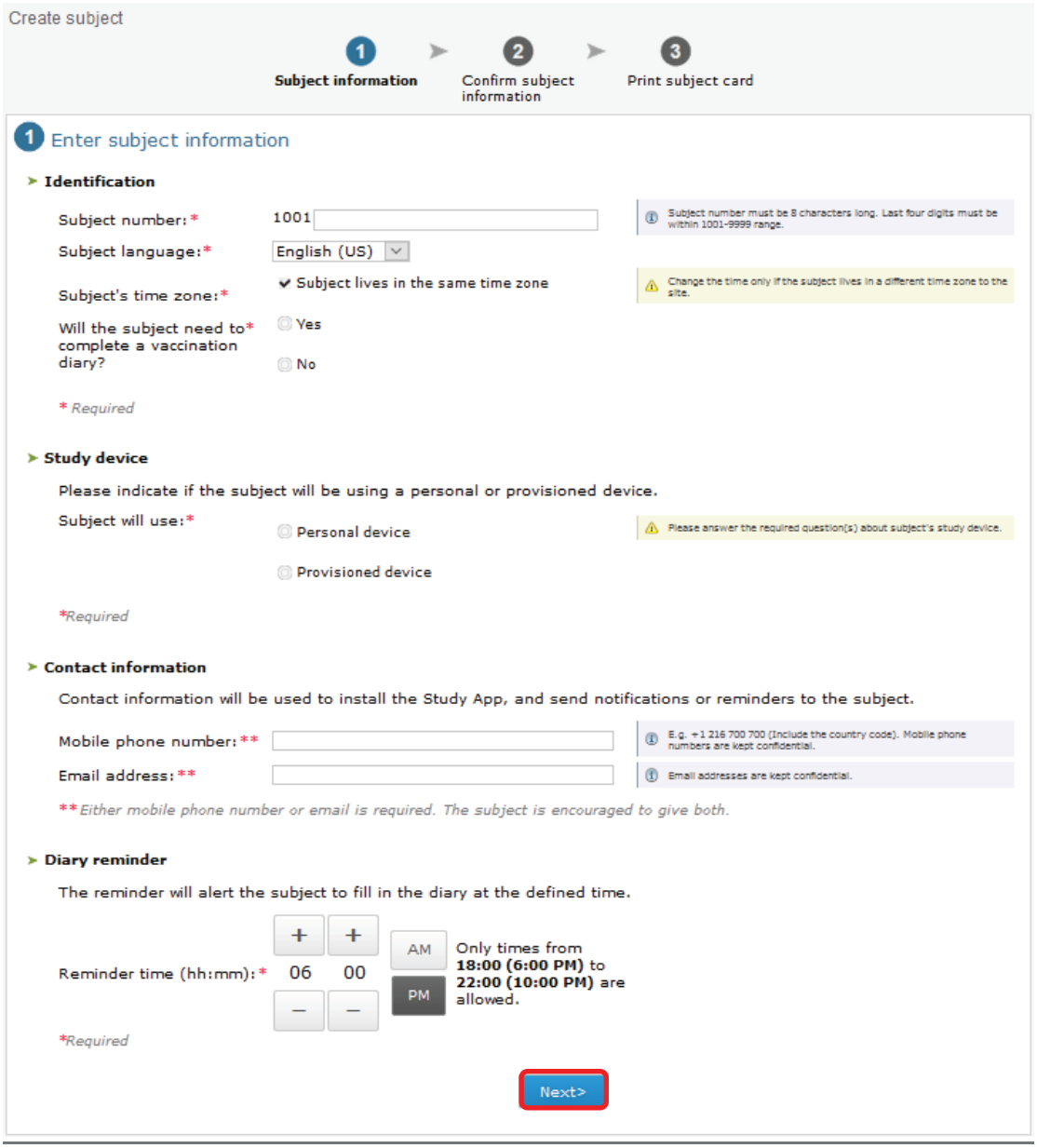
7 How to set up a participant in TrialManager

Participant setup must be performed by site staff through TrialManager for all participants. This must be done when the participant is at your site for their first study visit and not prior as it is a prerequisite for the participant to start entering data in the App. Login to TrialManager to begin.

Select 'Add new subject'



You will then be taken to a screen where you will need to enter the subject number and provide subject information; including their language, time zone, device type, contact information (for receiving activation details), and Diary reminder time.



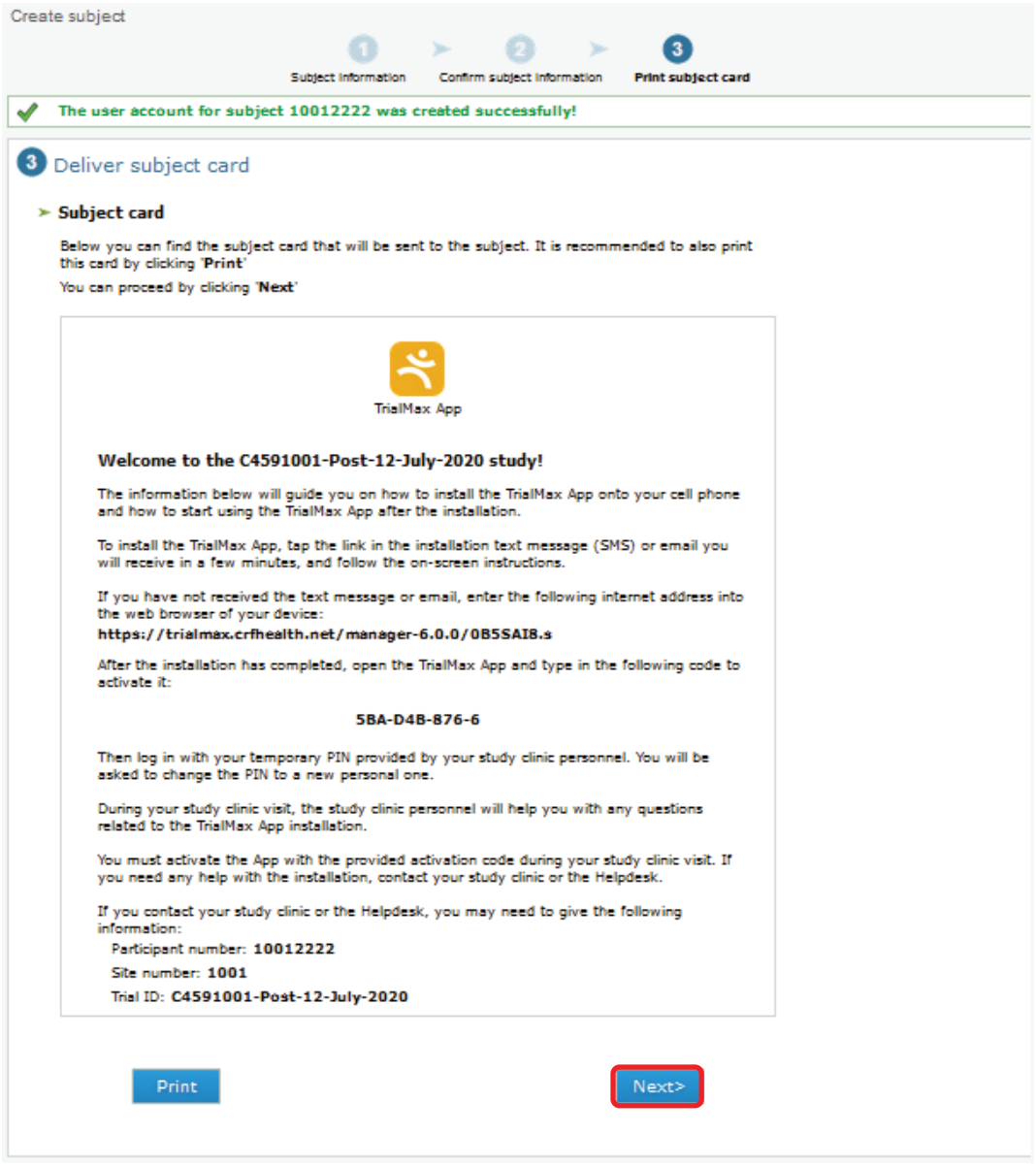
Select “Next” once all the required fields have been filled out.

Note: Mobile phone number and email address are used by the TrialMax system to send an activation code to participant. Therefore, it is important that this information is entered correctly. The participant should enter either their personal email address and/or mobile number to receive the activation code.

Next you will see a confirmation screen, where you will be able to review the participant contact information (mobile phone number and email address) you have entered. Carefully check the details and then select “Confirm”. This will lead you to another page confirming the other participant information that has been entered. Carefully check this information as well, then select “Confirm”.

You will then receive a message on screen that will confirm that the participant was created successfully. You will also see displayed a SubjectCard that is sent to the participant via email/SMS. This participant card contains their activation code and applicable instructions for getting set up with the App.

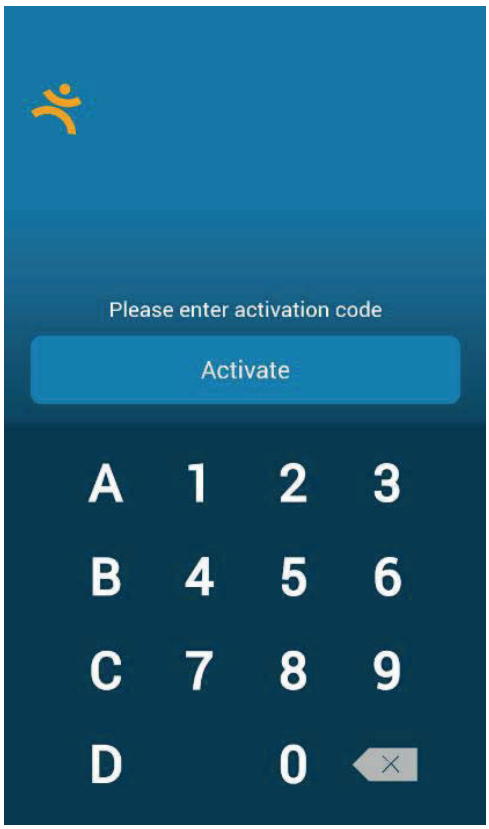
TrialManager will also display a copy of the participant’s card on screen and this should be printed if possible, to make it more convenient for the participant. **Be sure to write down the Activation Code displayed on screen and provide this to the participant.**



Press “Next” to conclude setup.

7.1 How to Activate the App

When the participant setup is complete and the participant receives their subjectt card with the welcome message and activation code, the participant should also be provided with a fully charged Motorola device (provisioned device) to use in the study.



The activation screen is the first screen presented when the provisioned device is turned on. Here, the participant will need to enter the activation code provided in the subject card/ SMS/email message.

Once the activation code has been entered appropriately, the participant will be taken to the login screen where they should enter the default PIN code '**1234**' to login for the first time.

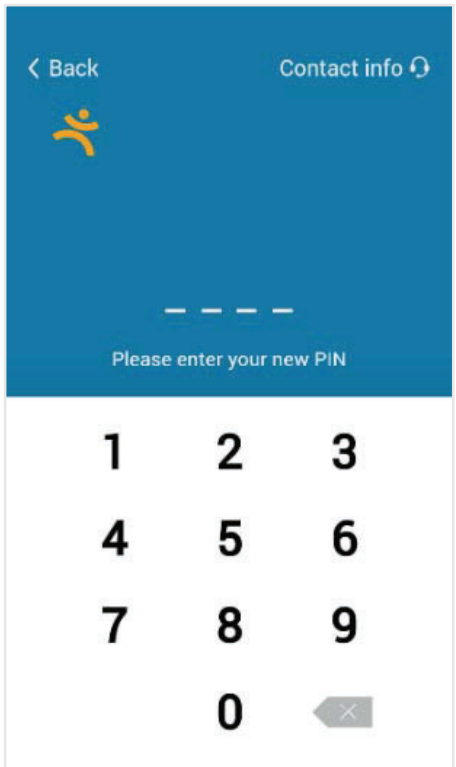
7.1.1 How to setup WiFi on the Provisioned Device

WiFi can be configured on the provisioned devices. To access the WiFi Settings on the provisioned device please follow these steps:

1. Press the 'home' button on the device.
2. Next, press the 'gear' symbol in the top right-hand corner of the screen.
3. Select 'WiFi settings' to display a list of available networks.
4. Select the appropriate network from the list and enter the password if required. *Once the connection is authenticated, the WiFi will connect.*
5. You can then return by clicking the 'home' button, and the App will automatically open.

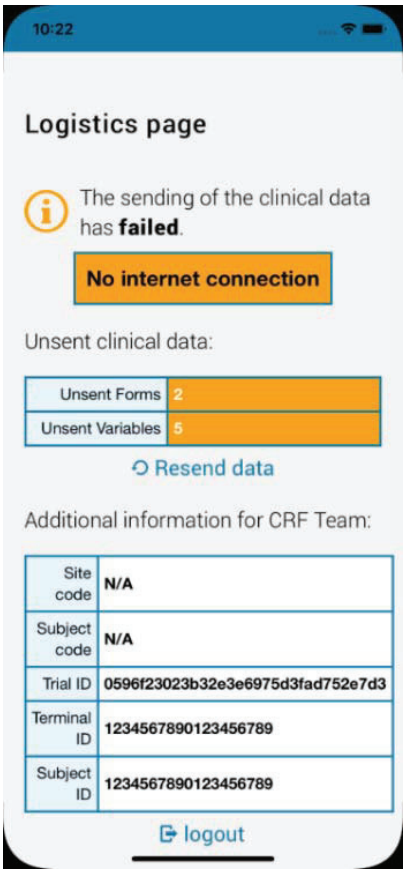
7.1.2 Instructions for reusing the Provisioned Device

The App supports the reuse of the Provisioned Devices, meaning that when one participant has finished using the device, it can be setup for a subsequent participant. To reuse the Provisioned Device for another participant, all unsent clinical data must first be sent to Signant Health.



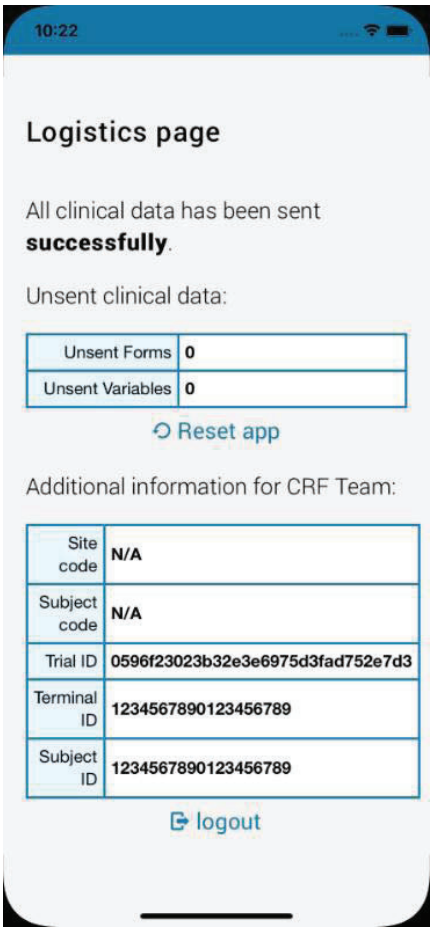
In order to do this, you will first need to login to the Logistics Page on the device.

- From the login screen, first enter the **'Special Code', 7777** to ready the device for the logistics pIN
- Then enter the **'Logistics PIN', 3311**
- Once both PINs have been entered in succession, you will be taken to the Logistics Page



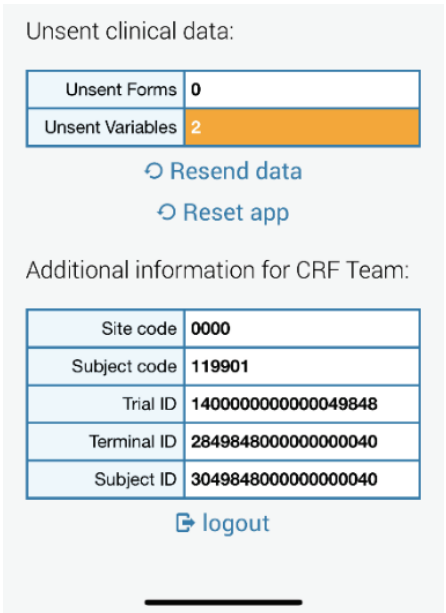
- From the Logistics Page, select 'Resend data' to send any unsent clinical data to Signant Health

The device cannot be reset until all clinical data has successfully been sent.

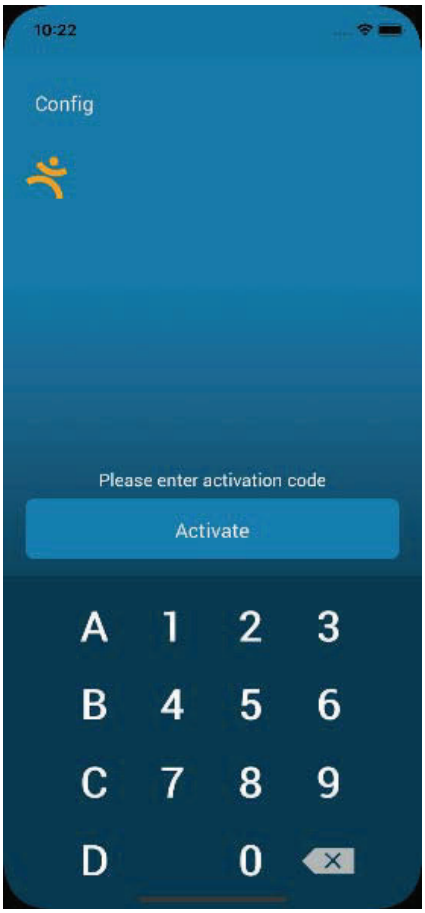


If there is no unsent data, or once all unsent data has successfully been sent, the 'Reset app' button will appear

Selecting 'Reset app Button will reset the App for the next participant



Note: if there are new unsent variables after the data send (due to protocol), but all Diary data has successfully been sent, then the App can still be reset



Selecting the 'Reset app' Button will reset the App; the App will do one more final data sync, then is reset and returns to pre-activated state, ready for another participant to be setup

7.2 Selecting a TrialMax App PIN

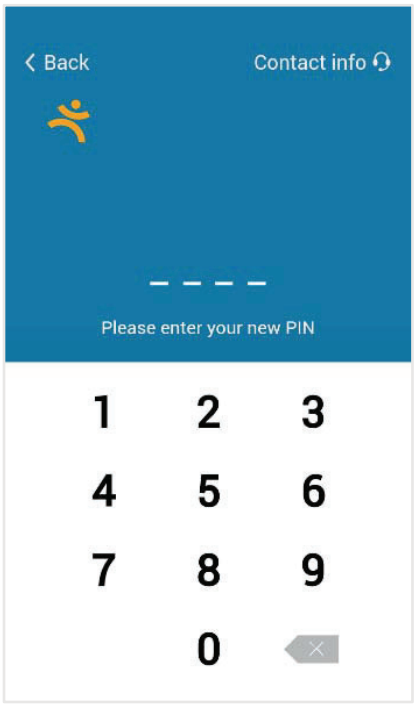
The TrialMax app has certain restrictions for PIN codes:

- Easily remembered by the user (ex: memorable date)
- It cannot be the same as the default PIN code
- It must be four digits
- It must not contain running numbers, e.g. 2345, 5678 will not be accepted
- It must not contain more than three consecutively repeated numbers, e.g. 1111, 2222 will not be accepted

The participant should not share their PIN code with anyone, not even with study staff. The new PIN code must remain confidential, with only the participant knowing the PIN code.

If a participant forgets their PIN code, they will need to contact the helpdesk who will be able to reset the PIN code.

7.3 Logging In & Setting Security Question



After the activation code is entered, the participant will be asked to log in to the App. The user will have to enter the default four-digit PIN code (**1234**) to access the App and will then be prompted to change their PIN to a unique 4-digit PIN.

The participant should not share his/her PIN code with anyone, not even with study staff. The new PIN code must remain confidential, with only the participant knowing the PIN code.

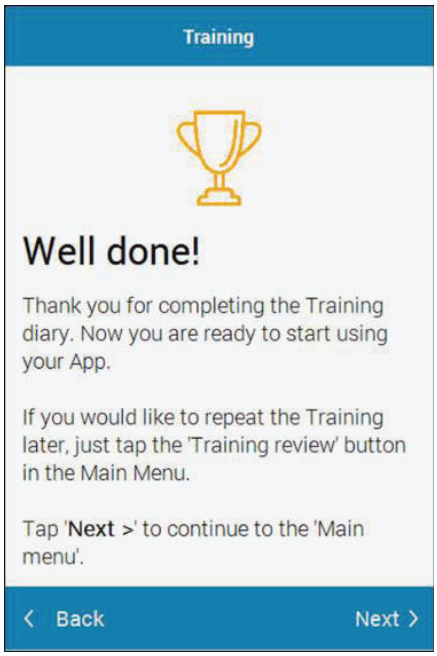
Once the participant has changed their PIN, they will be prompted to select and answer a security question which will assist the helpdesk in resetting their PIN code should they forget it during the study.

After PIN code change and security question selection is fully complete, the participant will be led straight into training on how to use the App.

7.4 Training on the TrialMax App

This initial, mandatory training is required to be completed before the participant can access any other portions of the App (including the Diary).

The training is brief and provides helpful information on App usage as well as a sampling of the types of questions they will encounter while using the App over the course of the study.



Once the participant has concluded the Training, they will receive this screen confirming their completion.

By tapping 'Next' the participant will then be directed to the main menu of the App where they will be able to complete their Diary and modify their settings.

***Please note** – any activities performed while logged into the App should be performed by the participant only. Site staff will not need to login to the App for any purposes.*

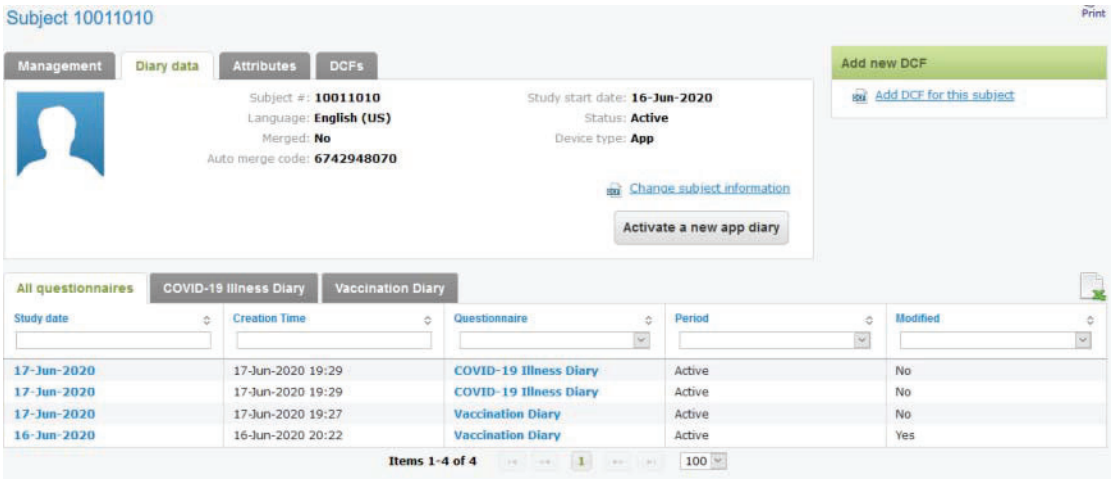
7.5 Software Updates

Site users/participants do not need to take any special action to perform a software update during the course of the study; any available update is automatically downloaded when the TrialMax App is opened and logged in. The login process may appear to take longer than usual when there is a software update, however a percentage will be displayed on the device indicating progress.

8 Managing Participants in TrialManager

8.1 Participant Card

Upon clicking on a participant number from the main page in TrialManager, the participant/subject's information card will display:



This will show details for the participant, including: language, participant status, study group, study start date, and the status of App installation.

Here is where you will activate a new App for a participant due to loss, theft, or change in provision device over the course of the study.

8.2 Activating a new App for an Existing Participant

This section will explain how the participant and site will handle activating new Apps for existing participants.

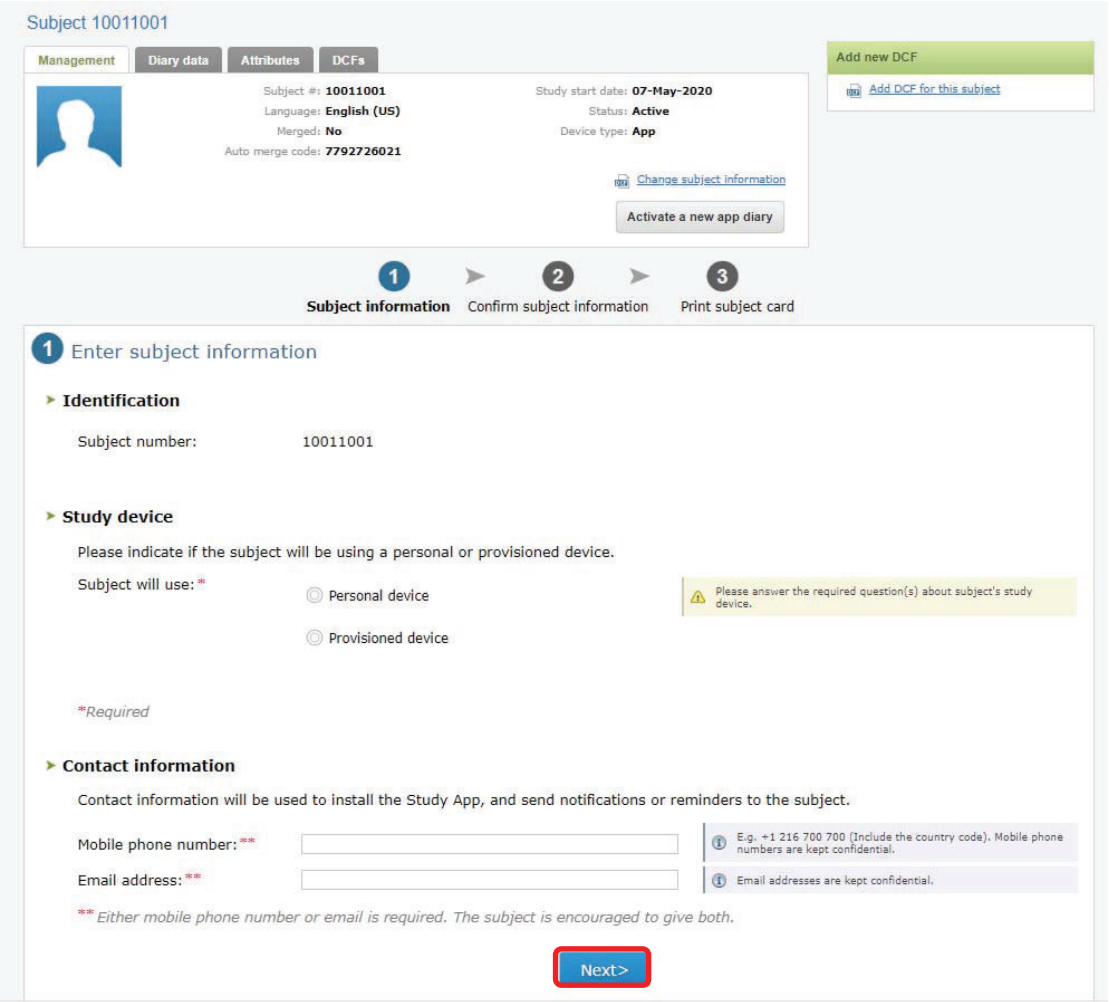
There are three instances in which a new App activation may be needed:

1) If the participant needs a new activation code due to broken device, loss or theft of device, changing device during the study, or
2) If the participant has not used their provided activation code within 72 hours which is the expiration limit. This should not occur since the participant is to activate the app as soon as possible at the visit, or
3) If the subject is switching between using their personal device and a provisioned device.

The steps to handle either of these situations are the same:

Login to TrialManager and select the appropriate participant. From the participant card screen, select the 'Activate a new app diary' button

You will be required to select the participant's mobile phone number and/or email address. Once entered, select 'Next'.



On the next page, make sure the entered information is correct, then select “Confirm”.

You will then receive a message on screen that will confirm that the participant was created successfully. You will also see displayed a Participant card that is sent to the participant via email/SMS (if provided). This Participant card contains their new activation code and applicable instructions for getting set up with the App. TrialManager will also display a copy of the card which can be printed to make it more convenient for the participant.

Press ‘Exit’ to return to your site in TrialManager.

TrialMax App

Welcome to the C4591001-Post-12-July-2020 study!

The information below will guide you on how to install the TrialMax App onto your cell phone and how to start using the TrialMax App after the installation.

To install the TrialMax App, tap the link in the installation text message (SMS) or email you will receive in a few minutes, and follow the on-screen instructions.

If you have not received the text message or email, enter the following internet address into the web browser of your device:
https://trialmax.crfhealth.net/manager-6.0.0/0B5SAI8.s

After the installation has completed, open the TrialMax App and type in the following code to activate it:

5BA-D4B-876-6

Then log in with your temporary PIN provided by your study clinic personnel. You will be asked to change the PIN to a new personal one.

During your study clinic visit, the study clinic personnel will help you with any questions related to the TrialMax App installation.

You must activate the App with the provided activation code during your study clinic visit. If you need any help with the installation, contact your study clinic or the Helpdesk.

If you contact your study clinic or the Helpdesk, you may need to give the following information:

Participant number: **10012222**

Site number: **1001**

Trial ID: **C4591001-Post-12-July-2020**

The participant should then follow the appropriate steps to install and/or activate their App as outlined in the **Participant Setup** section of this guide.

8.3 Management tab

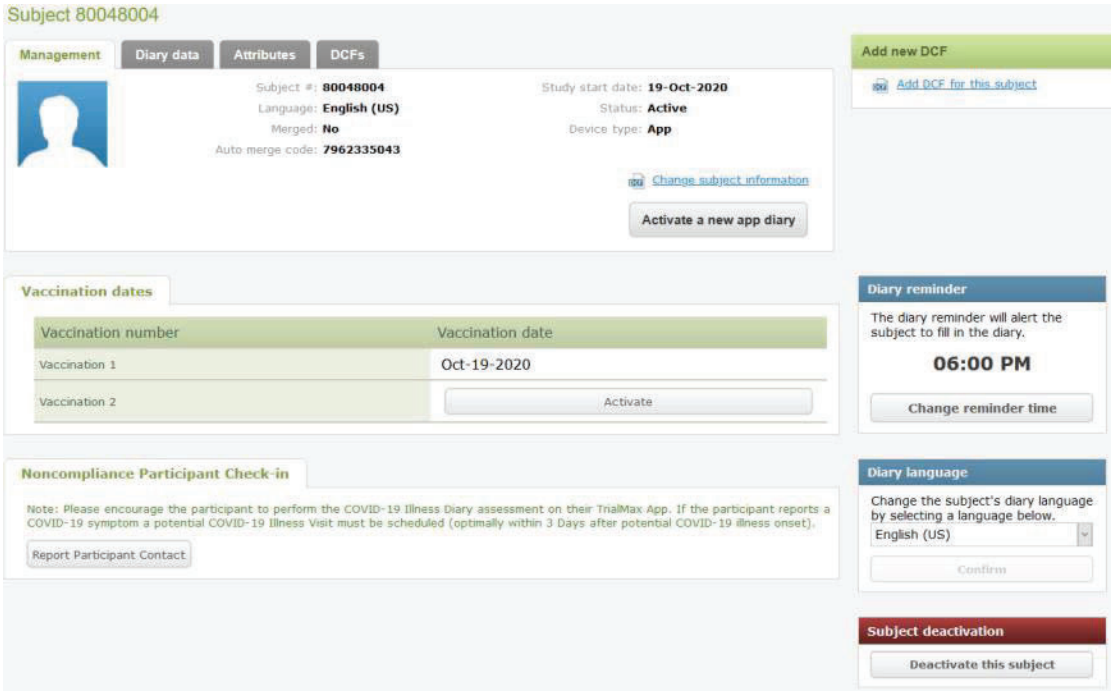
Upon clicking on a participant number from the main page in TrialManager, the participant's information card will display. Clicking on the button titled 'Management' will bring you to a page displaying several options/settings for that participant. Here you can log vaccination dates, update Diary reminder times, change participant language for the App, add or update participant information, and

deactivate a participant from the study. Details for each activity are provided in the following sections.

8.3.1 Activating a New Vaccination

When a participant comes in for the first vaccination the participant needs to be set up on TrialManager. The vaccination is automatically activated on the day of a new participant set up, for instance, in the example below, the participant was set up on TrialManager, and vaccinated on 02-Apr-2020.

****If their vaccination date is not set in TrialManager before they leave the site office, they will NOT be able to complete their Diary. Please be sure this is done before they leave.****

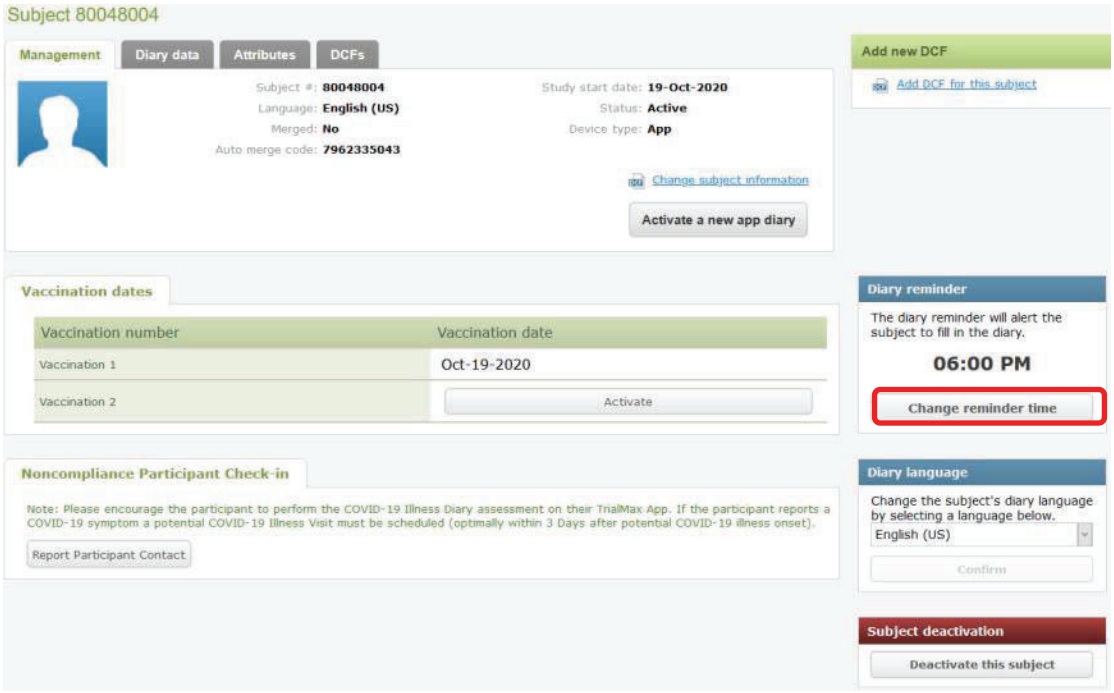


To activate subsequent diaries, click 'Activate' next to the appropriate visit. You will then be asked to select the date of the next vaccination. In the example above, Vaccination 2 still requires activation.

8.3.2 Changing Diary Reminder Time

Site staff have the ability to adjust the time that reminder notifications will be sent to participants to complete their Diary each day (during the post-vaccination periods). This can be modified by accessing the 'Management' tab in TrialManager for the particular participant.

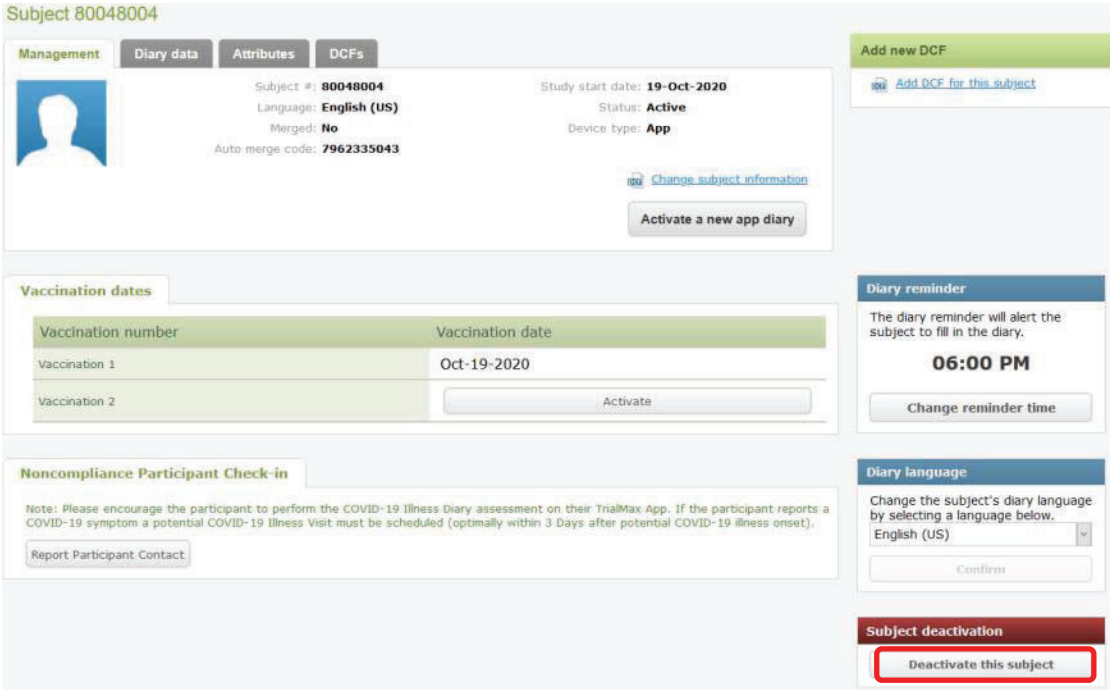
Additionally, participants may change this on their own by logging into the App and selecting 'Information and Settings' from the main menu screen. This will lead them to several options including 'Diary Reminder' which will allow them to adjust the time. The permitted window for reminders to be sent is between 6:00pm and 10:00pm in 15-minute increments.



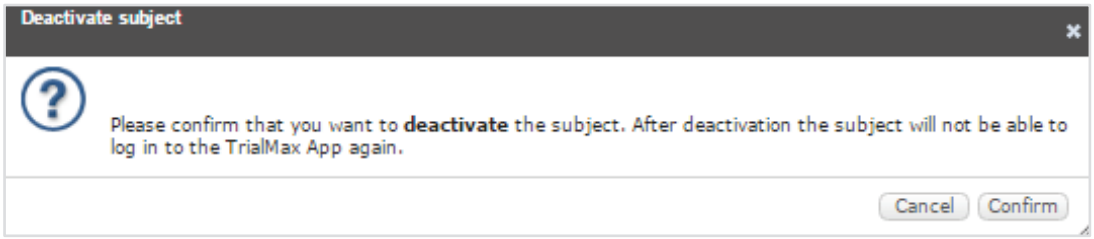
8.4 Deactivating a Participant from the Study

Whether the participant needs to be terminated early or has reached end of study, the participant must be deactivated by the site in TrialManager so that they can no longer login to the App and record study data.

This can be handled by accessing the 'Management' tab in TrialManager for the particular participant. Selecting 'Deactivate this participant' at the very bottom of the page (red header) will deactivate the participant and prevent further login to the App.



Upon clicking this button, you will be asked to confirm this is the desired action:

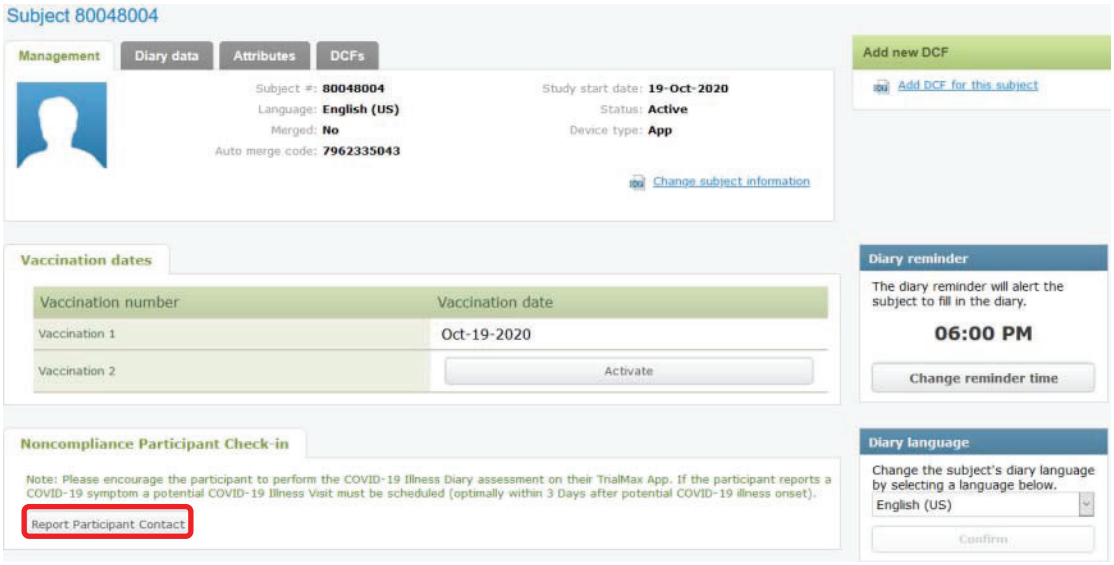


Selecting “Confirm” will successfully deactivate the participant while clicking “Cancel” will return you to the management tab for that participant.

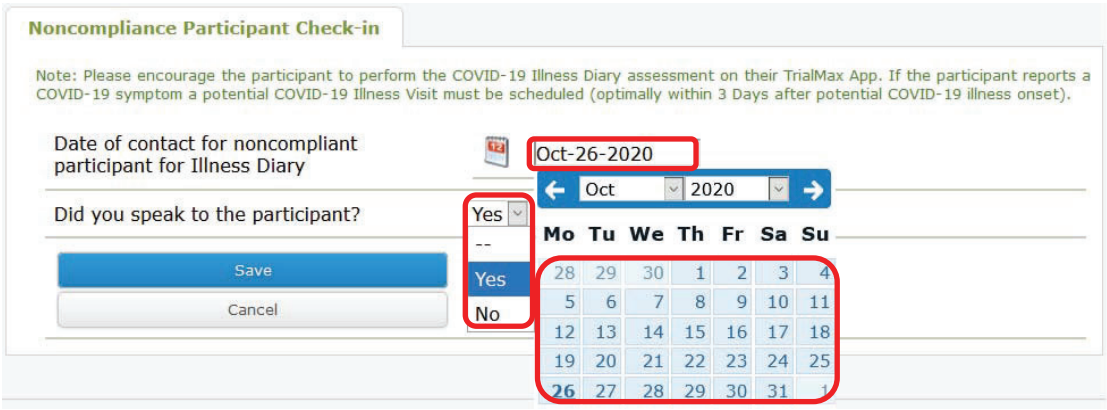
Once deactivated, participants will no longer display on the ‘Active Participants’ tab in your main page of TrialManager. There is a separate tab titled ‘Deactivated Subjects’ that will list any participants who have been deactivated.

8.5 Non-compliance Participant Check-in

Attempts to contact non-compliant participants can be logged in TrialManager. Access the ‘Management’ tab for the particular participant, and select ‘Report Participant Contact’.



Enter the date of contact by clicking into the empty box next to the icon and selecting a date from the calendar, pick from the dropdown whether you spoke with the participant (Yes/No), and then click ‘Save’.



The attempted contact will now be logged under the 'Report Participant Contact' tab of the 'Diary data' section of the subject page.

8.6 Participant Travel

All provisioned devices will update the time zone automatically if the participant travels between different time zones.

9 How to Request Additional Supplies

If a Site requires device re-supply (for example more provisioned devices than initially allocated in their first shipment), they can request it via the Helpdesk (see Helpdesk phone number in Helpdesk Operating Hours). The request must be approved by the Pfizer/ICON Study Team, as all initial site allocations are predetermined.

IMPORTANT NOTE: Remember that provisioned devices can be reused after one participant has finished using the device.

Once approved, it will take 5 business days to prepare any additional shipments. These will be shipped with standard delivery service.

Replacement device requests (for example for devices that are lost or broken during use) should be requested via the Helpdesk. A return shipment label will be provided, along with a Faulty Device Return form to indicate why a replacement is needed.

10 How to return the provisioned devices

At the end of the study ALL devices must be returned to Signant Health.

When returning devices to Signant Health, UPS will need to pick them up. If the site does not have a regular pickup, they will have to call their local UPS office for a pickup. The UPS number is different in each country. The UPS driver can bring a manual waybill to the site if they do not have one. Please see Appendix A for US Logistics device returns instructions.

If you need to return a faulty device to Signant Health, make sure to include a completed Faulty Device Return Form (refer to Signant Health Helpdesk for a form) with the return. Only devices with a Faulty Device Return Form included will be investigated for any unsent data.

11 Frequently Asked Questions

Q: Where can I get more help?

A: Please contact the Signant Health Helpdesk. The Helpdesk is available 24/7 via the phone number provided at the beginning of this guide or on the participant's Quick Reference Guide or Device Label. Please make sure to provide as much information as you can about the problem. For any protocol or health-related questions, please contact your study monitor.

Q: How often should the provisioned device be charged?

A: Please be sure to leave the provisioned device plugged into the charger when not in use to keep it fully charged.

Q: What do I do if my provisioned device does not switch on?

A: Charge the provisioned device for two (2) hours. After charging, turn the device on. If the home screen with message and App icons does not appear, call the Helpdesk.

Q: A participant forgot their PIN code and cannot use their provisioned device. How can the PIN code be retrieved?

A: The participant's PIN code can be retrieved. The participant should call the helpdesk who will retrieve their original PIN code.

Q: How will the participant know how to send data?

A: The App will do it automatically, as long as the device is online. The App will send data each time the participant logs in, and also when saving study answers.

Q: A participant forgot to complete their Diary on one day. Can that be added later on?

A: No. Data cannot be entered retrospectively. However, the participant can update their symptoms – both experience and severity within the same day.

Q: What should be done if the device is unable to send data?

A: As soon as the participant logs into the App, unsent data will be sent immediately once a connection is established. If the participant cannot seem to access a connection, please remind them that all data will be saved and automatically sent the next time they use the device online. If they continue to have issues with data sending, please contact helpdesk.

Q: Is the participant able to change the time and/or settings on a provisioned device?

A: The provisioned device is locked to only enable usage of the App and WiFi setup. The participant cannot change the time or make any other changes to the settings. Also, the device uses the network-provided date and time, so if the participant travels to a different time zone or there are changes in daylight savings, the time will automatically be updated.

Q: Can the participant send data while away on vacation in another country or region?

A: Yes, as long as they can connect to a network. Because of time zone differences, the time of entry may appear different.

Q: What happens if the participant forgets to log out of the App?

A: If the participant does not log out of the App, the App will automatically log the participant out. Please note that any unsaved answers will be deleted from the App at that time.

Q: Will the Helpdesk answer questions related to the Diary itself?

A: The Helpdesk can provide answers on how the Diary functions, but for any vaccine or study-related questions, the participant needs to contact the site.

Q: The participant does not understand the questions. What should I do?

A: If the participant does not understand the questions in the TrialMax App, you may have to explain what is being asked. The Helpdesk cannot answer any health-related questions. For further assistance with the questions, please contact your study monitor.

12 APPENDIX A: US LOGISTICS DEVICE RETURNS

US Logistics Device Returns

- When returning devices to Signant Health, UPS will need to pick them up.
- If the site does not have a regular pickup, they will have to call their local UPS office for a pickup. The number is different in each country.
- When calling for a pickup, the site will need to provide the **CRF Health (note CRF not Signant due to how account is set up with UPS) UPS account number 37V198 and postal code 19462** for the pickup charge to be billed on CRF Health(Signant Health)'s account. Sites with regular pickups will not have any issues with pickup charge.
- For returns from USA based sites can request their own return airway bill, quickly and easily. Using this portal sites will be able to choose a pick-up time which best suits their needs The site address is:

  https://row.ups.com/Ship/Ship/StandardShipGuest
- The UPS driver can bring a manual waybill to the site if they do not have one. Please complete the UPS Manual Waybill using the instructions below.
- For returns from outside of the USA or where a commercial invoice is required please email us-logistics@crfhealth.com please include all the information below and a UPS waybill will be emailed back to you.
  - Protocol Number/CRF Project code:
  - Name of sender:
  - Email address of person to be emailed the labels:
  - Contact number for sender:
  - Site Number:
  - Full Site Address:
  - How many electronic devices are being returned:
  - How many boxes will be used for the return of the devices:

13 APPENDIX B: UK LOGISTICS DEVICE RETURNS

UK Logistics Device Returns

- When returning devices to Signant Health, UPS will need to pick them up.
- If the site does not have a regular pickup, they will have to call their local UPS office for a pickup. The number is different in each country.
- When calling for a pickup, the site will need to provide the **CRF Inc Ltd (note CRF not Signant due to how account is set up with UPS) UPS account number 1F07X9 and postal code CT13 9FG** for the pickup charge to be billed on CRF Inc Ldt (Signant) account. Sites with regular pickups will not have any issues with pickup charge.
- For returns from Europe sites can request their own return airway bill, quickly and easily. Using this portal sites will be able to choose a pick-up time which best suits their needs The site address is:

  https://SignantHealth.com/RAWB
- For returns from outside of Europe or where a commercial invoice is required please email uklogistics@signanthealth.com please include all the information below and a UPS waybill will be emailed back to you.
  - Protocol Number/CRF Project code:
  - Name of sender:
  - Email address of person to be emailed the labels:
  - Contact number for sender:
  - Site Number:
  - Full Site Address:
  - How many electronic devices are being returned:
  - How many boxes will be used for the return of the devices:

C4591001

TrialMax App™, TrialManager®
Site User Guide

Document index: A-1426-0082-5150UG
Document version: 4
Template version: 12
01JUN2020

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IMPORTANT POINTS

- Keep devices charged at all times – when stored at site, please ensure the device(s) are charged at least once per week, even if not in use. If the device battery runs flat, it might have an incorrect date and time when it is turned back on again. If this happens, send data from the device and it will sync to your current time zone.
- Data will send automatically each time the participant logs into the App as long as the device is charged, in an area where there is mobile phone service or Wi-Fi is available.
- Participants should bring their assigned device with the App to each clinic visit.
- Participant setup should occur on the day of vaccination, whilst the participant is at the study clinic.
- Each participant will be able to set their own PIN code when they first log in to the TrialMax device. Please recommend to them to select the same code for each device as it will be easier for them to remember.
- When setting up a participant for the study, make sure this is done on a computer with a printer, as you will need to print the activation information for the participant. You will only have the opportunity to print this once; however, it will also be emailed to the participant if their email address is provided during setup or sent via a text message if a mobile phone number is provided during setup.
- To receive SMS notifications in the US, please refer to 'Setting up SMS notifications' section for more details.
- Use the TrialManager web portal to regularly monitor participant data for the study.

- It is recommended to leave 0.5GB of free storage space on the participant's personal device to allow the TrialMax app to function properly. Please provide a provisioned device to the participant in the event the participant does not have the free space or does not want to make that space available. The participant may check their available storage below:
    - iPhone: Select 'Settings'->'General'->'iPhone Storage'
    - Android: Select 'Settings' ->'Device Care'->'Storage'
- If you cannot find help in this guide, then please call the Helpdesk.

Role	PIN Code
Default Participant	1234
Logistics Access PIN Code	8888
Logistics PIN Code	4422

TrialManager Website URL
http://trialmax.crfhealth.net/c4591001
TrialManager login details will be sent to you via email

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1 Signant Health Overview

Signant Health is the provider of the eCOA (electronic Clinical Outcome Assessment) system for this study. The eCOA system comprises the components as displayed below, along with 24/7 Helpdesk support. TrialMax App is the brand name, but we will refer to it simply as the “App”.

Data entered by Participant into the App

Data sent from App to Signant Health servers

Data available for sites, monitors and study team in web portal and TrialManager

TRIALMAX app

TRIALMANAGER®

2 Helpdesk

You may call the Helpdesk for any issue related to the TrialMax App, or TrialManager website.

Please have the following information ready when you call:

- The study protocol number: **C4591001**
- Helpdesk Priority PIN: **19**
- Signant Health project code: **A-1426-0082**
- Your site number
- The participant number (if applicable)
- The specific problem

2.1 Helpdesk Operating Hours

The Helpdesk is available 24 hours a day, 365 days a year.

If you are unable to reach an agent when you call, you can also leave a voicemail or send an email giving your contact information. The Helpdesk will contact you as soon as possible, at the latest by next business day.

2.2 Helpdesk Telephone Numbers

Country	Number
USA	(1) 866 402 1154
Helpdesk Priority Code	19

Note: Toll Free numbers are free from a landline; however local operator charges might be applied if calling from a mobile phone.

2.3 Helpdesk Email Address

For non-urgent issues, you can contact the Helpdesk by email:

C4591001_TM@support.signanthealth.com

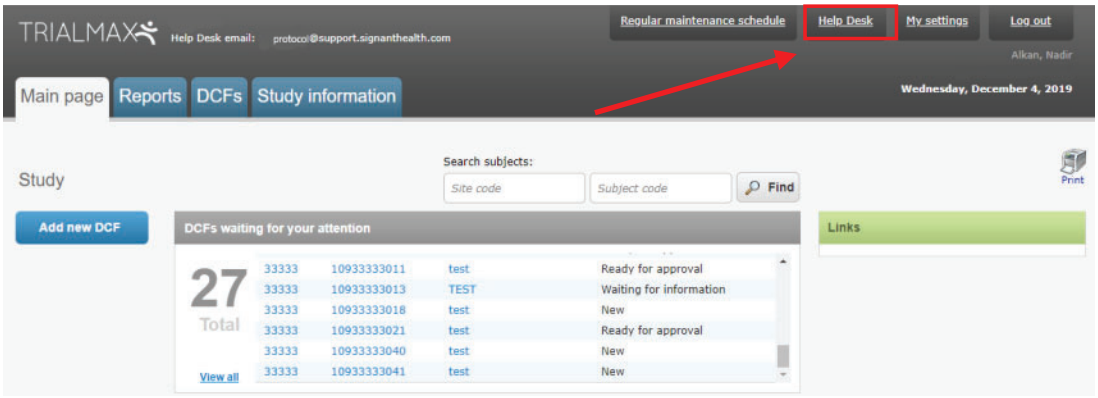
Note: Do not share this email address with participant. The participant's identity might be unintentionally revealed during communication via email.

Helpdesk Web Chat via TrialManager

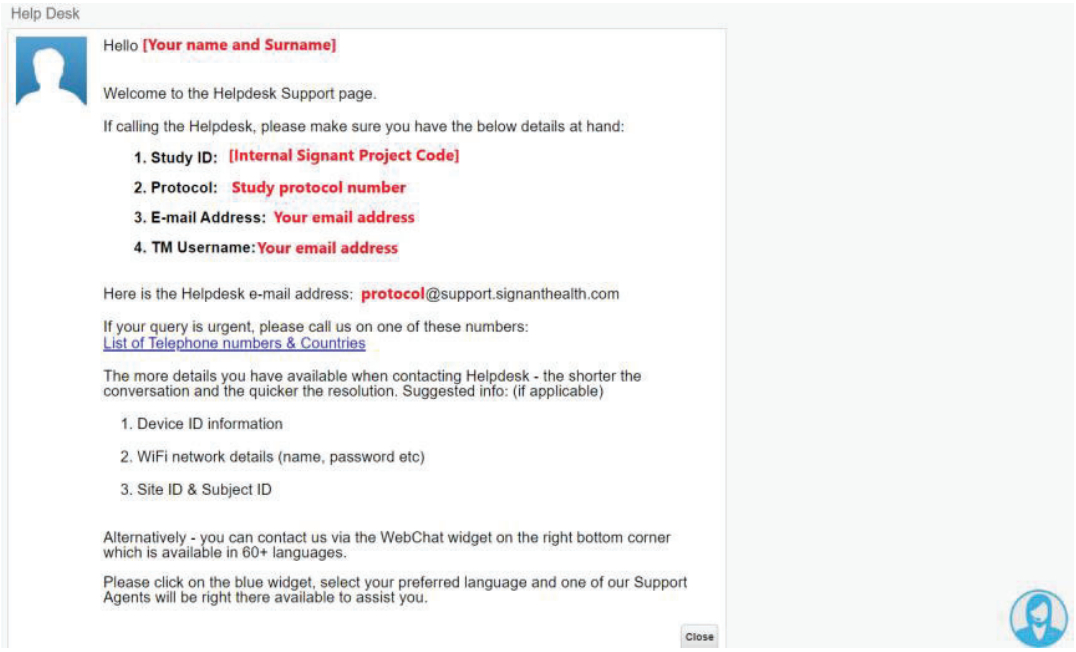
The Helpdesk Web-chat is available via the TrialManager Portal.

Helpdesk Web-chat can be accessed via the steps below:

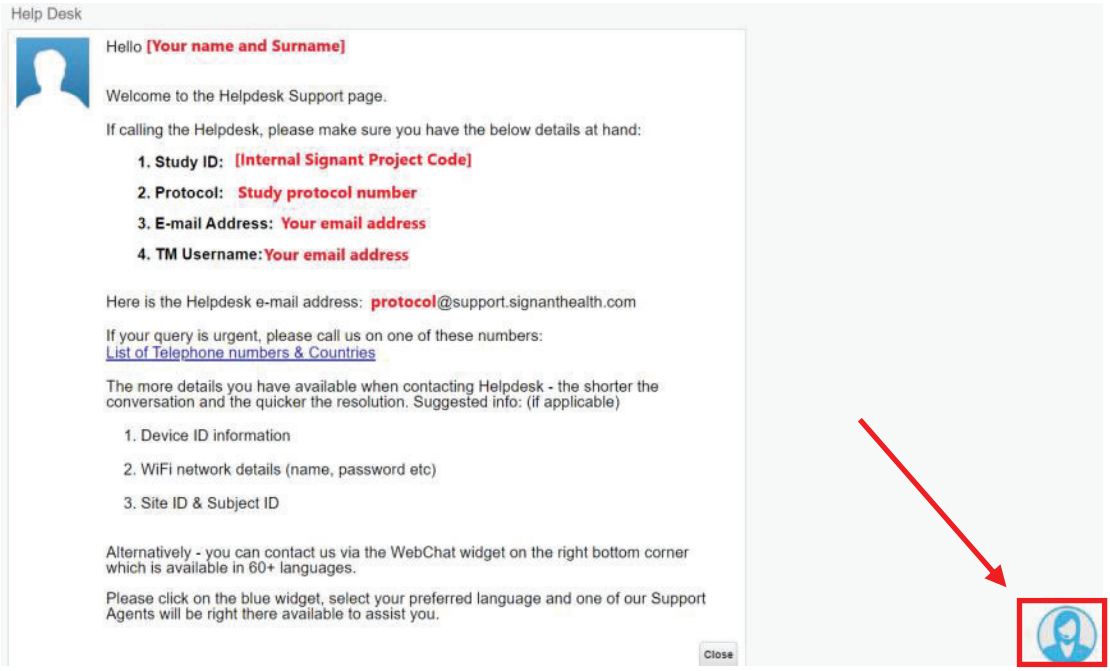
1) Please click the Help Desk button in the upper right corner of your screen.



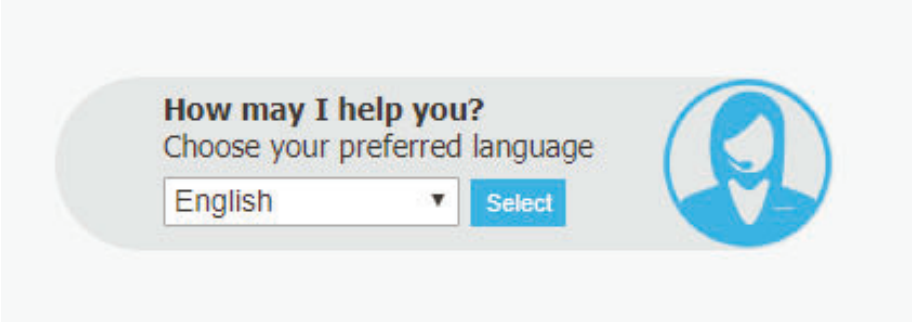
2) You will see a welcome page where all the texts highlighted in red will be pre-filled.

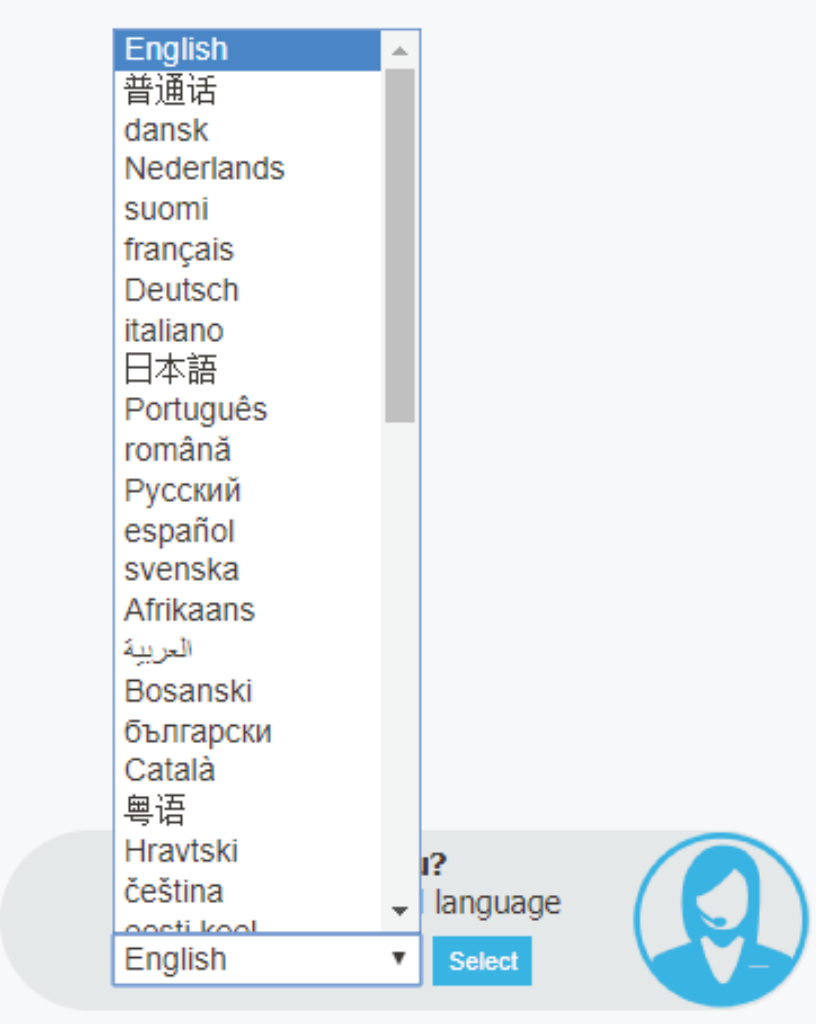


3) You can open the web-chat, available in 60+ languages, by clicking the blue widget in the lower left corner of the screen to start your live chat with one of our Support Agents.

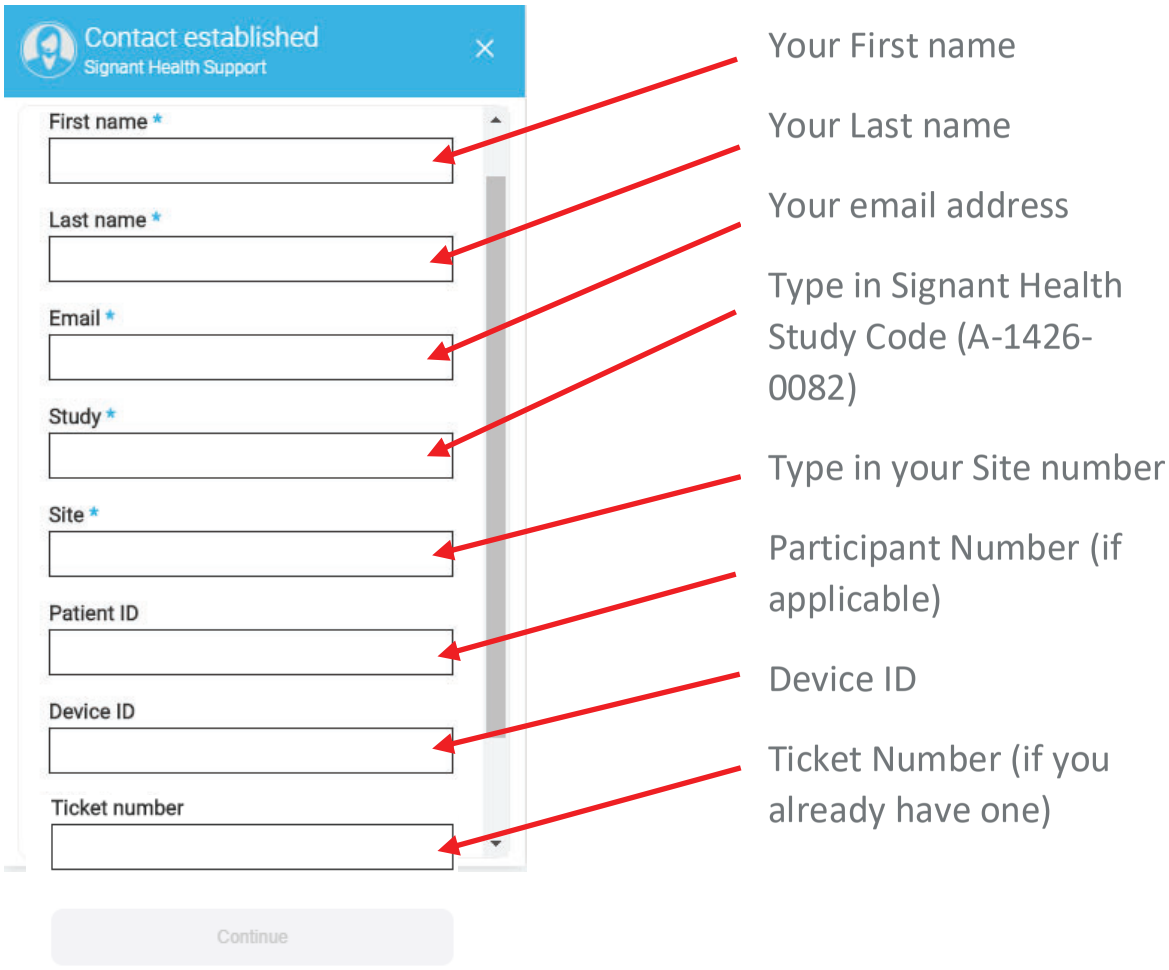


4) Once you click on this widget, you will be able to select your preferred language from the drop-down menu.





5) After selecting your language, you will need to complete the necessary information in the below screen and click the Continue button, then you will be connected to the next available support agent.



Fields with an asterisk (*) are required.

Once you click on "Continue", you will be connected to the Signant Health Helpdesk specialist, who will discuss your issue with you.

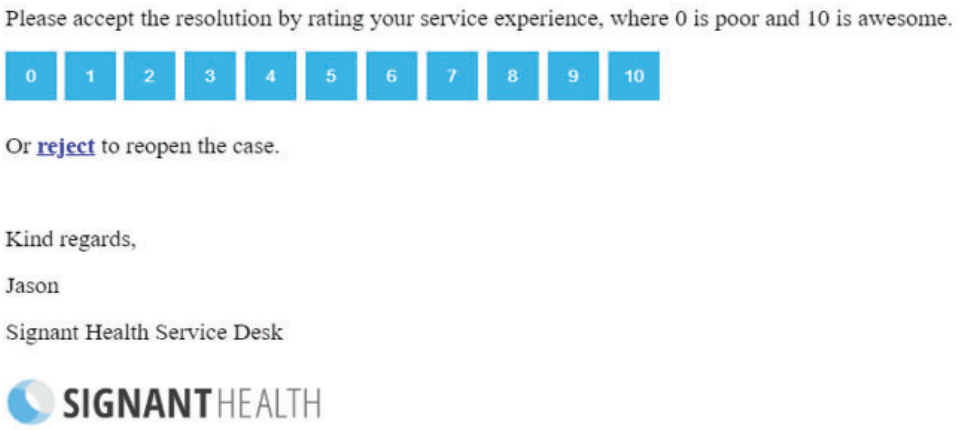
Please note that if a telephone call has already been placed make sure that you enter the Ticket Number you received from your telephone call into the web chat the ensure the background information is linked. If the ticket number is not entered, it will be counted as 2 separate calls.

Providing feedback about Helpdesk performance

Each time you request support from the Helpdesk, you can rate the level of your satisfaction from the provided service. This is important, as it helps us continuously improve to exceed your expectations.

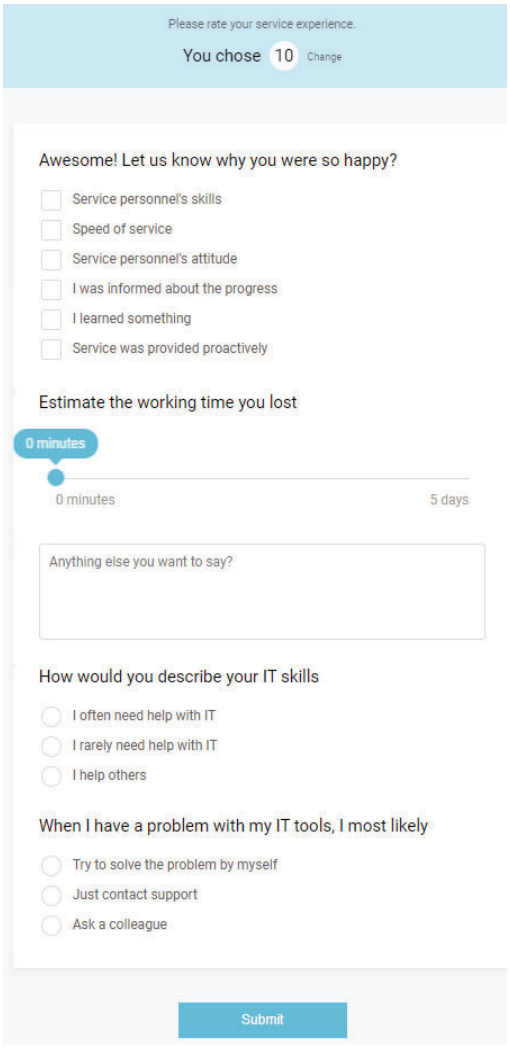
You can provide the feedback in 2 ways:

- Each time you have spoken to the Helpdesk on the phone you can remain on the line and rate your experience on the scale 0 to 5, where 5 is awesome and 0 poor.
- When your request has been completed, you will receive an email, enabling you to evaluate the service or reject the resolution of the incident.

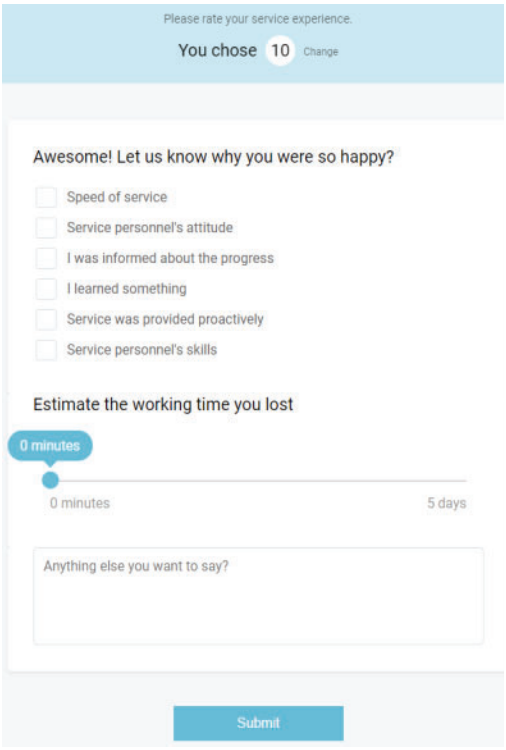


To provide feedback, you would click one of the numbered boxes (0-10), where 0 means poor and 10 awesome. Selecting any rating will take you to a form, where additional information can be provided. The form is a bit longer when you use it the first time and will be shorter with every further use (IT profile information needs only to be provided once).

Evaluation form 1st use

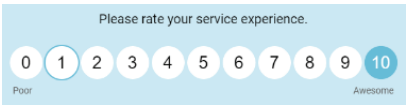


Evaluation form consecutive uses



Please remember that only 9 and 10 mean positive feedback, 7-8 average, 6 and below means negative feedback.

You can change your rating on the top of the form any time before submitting it.



3 Equipment

3.1 Supplies for participant

Provisioned device supplies -

- Samsung device with TrialMax App installed (if not using personal iOS or Android device), accompanied by an incorporated SD memory card (this backs up the data for recovery if needed) and a SIM card installed for mobile data sending.
- A device charger (power-cord and charging brick)
- TrialMax App sticker with country specific Helpdesk number
- Quick Reference Guide in the participant's language
- App Activation Guide in the participant's language
  Participant card with App activation details to be sent via email or SMS

Bring Your Own Device supplies -

- TrialMax App sticker with country specific Helpdesk number
- Quick Reference Guide in the participant's language
- App Activation Guide in the participant's language
- Participant card with App activation details to be sent via email or SMS

3.2 Provisioned Device Basics

Each TrialMax App device has a sticker applied to it that contains the country specific Helpdesk phone number.

Please contact the Signant Health Helpdesk if a device is not working properly. The Helpdesk agents will assist you or the participant with technical questions.

3.3 How to turn on the Provisioned device

Press the power button on the side

The Samsung device is the provisioned device for this study.

Turn the Device on by pressing the power button on the right side of the device.

If the Device is left on for ten (10) minutes without use, it will hibernate and perform automatic log out.

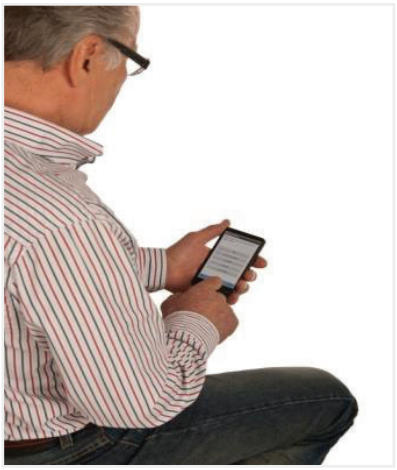
3.4 How to charge the Provisioned Device

The device has a rechargeable battery. Please remember to instruct the participant to **charge the battery <u>every day</u>.** If the device prompts the participant with a message that the battery is low, they should charge the device immediately. When the device is powered on it will display a battery status symbol on the top right side of the screen that indicates the amount of charge remaining in the device.

The participant can use the device while it is being charged but if discharged fully, it may take a little time to charge before use.

Connect the power charger cable to the provisioned device.
The device will usually fully charge in approximately 2 hours.

3.5 Device Navigation



Use your finger to navigate through the device.

Please do not use a stylus or sharp points as these will not function on the device and will damage the screen.

3.6 Additional Site Supplies

- This Manual
- Quick Reference Guide for the participant and TrialMax App device sticker
- App Activation Guide

4 TrialManager

TrialManager is an online, internet-based application used by investigators, coordinators, monitors and study personnel to view and monitor study progress. TrialManager enables the users to follow overall participant compliance and view the participant's Daily Diary data.

TrialManager supports the following Internet browsers:

- Firefox 33 and up
- Internet Explorer 11 and up
- Chrome 32 and up
- Apple Safari v9 and up

4.1 Functions of TrialManager

After answering the questions on the electronic device, the participant will need to send their answers to the study database (TrialManager). Within minutes of sending data, you can view the data (and reports of the data) sent.

By using TrialManager, you can:

- View the participant's Daily Diary answers
- Monitor participant compliance and other reports
- Monitor the number of days since the participant has last completed their Daily Diary
- Raise Data Clarification Forms (DCFs) and monitor their progression through to closure
- View data audit trails for questionnaire entries (including changes to forms)
- Deactivate the participant

Note: You should be logging in to TrialManager only with your own login details (which will be sent to your email). Do not share your password with your colleagues. It is also important to note that while the term "Participant" is used to describe the patient in this study, you will see the terms "Subjects" and "Participants" used interchangeably throughout the App and TrialManager platforms.

4.2 Accessing the TrialManager website

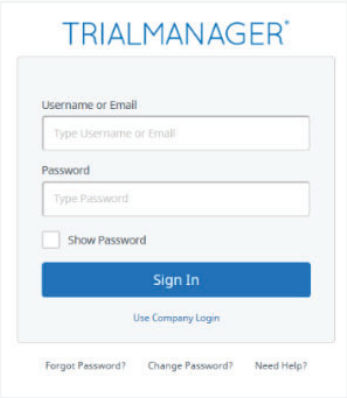
All people will have separate access based on their role within the study.

Your TrialManager username and initial password will be emailed to you. You will be prompted to change this password at your first login (see How to change your TrialManager password for more information). Your TrialManager password has no relation to the Site personnel PIN codes on the TrialMax App.

Note: If you have access to TrialManager for another Clinical Study, then you will be able to use the same Username and Password for each TrialManager. Please note that this feature is only available for the studies that started after September 1st, 2019. If you have a TrialManager account for older studies, you will not be able to use the same Username and Password for each TrialManager unless you change them manually to match with the rest of your credentials.

Type the following address into your web browser:

http://trialmax.crfhealth.net/c4591001



A login window will open. Bookmark this address for easy future access. Next, enter the username and password that was emailed to you.

4.2.1 How to change your TrialManager password

If you need to change your password, select 'My settings' in the top right-hand corner of the screen or "Change Password" from the Login Screen. There you will find an option to change your password.

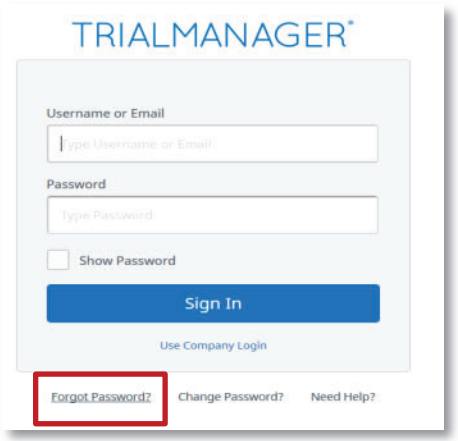
When you decide to change your password, you will be asked to type in your current password, your new password, and verify your new password by typing it in again. Click the 'Change' button to activate your new password.

Rules for creating new password:

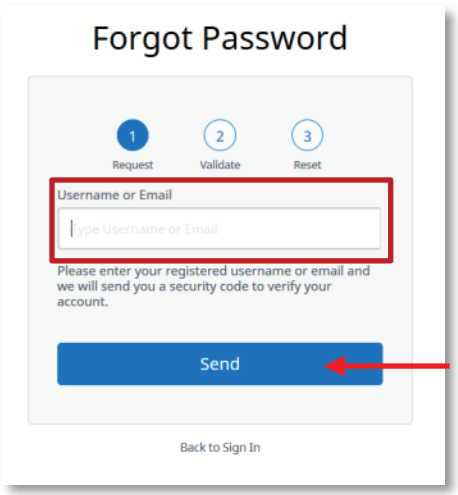
- Must be at least 8 characters.
- Must contain at least one lower case character.
- Must contain at least one upper case character.
- Must contain at least one number.
- Must not contain Unicode characters.
- Special characters in password are not necessary.
- Must not contain spaces, line breaks or new lines.

4.2.2 How to Reset your TrialManager Password

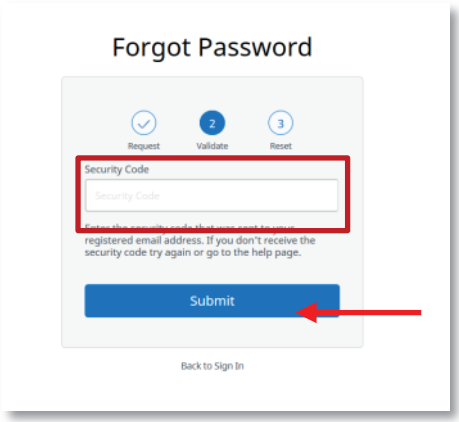
If you have forgotten your password to your TrialManager Account, you are able to reset the password directly within the TrialManager Portal.



From the log in page, select "Forgot Password"



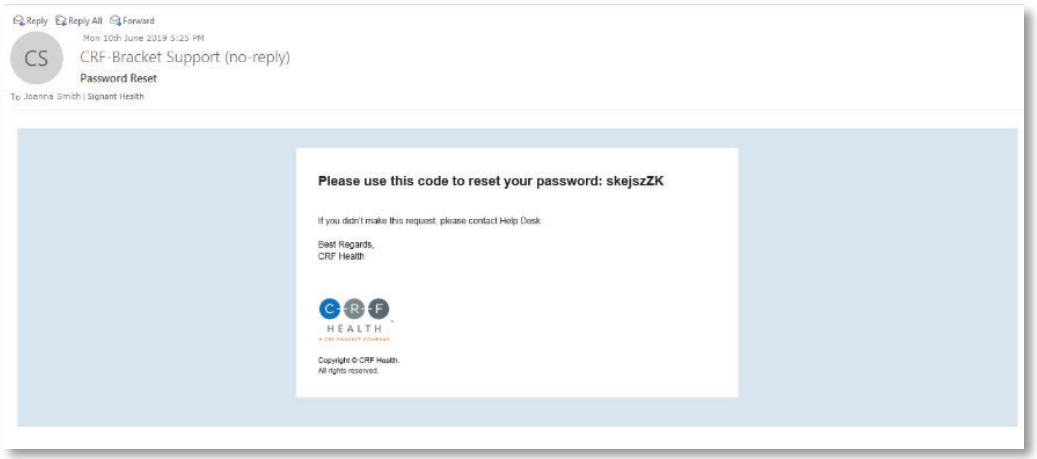
You will be asked to enter your email address so that the system can send you a security code for the password reset

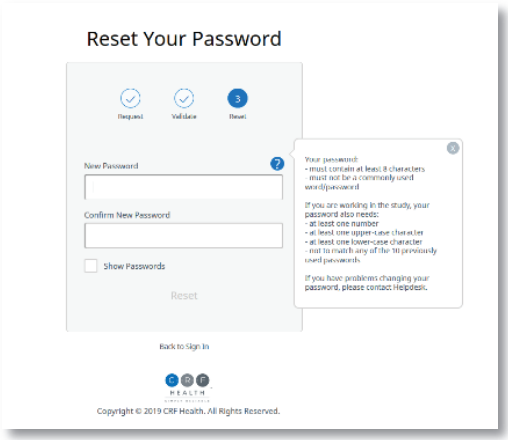


You will be taken to this screen

Check your email inbox and enter the security code, which has been sent to you

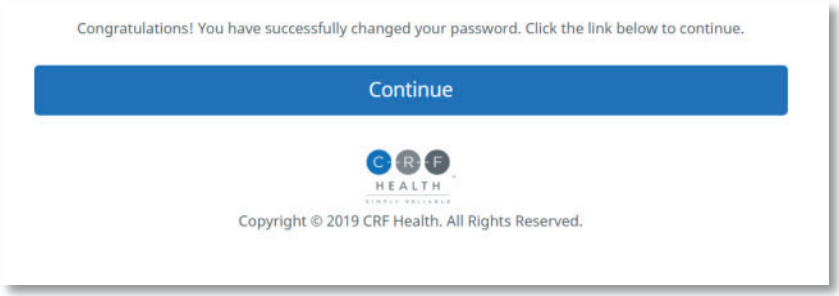
This is an example of the email which will be sent to you:





Enter a new password following the guidance on the screen

Once your reset has been successful, then you should see this screen:



4.2.3 How to request TrialManager access for new team members

In order to request TrialManager accounts for new team members you should add their information into the 'TrialManager User Order Form' and send the updated form to the Signant Health 'TM accounts' team, collating requests into 1 email per week.

Allow 5 business days to create new TrialManager accounts/make updates.

Urgent TrialManager requests can be requested via Helpdesk or directly contacting the Pfizer Study Team via your CRA/Monitor.

4.3 How to navigate the TrialManager website

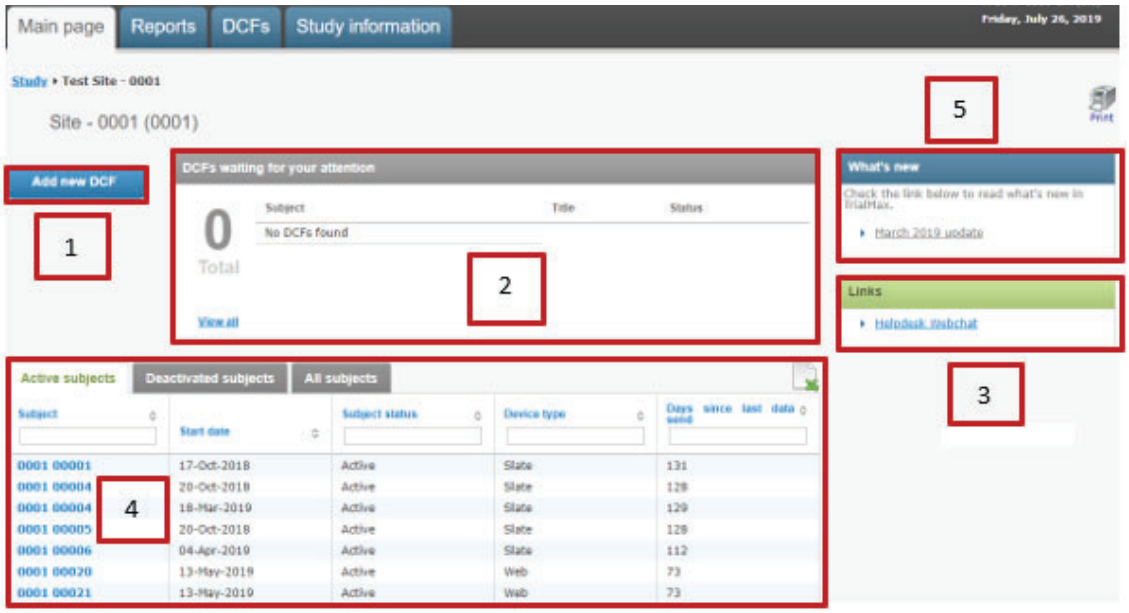
Investigators and Study Coordinators will see several tabs at the top of the screen. They are the 'Main Page', 'Reports', 'DCFs', and 'Study Information' tabs. These are selected by clicking on them.

The points below highlight the main functions and features of the tabs:

- **Main Page:** View a list of all your participants, navigate to individual participant pages, view open DCFs and navigate to the DCF tool, view the latest TrialMax updates
- **Reports:** Review, filter, and print information associated with your site and participants, such as compliance, DCFs, and administrative data
- **DCFs:** Create, approve, and monitor all requested data changes for your participants
- **Study Information:** Access supplemental reference content, such as electronic versions of the Site User Manual and DCF Guide

4.3.1 Main Page Tab

When you select “Main page” the following screen appears:



1. With this button, you are able to add DCFs (see Where to create DCFs in TrialManager).
2. This section is called the DCF Notice Board and will display all DCFs for your site that require your action. Simply click on the title of a particular DCF to see further details displayed. All DCFs created by you or anyone else will also need to be approved by a site user with DCF approval rights. Signant Health will be the one to implement the corrections requested in the DCFs.
3. Some useful web links for the study are displayed on the right-hand side of the screen, including the Helpdesk web chat.
4. The participant list section at the bottom of the screen will display all participants at your site.
    a. By default, this will display Active participants at the site. Click on the ‘Deactivated subjects’ or ‘All subjects’ to also

view participants that have already been deactivated from the TrialMax App.

b. You are able to sort and filter by any of the column headings by typing into the text boxes below the column headings.

c. Clicking on a subject number will take you to more detailed information regarding that participant (see Participant Details Card).

5. You can see the latest updates regarding any TrialManager system updates.

4.4 Add a new participant

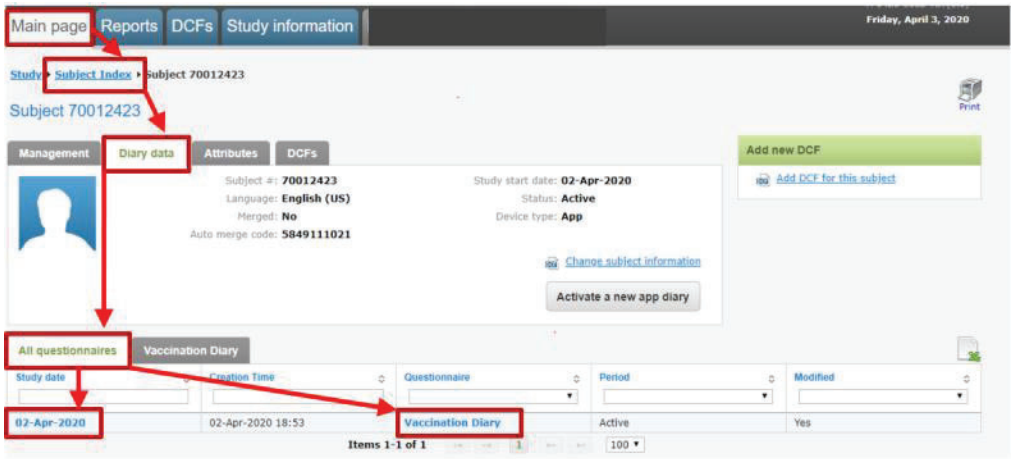
Please see **'How to set up a participant in TrialManager'**.

4.4.1 Participant Details Card

Upon clicking on a participant from the main page, the participant/subject's information card will display:

This will show details for the participant including: language, participant status, study start date, device type, and the participant's auto merge code, which is necessary for replacement devices.

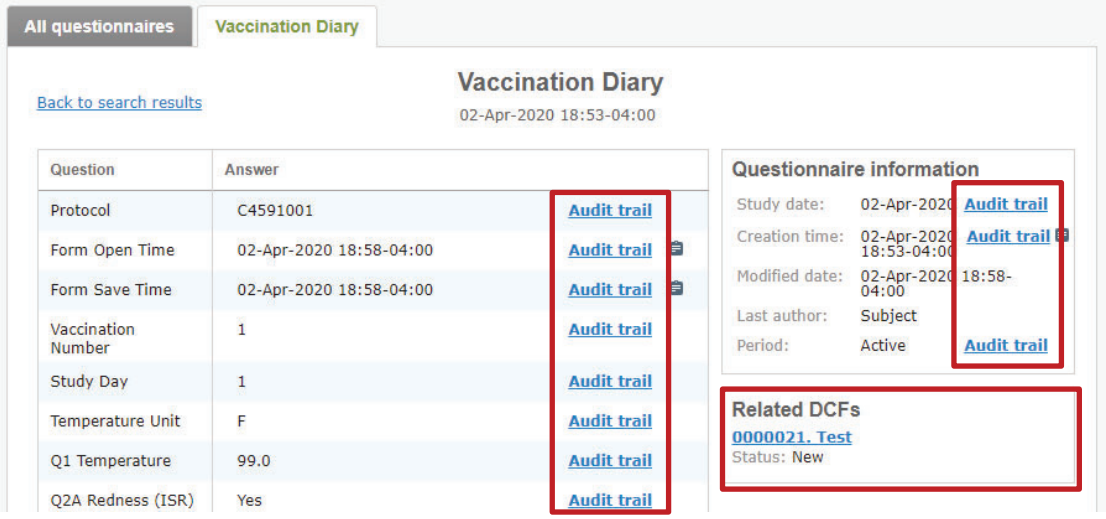
Below the participant details card, you will be able to review the Daily Diary forms submitted by the participant on the TrialMax App.



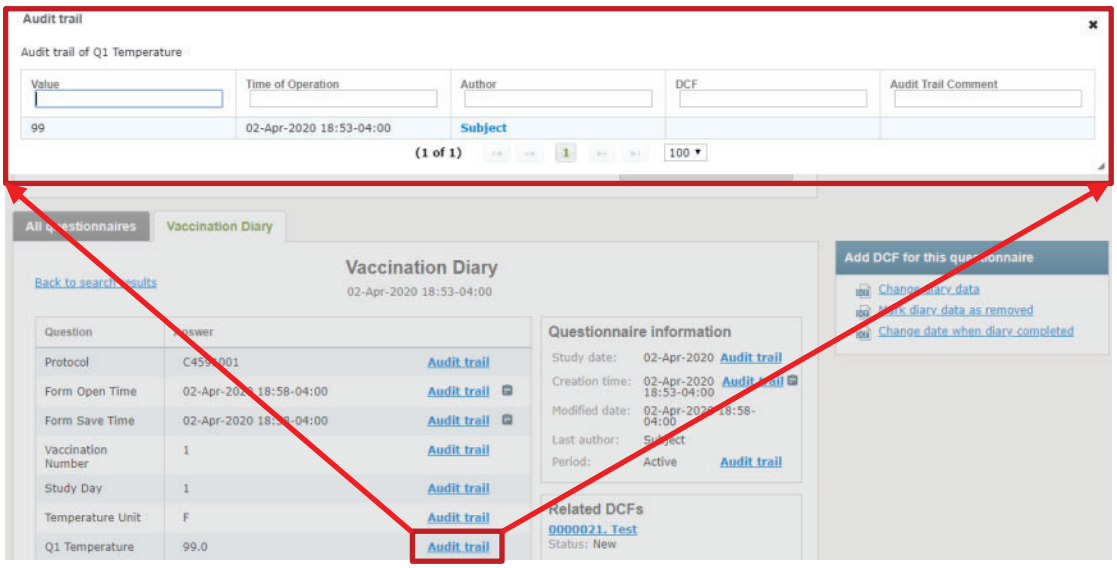
'All questionnaires' tab which contains 'Study date' and 'Questionnaire' links to each completed form. Each column can be filtered and sorted. Upon selecting a form link the form will open, displaying a list of all form data items, including the questionnaire items and responses completed by the participant, and administrative items such as the date and time a completed form was saved.

4.4.2 Data Item Audit Trails

You will also be able to view the audit trails for each questionnaire data item from within these form pages. You can use the audit trails to review the original values and a full change history of any data item if changes were made via the TrialManager DCF tool If there was a DCF associated with a questionnaire form, this will be displayed to the right of the form with a direct link to the DCF itself and the current DCF status.



To view the full audit trail of any available form item, including the original value and any changes, click the 'Audit trail' link to the right of the desired item. An audit trail of the item will open displaying a list of the data item elements, sorted newest to oldest from top to bottom. If only 1 row is displayed, this indicates that this is the original value of the data item, and that it has not been modified.



The Audit trail column headers are defined as follows:

- **Value:** the value of the data item itself
- **Time of Operation:** the date and time associated with the data item entry or modification
- **Author:** the user that committed the associated operation (participant, site, or Signant Health Data Management)
- **DCF:** the DCF ID number if a DCF was used to execute a change to the form
- **Audit Trail Comment:** free text field where the Signant Health data change implementer may post the DCF number, an external DCR number (if DCF was not used), or other useful reference information

Note: if a data item was modified via DCF within TrialManager, it will display a small clipboard icon to its right. Hovering with the mouse over the clipboard icon will trigger a pop-up with a brief summary of the change.

4.5 Reports Tab

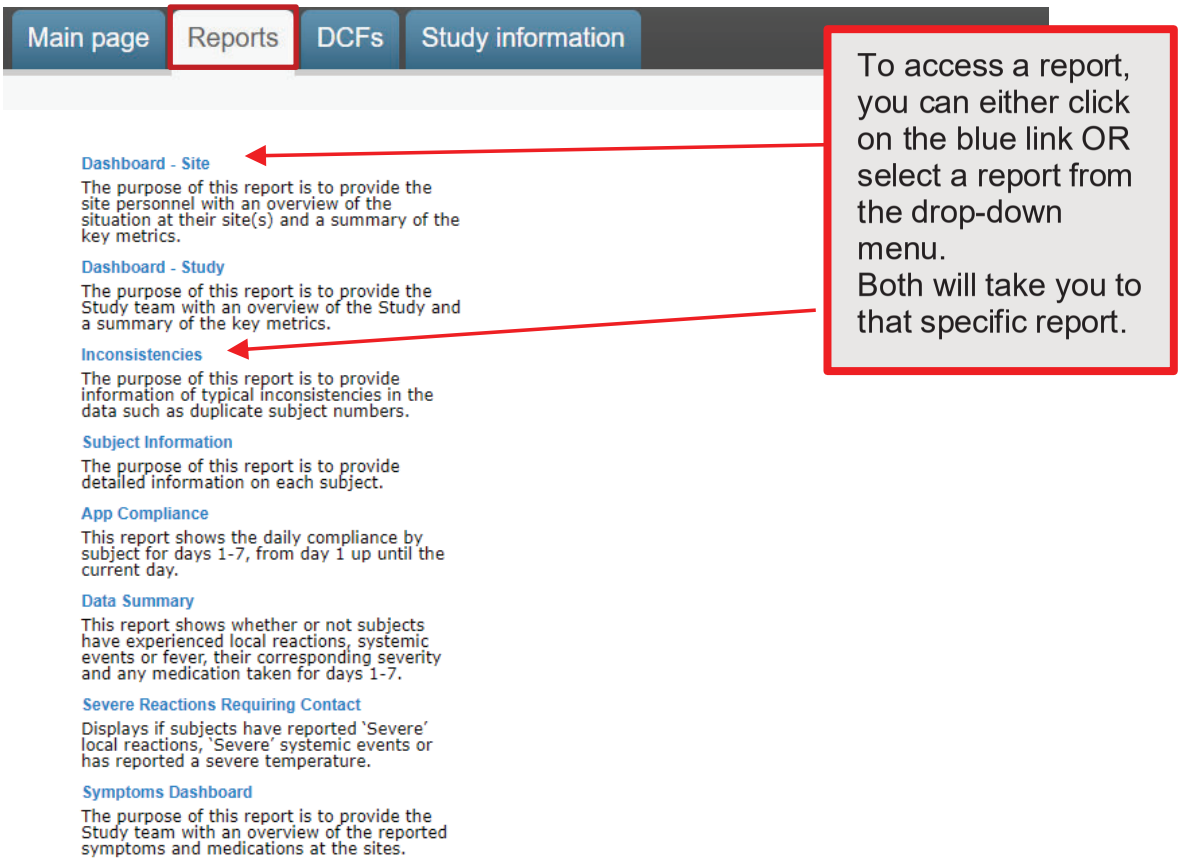
The 'Reports' tab will contain reports for you to view. These reports should be reviewed on a regular basis to ensure the participants are completing the questionnaires correctly with good compliance.

Note: TrialManager reports accessibility may not be available on the initial login of the user. The user may have to logout and log back in to view these reports.

The following reports will be available for this study:

- **Dashboard - Site:** The purpose of this report is to provide the site personnel with an overview of the situation at their site(s) and a summary of the key metrics.
- **Dashboard – Study:** The purpose of this report is to provide the Study team with an overview of the Study and a summary of the key metrics.
- **Inconsistencies:** The purpose of this report is to provide information of typical inconsistencies in the data such as duplicate participant numbers.
- **Subject Information:** The purpose of this report is to provide detailed information on each participant.
- **Compliance**: This report shows the daily compliance by participant for days 1-7, from day 1 up until the current day following each vaccination.
- **Data Summary**: This report shows whether or not participants have experienced local reactions, systemic events or fever, their corresponding severity and any medication taken for days 1-7 following each vaccination.
- **Severe Reactions**: Displays if participants have reported 'Severe' local reactions, 'Severe' systemic events or have reported a severe temperature.

- **Symptoms Dashboard**: The purpose of this report is to provide the Study team with an overview of the reported symptoms and medications at the sites.

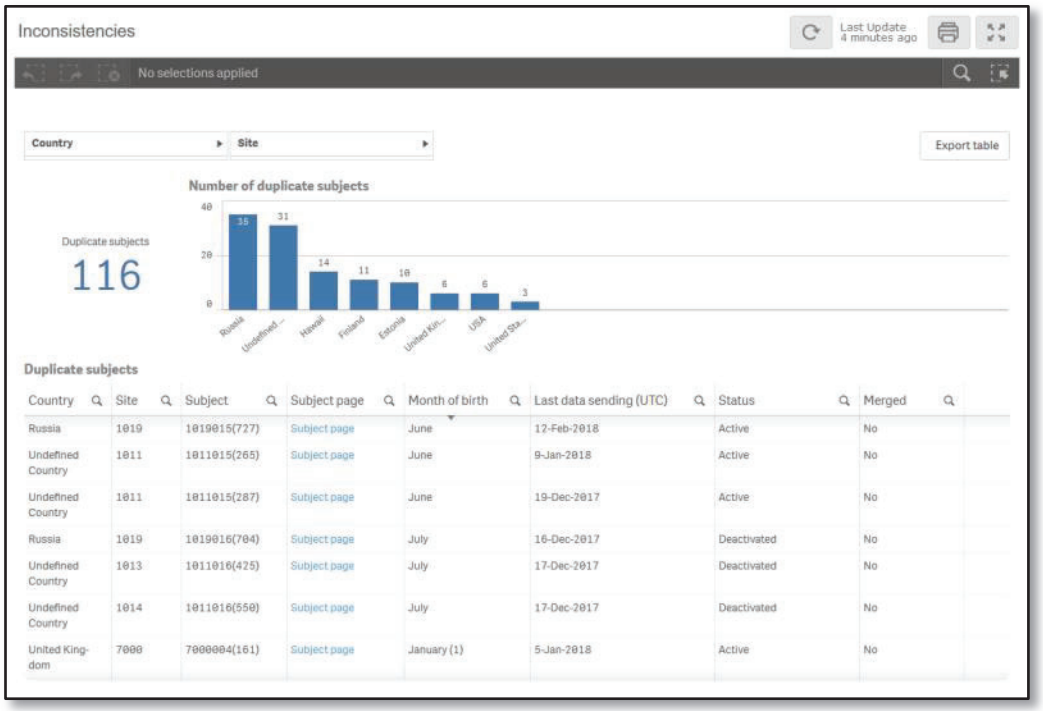


4.6 How To Review Reports

For monitoring purposes, you can view near real-time, graphical reports about the state of the study right inside TrialManager. Graphical visualizations allow you to identify quickly any deviations from the study protocol and take corrective action. For example, you can verify which study participants are still compliant (if they are completing their questionnaires on schedule) or verify the progress on resolving DCFs.

4.6.1 Reports User Guide

The Signant Health Reporting Solution supports a variety of visualizations, including bar charts and data tables. Below is an example of the Inconsistencies Report.



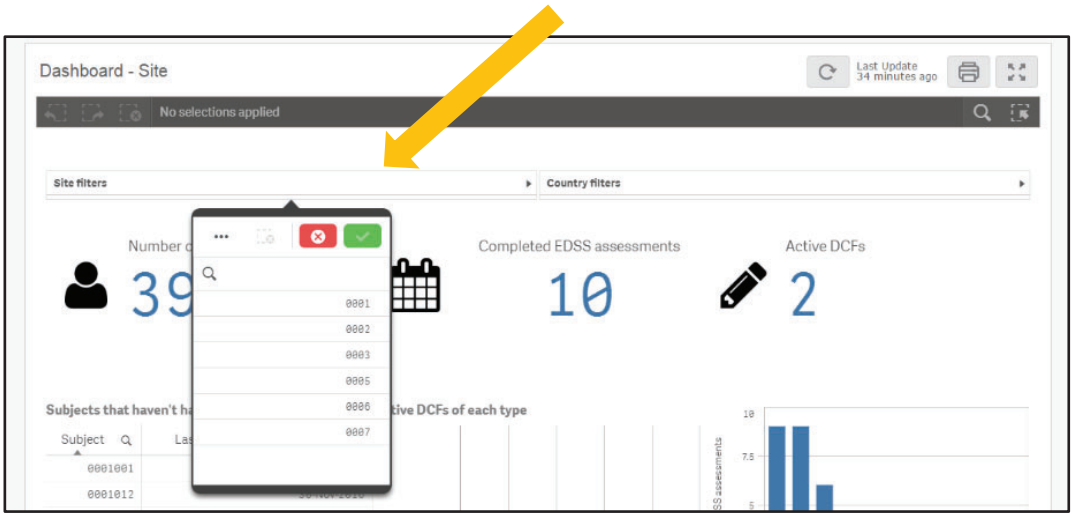
These report visualizations are interactive. When you select parts of the displayed data in report, all other sections update to filter for the selection automatically. This even works between reports in the same drop-down list and allows the user to ask questions about the data. Depending on your user role, you can select your site and/or participant number from the drop-down options at the top of the page. The report will automatically repopulate using the criteria selected. Clicking on the drop-down options will automatically filter the whole report.

4.6.2 Hints and Tips for Viewing Reports

The reports used in this study are designed to give you easy access to key study details. Below are some hints and tips on how to get the best from the reports available in the study:

Filtering

Reports can be filtered in several ways. One way is by selecting from the drop-down filters appearing at the top of the reports, as shown below.



To use the drop-down filters, select an item or items, from the list and select the green tick to apply the filter. Select the red cross to close the filter list without applying the change.

Reports can also be filtered by selecting part of a table or chart, for example selecting a participant from a list, or selecting a bar in a chart.

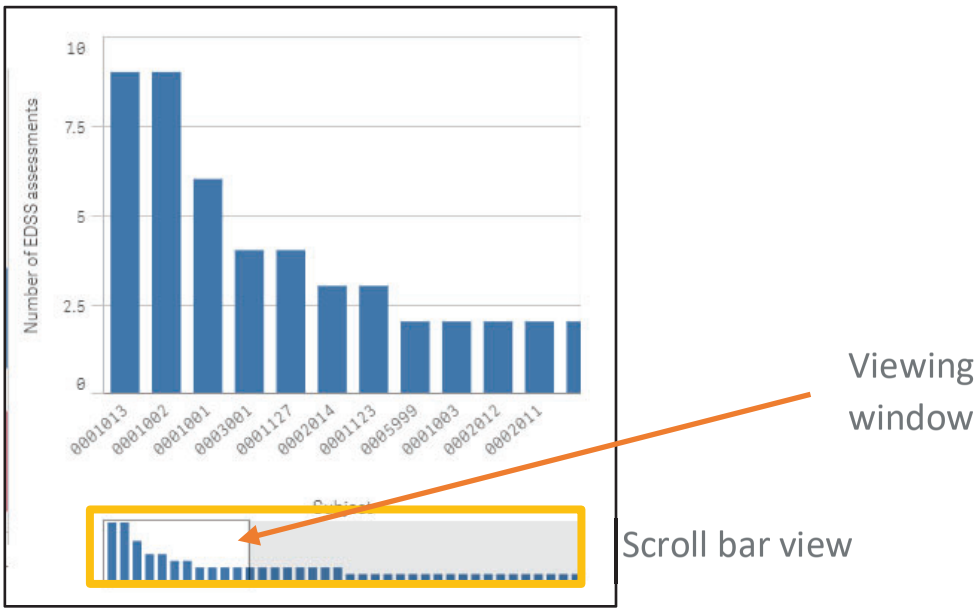
Selecting the icon in column headings can also be used to filter reports.

Once a filter selection has been made, all parts of the report and other reports viewed, will have this filter applied. All filters that are applied can be seen in the banner at the top of the report.

To remove a filter, select the “X” next to the filter in the banner at the top of the screen, as per the image below:

Viewing Bar Charts

Some reports contain bar charts to display specific data information. For bar charts with many data bars, it may not be possible to view all bars at the same time. When this is the case, a smaller ‘scroll bar’ version of the report can be seen. Move the white ‘viewing area’ box to the left or right on the scroll bar view to change the data shown in the main part of the report.



Hovering over a bar within a bar chart will display additional information.

Viewing Reports with Tables

For reports with large tables, you may wish to resize columns to ensure the best view in your browser. To do this, simply select the line between columns, and resize as required to fit all the columns in the view. If a column name is too wide to be displayed fully, hover over the column name with the mouse to view the full name.

You can rearrange the order that the columns will appear in by clicking on and dragging a column header into a different position, allowing you to focus on the columns you require.

You can select column headings to sort the report by that item. One click will sort the report in ascending order, a second click will sort the report in descending order. An arrow will appear on the column header to indicate the sorting applied.

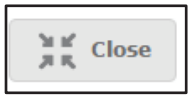
Select the 

button, where seen, to export information in a table to excel.

Standard Report Icons

The icons seen below can be found at the top left corner of all reports in the study.


This icon can be used to expand the viewing area for any report to full screen.



This icon will be seen to exit the full screen view.

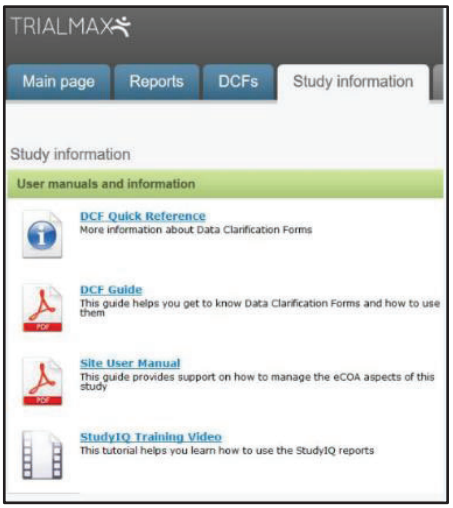

This icon can be used to print to pdf the report being viewed. This pdf copy of the report can be printed or saved, as required.


This icon can be used to reload of the data within the report.

To switch between reports, you can either return to the full list of reports by selecting the 'All Reports' option, or you can switch between reports using the drop-down options 'Standard reports' and 'Study reports'.

Note: Any filters applied to one report will also remain active on other reports viewed in the same drop-down list, unless specifically removed.

Further information and video training on how to use the reports can be found in the 'Study information' tab in Trial Manager.

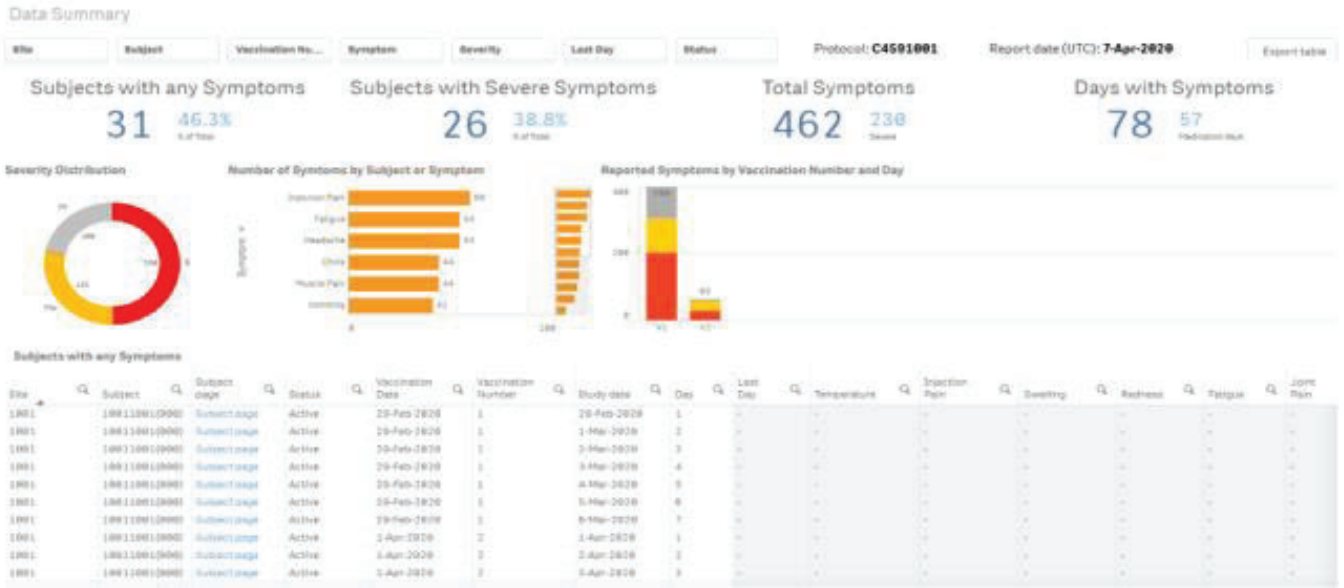


4.7 C4591001 Custom reports

4.7.1 Daily Diary Data Summary Report

This report shows whether or not participants have experienced local reactions, systemic events or fever, their corresponding severity and any medication taken for days 1-7.

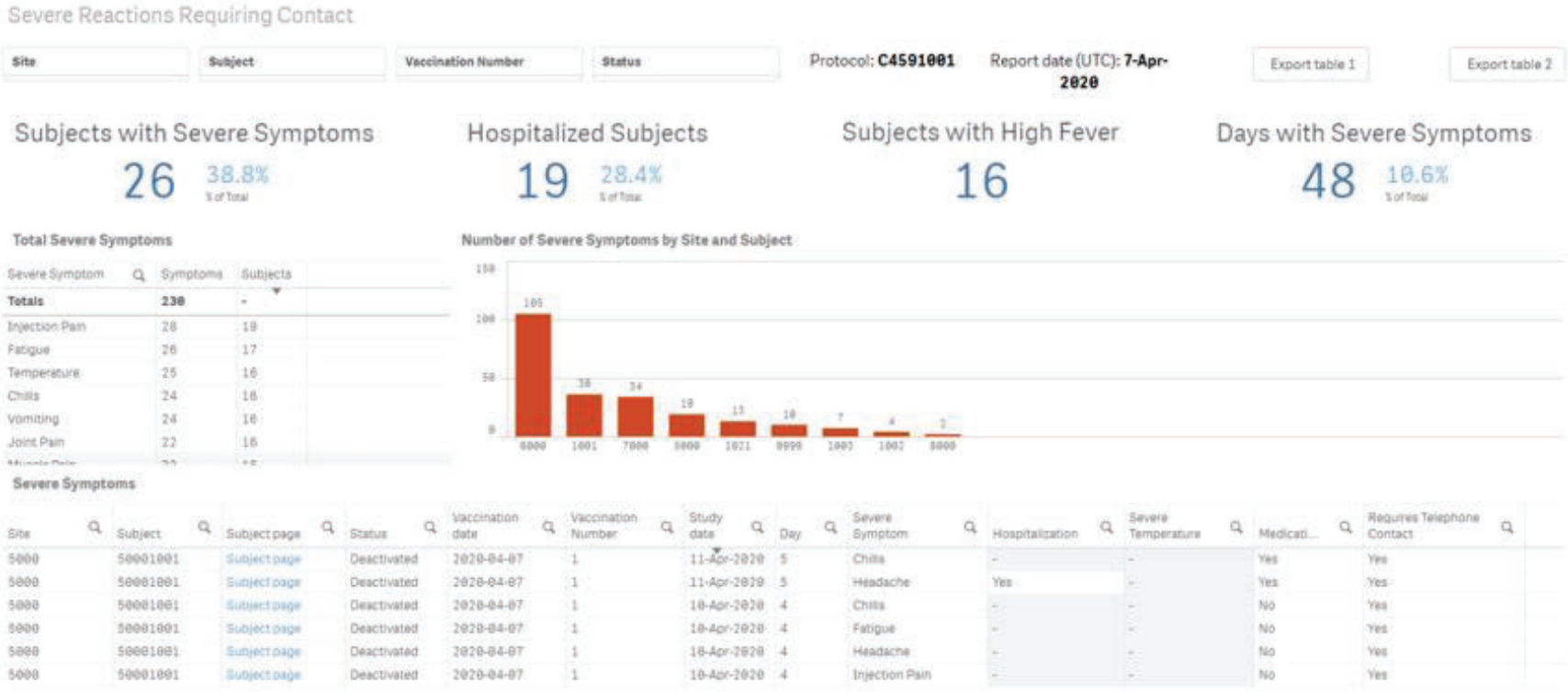
Columns will include: “Site”, “Participant”, “Participant page” (hyperlink which takes you to the participant page in TrialManager), “Status”, “Vaccination Date”, “Vaccination Number” (displays the vaccination number entered in the TrialManager), “Study Date” (displays date when daily diary form was opened. Future/ uncompleted diary dates will appear as [blank]), “Study Day” (fixed column listing ‘1’ – ‘7’ representing each of the study days for each participant), “Temperature”, “Injection Site Pain”, “Swelling”, “Redness”, “Fatigue”, “Chills”, “Diarrhea”, “Vomiting”, “Headache”, “Joint Pain”, “Muscle Pain”, and “Medication”.



4.7.2 Severe Reactions Requiring Contact Report

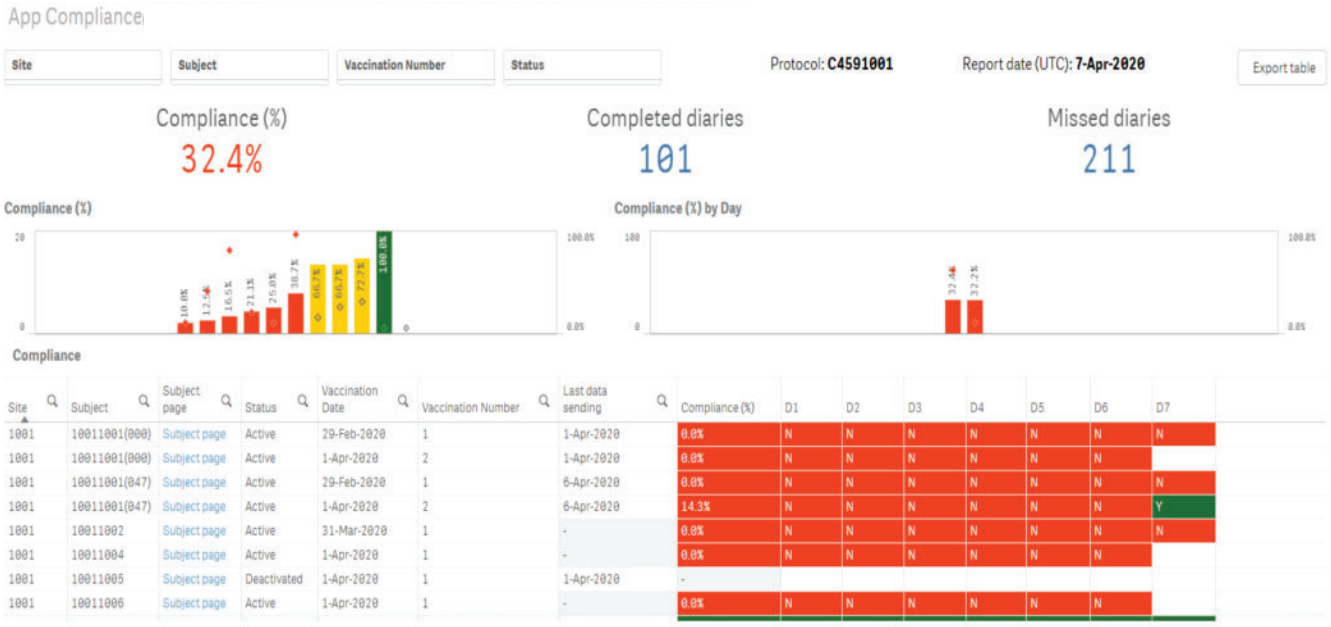
Displays if participant have reported 'Severe' local reactions, 'Severe' systemic events or has reported a severe temperature.

Columns will include: "Site", "Participant"," Participant page" (hyperlink which takes you to the participant page in TrialManager), "Vaccination date", "Vaccination number" (displays the vaccination number entered in the TrialManager), "Study date", (displays date when daily diary form was opened. Future/ uncompleted diary dates will appear as [blank]) "Study Day" (fixed column listing '1' – '7' representing each of the study days for each participant), "Severe Symptoms", "Hospitalization", "Severe Temperature" (Any Temperature higher than 102°F), "Medication", and "Require Telephone Contact" .



4.7.3 Daily Diary Compliance Report

This report shows the daily compliance by participant for days 1-7, from day 1 up until the current day.



Columns will include: “Site”, “Participant”, ”Participant page”, “Status”, “Vaccination date”, “Vaccination number”, “Last data sending” , & “% Compliance”.

Compliance (%): Displays the compliance rate.

D1-D7: represent the study days and will display the status of the participant’s diary completion for each day.

Color scheme display for the Compliance (%):

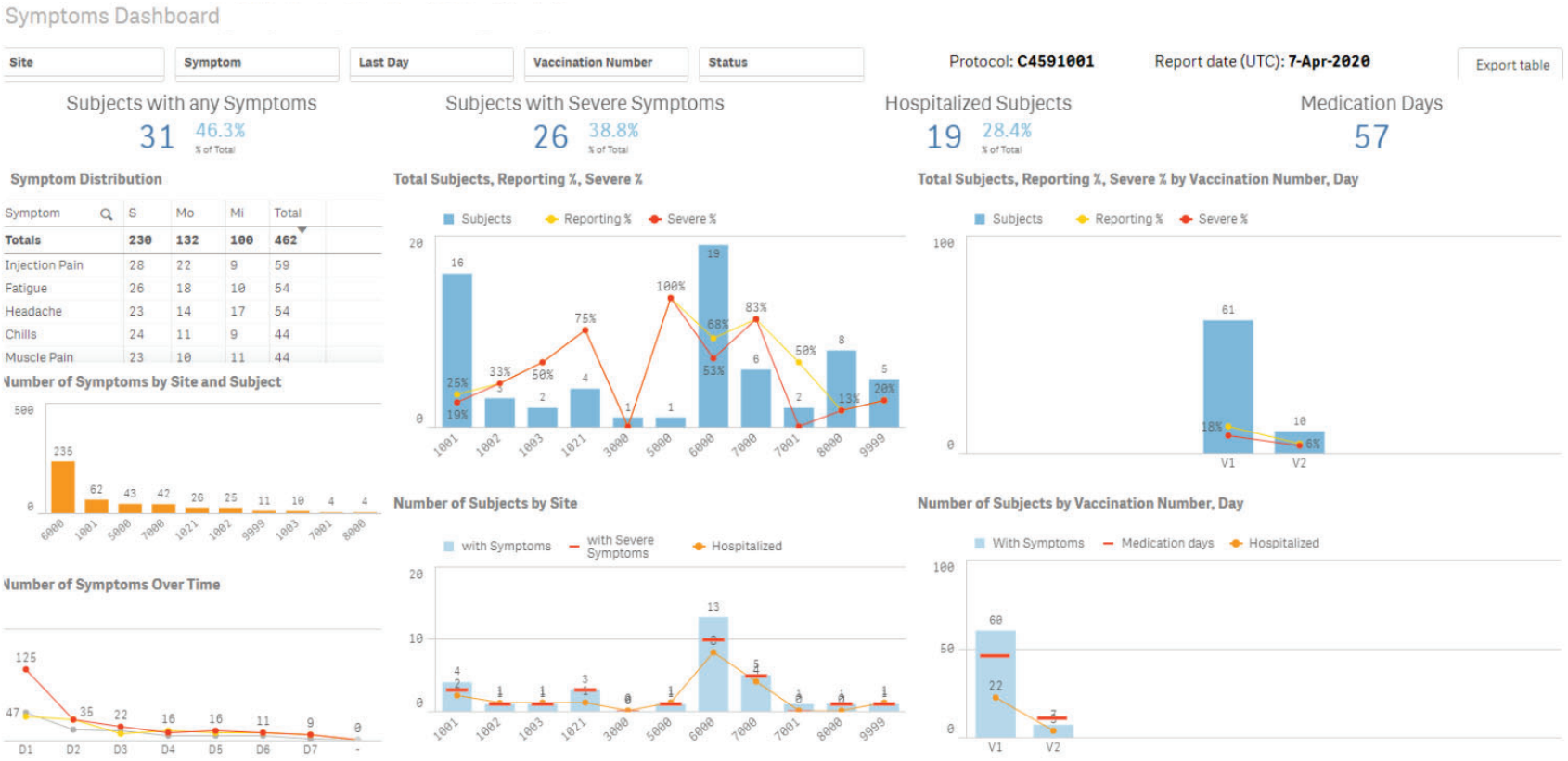
- Red: <40%
- Yellow: ≥ 40% - < 80%
- Green: ≥ 80%

Expected diary compliance will follow the standard color-coding scheme and thresholds. For active participants, diary completion expectations will be based on the current date. Once a participant is vaccinated, the participant will be expected to complete the diary every day for 7 days including on the day of the vaccination, for the participant. As each study day passes, the previous study days become expected and should have one daily diary completed. For deactivated participants, diary completion expectations will be based on the deactivation date. The participant will thus be expected to have completed one diary for each study day starting from the vaccination day and until the day before the Deactivation date. The exception here is that if the participant completed a diary on the day they were deactivated, that day will also be considered as expected.

4.7.4 Symptoms Dashboard Report

The purpose of this report is to provide the Study team with an overview of the reported symptoms and medications at the sites.

Symptom Distribution columns will include: “Symptom”, “S” (Severe), “Mo” (Moderate), “Mi” (Mild), & “Total”.

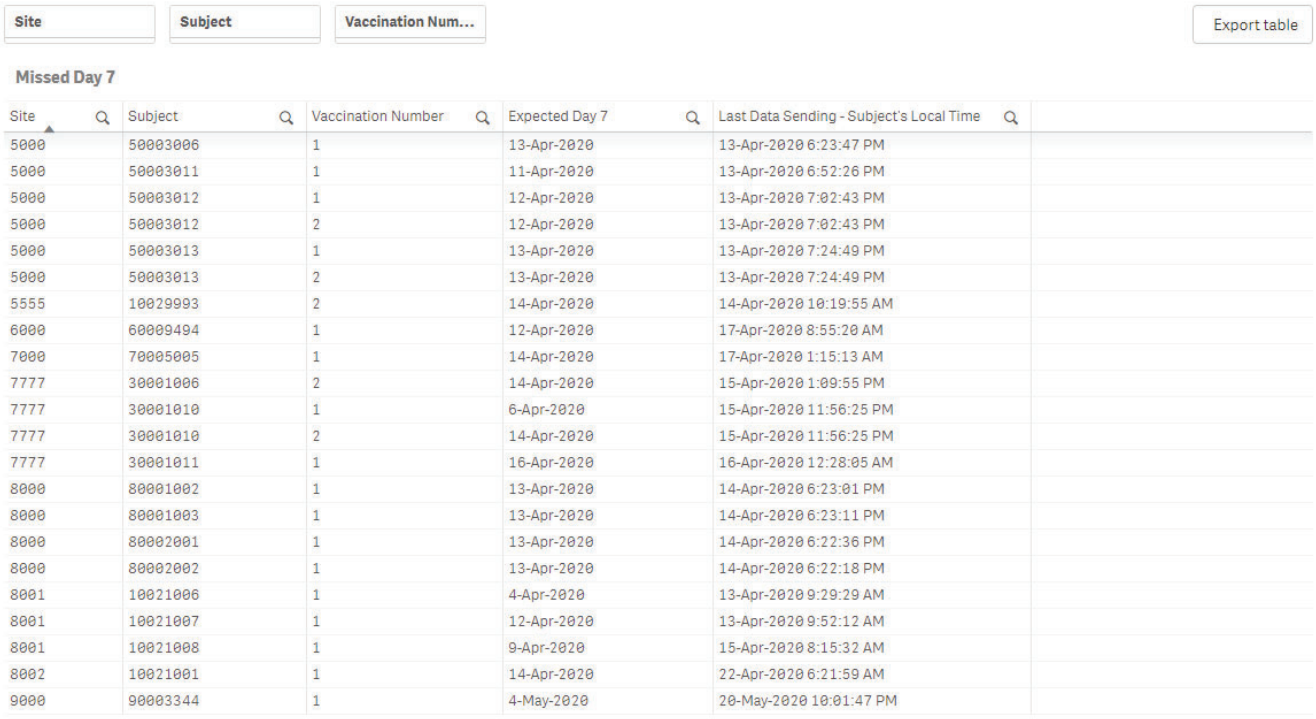


4.7.5 Missed Day 7 Transfer Report

The purpose of this report is to flag any participants who are missing diary data for day 7, following vaccination 1 or vaccination 2, and have not sent data for day 7 or thereafter.

The table will list the site number, participant (subject) number Vaccination number, the date day 7 diary was expected, and the last date and time the participant's App connected to the server (in the participant's local time).

The report can be filtered by: Site number, Subject (participant) number, Vaccination number.



Site	Subject	Vaccination Number	Expected Day 7	Last Data Sending - Subject's Local Time
5000	50003006	1	13-Apr-2020	13-Apr-2020 6:23:47 PM
5000	50003011	1	11-Apr-2020	13-Apr-2020 6:52:26 PM
5000	50003012	1	12-Apr-2020	13-Apr-2020 7:02:43 PM
5000	50003012	2	12-Apr-2020	13-Apr-2020 7:02:43 PM
5000	50003013	1	13-Apr-2020	13-Apr-2020 7:24:49 PM
5000	50003013	2	13-Apr-2020	13-Apr-2020 7:24:49 PM
5555	10029993	2	14-Apr-2020	14-Apr-2020 10:19:55 AM
6000	60009494	1	12-Apr-2020	17-Apr-2020 8:55:20 AM
7000	70005005	1	14-Apr-2020	17-Apr-2020 1:15:13 AM
7777	30001006	2	14-Apr-2020	15-Apr-2020 1:09:55 PM
7777	30001010	1	6-Apr-2020	15-Apr-2020 11:56:25 PM
7777	30001010	2	14-Apr-2020	15-Apr-2020 11:56:25 PM
7777	30001011	1	16-Apr-2020	16-Apr-2020 12:28:05 AM
8000	80001002	1	13-Apr-2020	14-Apr-2020 6:23:01 PM
8000	80001003	1	13-Apr-2020	14-Apr-2020 6:23:11 PM
8000	80002001	1	13-Apr-2020	14-Apr-2020 6:22:36 PM
8000	80002002	1	13-Apr-2020	14-Apr-2020 6:22:18 PM
8001	10021006	1	4-Apr-2020	13-Apr-2020 9:29:29 AM
8001	10021007	1	12-Apr-2020	13-Apr-2020 9:52:12 AM
8001	10021008	1	9-Apr-2020	15-Apr-2020 8:15:32 AM
8002	10021001	1	14-Apr-2020	22-Apr-2020 6:21:59 AM
9000	90003344	1	4-May-2020	20-May-2020 10:01:47 PM

5 DATA CLARIFICATION FORM (DCF)

5.1 What is a DCF

TrialManager allows authorized personnel to request modifications to certain data items via the DCF process. The data reported by the sites and participant is considered to be the original electronic source data. This data is very rarely, if ever, changed, however, in some situations data changes are needed. The DCF is the audit trail for data changes. Each DCF and its full history are available for review during the study via TrialManager and will be provided to the sites and client at the end of the study via the site archive.

5.2 Types of data changes allowed:

The following data modifications are permitted for this study:

- Changes to data previously reported by the participant, i.e., increase or decrease in the severity of a local reaction or systemic event previously reported on a given day. It is the investigational sites responsibility to ensure such changes are only requested if supported by appropriate source documentation, e.g., telephone contact report detailing the initial data entered and the corrected data.

- Changes to device set-up information, i.e., corrections to the following when previously entered incorrectly:
    - Site number
    - Participant number
    - Vaccination number or date of vaccination

- Other administrative changes, i.e.:
    - Merging participant data and removal of duplicate data – allows cleaning of data issues that may result

from replacement or multiple devices being issued to participants.
    - Modifying timestamps - allow cleaning of data issues arising from when the diary device internal clock is inaccurate.
    - Changing participant status

When data is modified or duplicate data removed, no data is ever fully deleted, all data will remain in the data base audit trail.

The following data modifications are not permitted for this study:

- Addition of a form, e.g., addition of a daily diary that has previously been reported as missed, or if the device fails and the participant is unable to record their daily diary.

5.3 Where to create DCFs in TrialManager

You can add a new DCF for any participant where ever you see the 'Add new DCF' button in TrialManager.

It is also possible to add a DCF for a specific participant from the participant page (so the participant instance will be preselected), or from a participant's form view while reviewing data (so the participant instance and the specific form will be preselected).

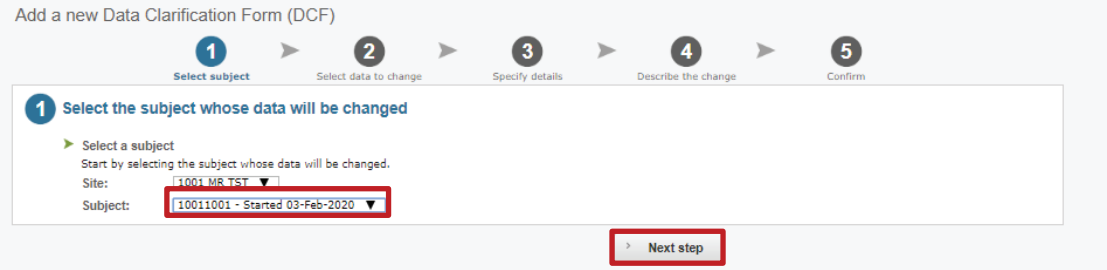
5.4 How to create a DCF

The steps required to complete a new DCF are detailed below. For certain DCFs, additional steps may be required to provide the necessary level of information. The system will guide you to select the necessary information, where this is required.

After initiating the DCF as outlined in Where to create DCFs in TrialManager:

1. **Select Site and Participant**

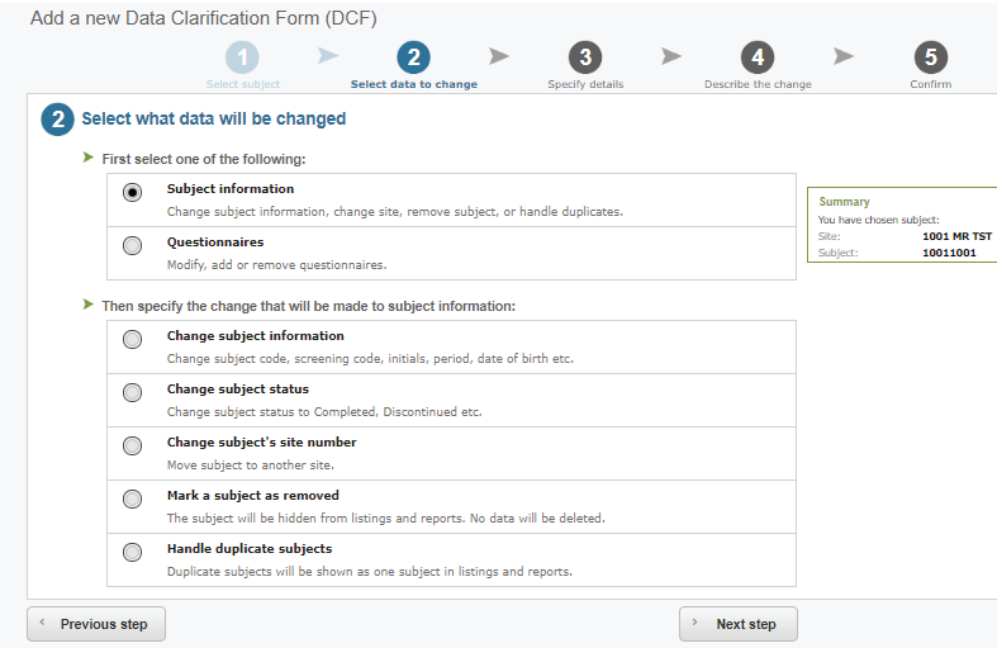
Note: If the DCF was raised at the participant or form level, entering the site and participant in the dropdown will not be necessary.



If there are multiple instances for the participant (i.e. multiple Daily Diary instance) you must select the correct one based on the start date (found in the site index). Alternatively, raise the DCF from the participant level of the correct instance to pre-select the participant details.

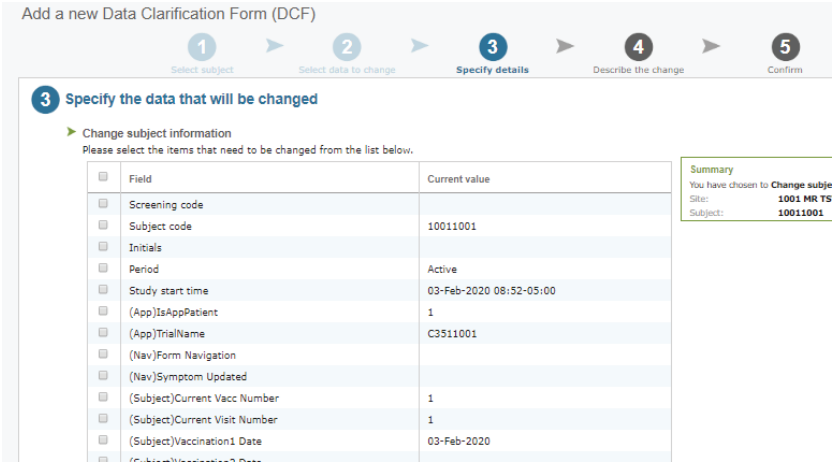
2. Select data to change

Select the data to be changed, either Participant Information or Questionnaires. Based on the selection a further list will appear, as per the example screenshots below. Select the option that best fits the change, then select 'Next step' to proceed to step 3.



3. Specify details (required for some DCF types)

Based on the options selected in the previous step, additional information may be required.



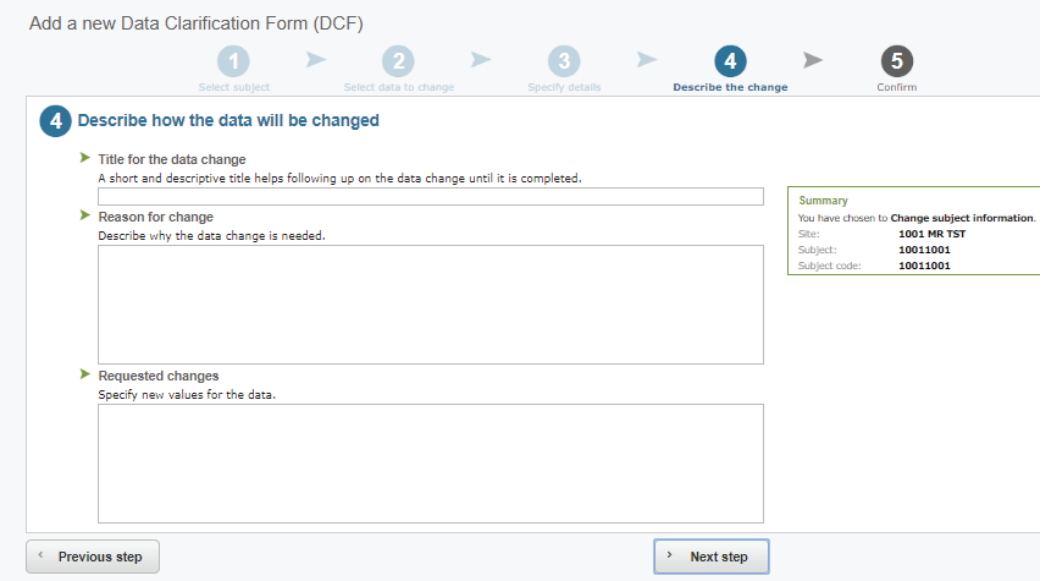
4. Describe the change

Fill in the 3 required free text boxes to describe the change, in as much detail as you can provide. When finished, click 'Next step':

a. **Title for the data change:** Give the DCF a brief title that describes the change (*e.g. 'Update participant number'*).

b. **Reason for change:** Describe the issue with as many details as possible. If this is not specific, processing may be delayed. This should not simply outline what change must be made but rather provide reason for the change explicitly, to act as the audit trail. (*e.g. 'Participant number was entered incorrectly on the device'*)

c. **Requested changes:** Detail the requested changes. Specify any values that need to be changed, including the original value and new value *(e.g. 'Please change X to Y.')*.



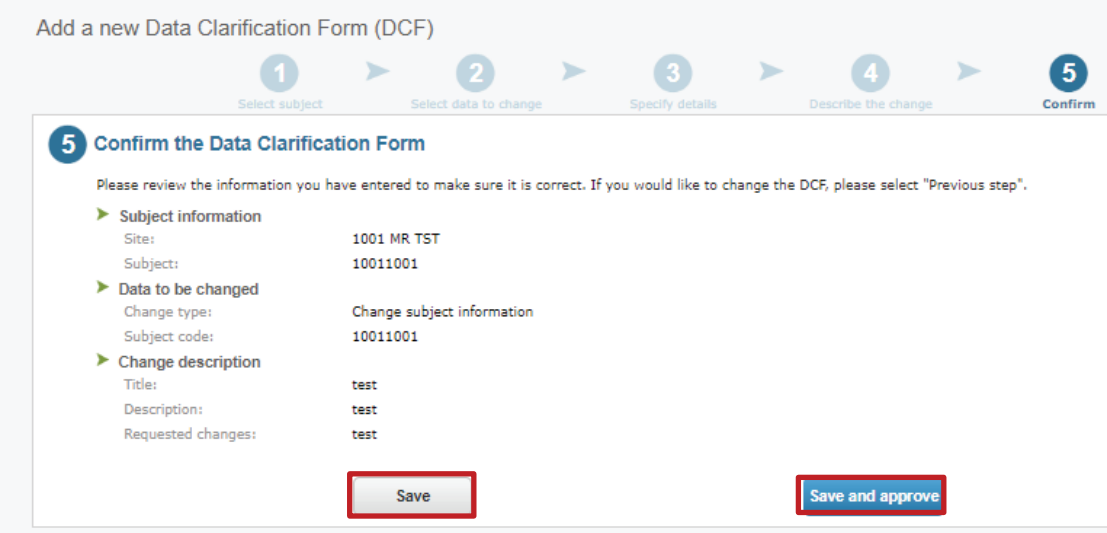
Additional information required for some DCF types:

- Requesting to change a participant's status: be sure to include the date of when the participant status has changed in Step 4 (Describe the change). This DCF type cannot be processed without a date when the new status started.

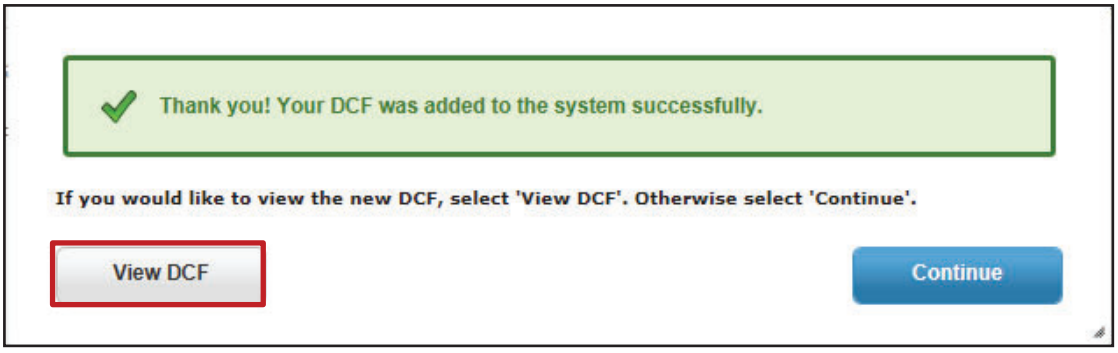
Marking a participant as removed: be sure to specify if forms saved under the participant should also be marked as 'removed' in Step 4 (Requested changes).

5. Confirm

When the DCF has been drafted, you will see a screen where you can review the information entered and click 'Save' to save the information required; or press 'Previous Step' to return to the last step and amend the information. The 'Save and approve' button can also be seen if your user role allows you to approve the DCF request. This button should only be used if you are sure the data entered in the DCF is correct and the request does not need to be reviewed by anyone else before sending to Signant Health Data Management.



You will get a confirmation that the DCF was created successfully after pressing either 'Save' or 'Save and approve'. Select 'View DCF' to change the status of the DCF for processing by the Signant Health Data Management Team, if 'Save and approve' was not selected.



5.5 Approval of DCFs

When to approve DCFs

DCFs must be approved once they have been created and confirmed to have all the necessary and required information. This may be completed separately, once the DCF is created, or during the DCF creation process if the user has DCF approval rights. **Before Signant Health can implement a DCF, it must first be approved by the Site**.

How to Approve DCFs

DCFs pending site approval can be monitored in the weekly DCF notification emails, which will include links to each DCF, or by reviewing the DCF Dashboard on the study's TrialManager Main Page.

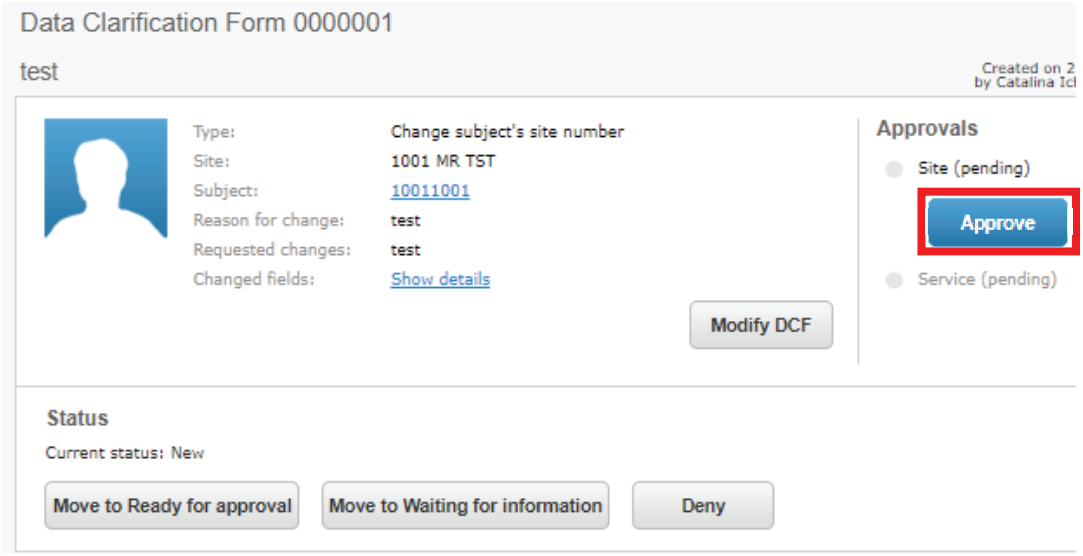
After clicking the DCF link from the email notification, the user will be taken directly to the page where the status of the DCF can be changed. User can also select the appropriate DCF from DCF Dashboard on TrialManager home page by clicking on the DCF title.

Before the change requested can be implemented, the DCF must be approved by the following levels:

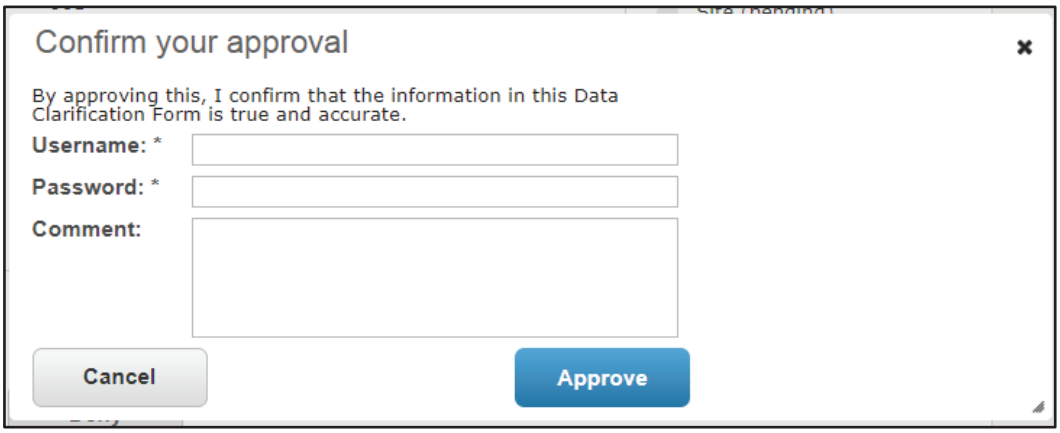
> **Level 1 (Site):** The first level of approval is the Site/Investigator approval. Steps below describe how site personnel can approve DCFs.
>
> **Level 2 (Service):** Finally, Signant Health Data Management Team approval is added once all approvals are received, and Signant Health have confirmed that the DCF includes all necessary information to implement the requested changes.

Follow the instructions below in order to ensure the DCF is approved for processing:

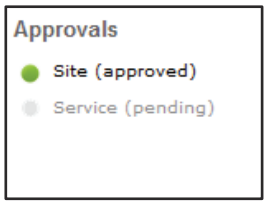
1. Navigate to the DCF and select the **'Approve'** button.



2. Next, a confirmation screen will appear which allows you to add a comment (*optional*) and approve the DCF. After entering your credentials, you can select approve. Please note only Investigator and Study Coordinator (DCF) roles can approve DCF.



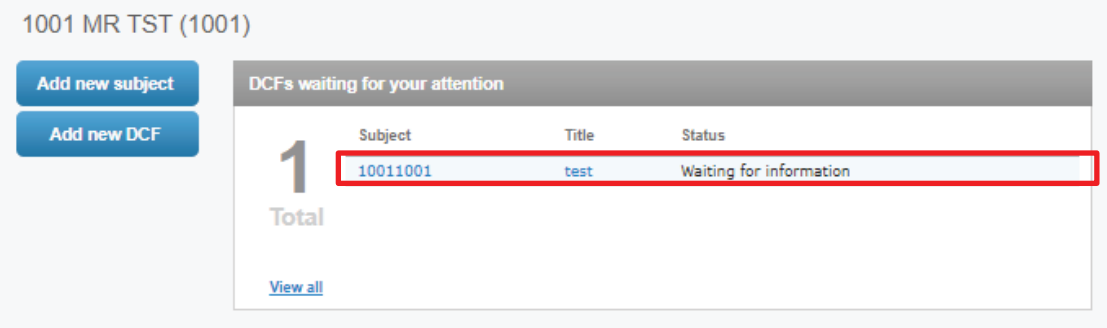
3. The DCF is now approved by the site; approval status is listed on the upper right corner of the DCF. Signant Health can now approve the DCF and implement the changes. **Note: Signant Health may change the status and request additional information see How to Answer Comments: Waiting for Information.)**



You can follow the progress by selecting the DCF and checking the status in the 'DCF' tab of TrialManager and the comments within the DCF.

5.6 Adding Additional Information to DCFs

How to Answer Comments: Waiting for Information



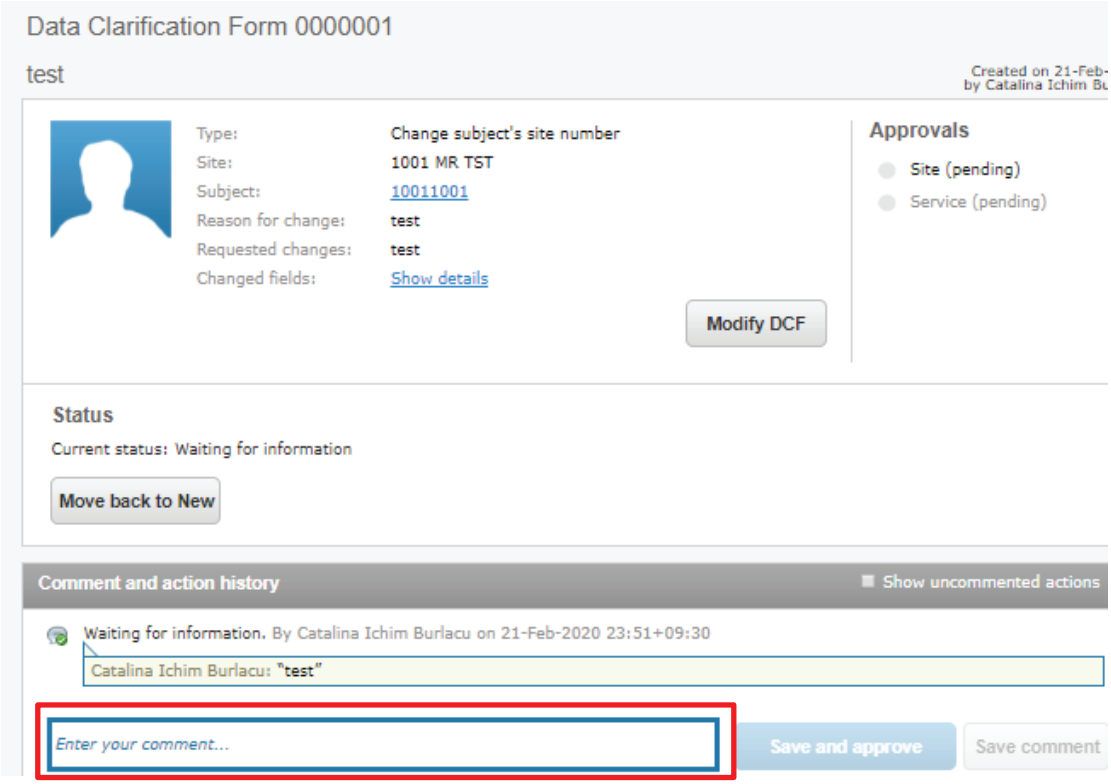
Sometimes, DCFs will need additional clarification and will be changed to the 'Waiting for information' status with questions that the site will need to answer. The DCFs waiting for information can be found on the 'Main page' tab of the TrialManager.

DCFs may be placed in a 'Waiting for information' status for the following reasons:

- DCF wording is unclear
- Wrong type of DCF was selected
- There is missing information that needs to be confirmed

The following steps will be required in order to add comments to DCFs in a 'Waiting for information' status:

1. Click on the Title link to review and read the comment history for the DCF in the 'Waiting for information' status.
2. Review the comments that details the information that needs to be clarified. Enter a clarifying comment in the 'Enter your comment…' text box. Try to respond to all questions raised with as much detail as possible**. If you are still unsure about what information is needed, please state this in your comment**. Press the 'Save comment' button when finished.



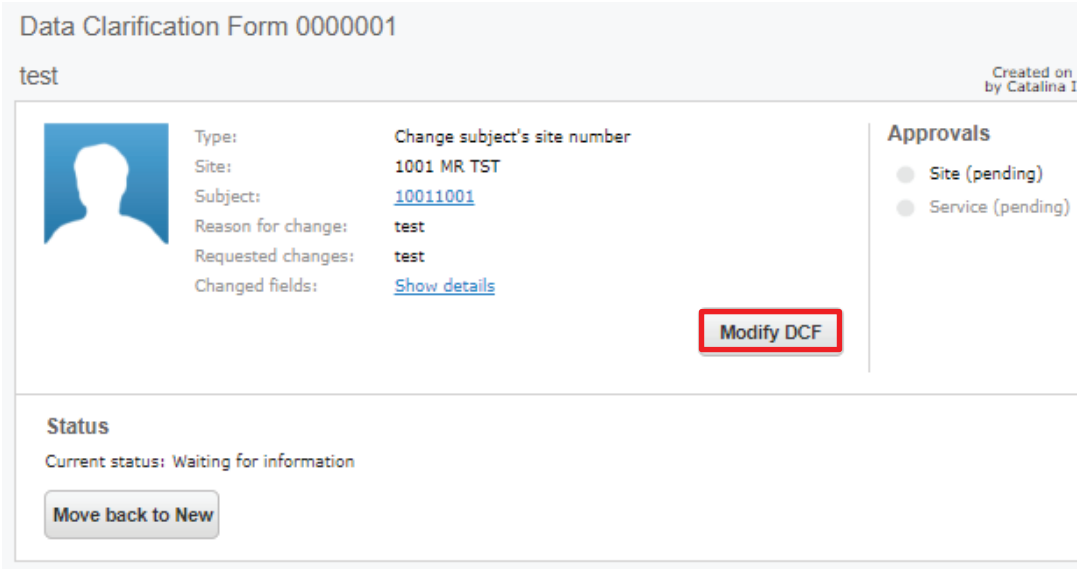
3. Once the necessary additional information has been added via a comment, **the DCF must be approved again**. Follow the steps outlined in How to Approve DCFs above.

You will notice that the DCF no longer appears on the DCF Notice Board on the Main page – this means that no further action is needed on that DCF. Continue the process with all remaining DCFs in your notice board until no DCFs appear in the DCF Notice Board. **Note: The DCF may be moved to a 'Waiting for information' status again if the comments in the DCF are not clear or do not clearly answer the questions from the Signant Health Data Management Team.**

How to Modify DCFs

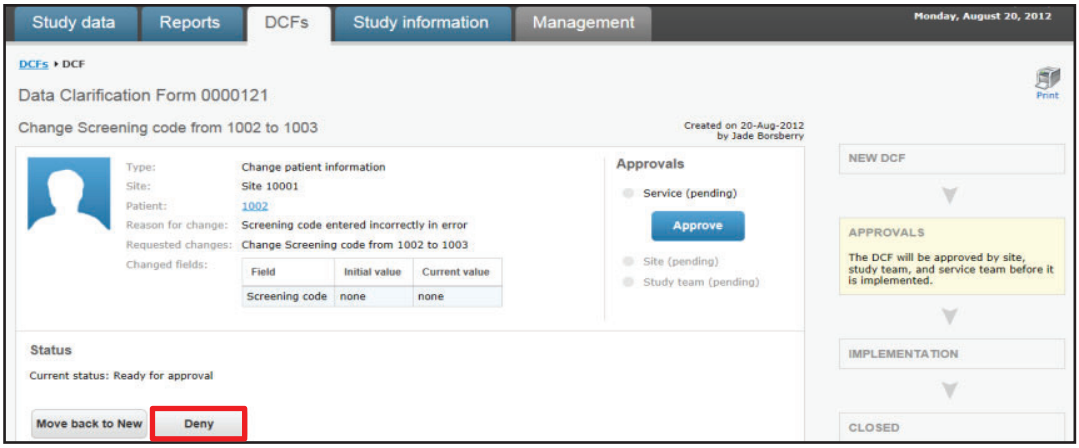
Until a DCF is either under 'Ready for approval' or any 'Approved' status, the site is able to modify the DCF. This can be accomplished by simply selecting the **'Modify DCF'** button on the DCF itself.

When making modifications, be sure to save all updates made to the DCF and move to 'Ready for approval' for processing.



How to Cancel/Deny DCFs

The site can cancel their entered DCF at any time prior to their first approval, by selecting the **'Deny'** button on the DCF page.

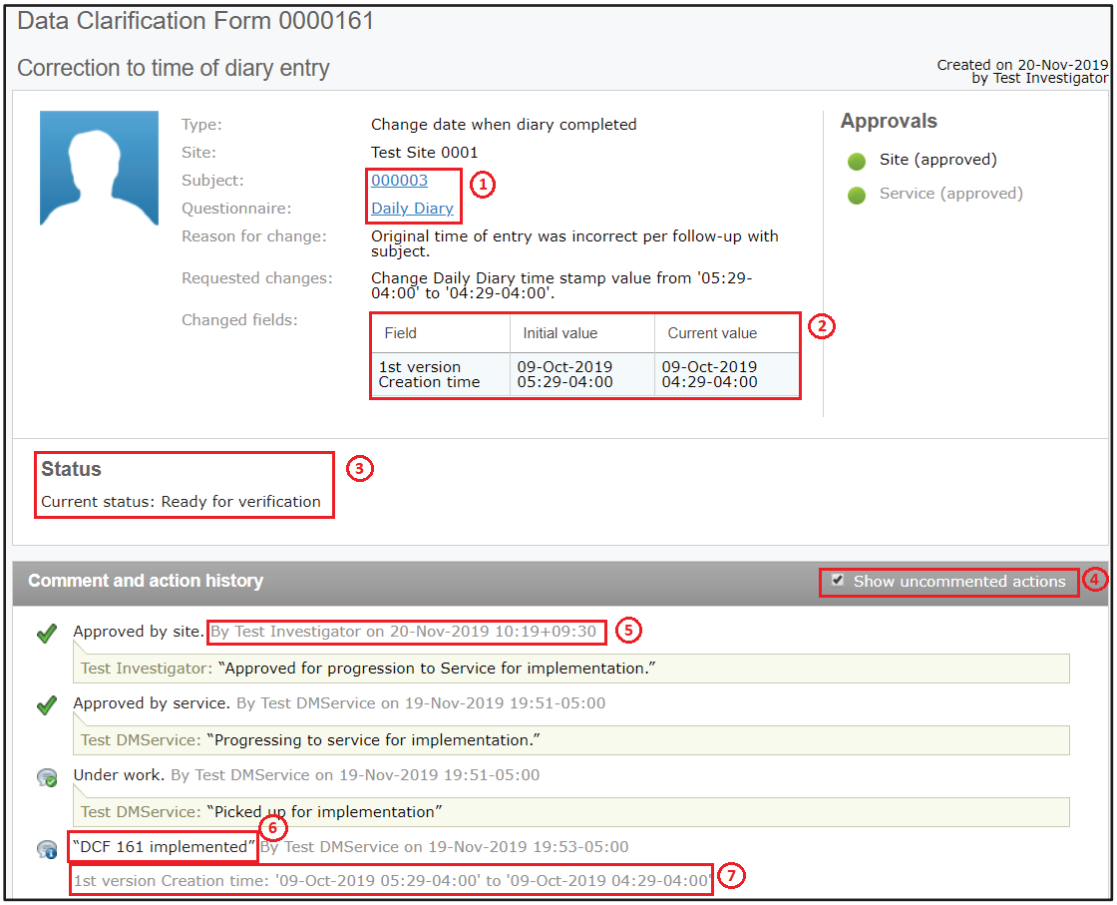


By selecting the 'Deny' button, this signals to the Signant Health Data Management Team that the change requested in the DCF should not be processed.

Note: The Signant Heath Data Management Team may deny DCFs that are not applicable for your protocol or are duplicate requests.

5.7 Viewing DCF Comment and Action History

A DCF will always retain the full history of all comments and actions committed. To view the latest activity for a DCF, navigate to the 'DCFs' tab, select the sub-tab, 'All', and then click the desired DCF link to view the DCF detail. Select the check box, 'Show uncommented actions', and the full history of actions committed in that DCF will be displayed in order of oldest to newest, top-to-bottom.



The elements of the DCF detail view pictured above are defined as follows:

1. Direct links to Participant card and the questionnaire under change, as applicable to the DCF
2. Changed fields will be displayed if specific fields were selected for change during DCF creation. 'Field' will display the data item, 'Initial value' will display the original data item value captured via the TrialMax device, and 'Current value' will display the data item's present value (this may match the 'Initial value' if the DCF has not been implemented yet)
3. The current status of the DCF will be displayed
4. Check box to show uncommented actions, such as a status change can be selected for a comprehensive view of the DCF's history or deselected for a reduced listing. The checkbox will default to unchecked when first opening the DCF
5. The name of the individual committing the action and the commit timestamp will display next to each committed comment or action
6. Comments entered will display within quotation marks
7. Committed changes directly associated with the DCF will display in grey text without quotations

Note: DCF comment and action history items comprise an audit trail of all comments and actions committed in the DCF and cannot be modified once committed.

5.8 DCF Timelines and Tips for Success

DCF Timelines

Once a DCF has been approved, Signant Health Data Management will review and implement the request within 5 working days. If a DCF must go to "Waiting for information" status, then the implementation time will restart on re-approval of the updated DCF.

Tips for Success

It is important that all the data that has been uploaded be reviewed and cleaned throughout the study. Please find below some important guidelines on best practices below:

1. It is highly important that data is reviewed and DCFs are raised and approved on an ongoing basis to avoid high volumes of DCFs ahead of interim and final database locks.
   For example, you can use the **Inconsistencies report** to identify participants with potentially incorrect participant numbers, or who may need to be merged, and you should check the participant data to ensure visits are labelled correctly.
2. Sites should continuously review any DCFs waiting for more information to provide Signant Health with the information required to implement prior to lock dates. Regularly review the 'DCFs waiting for your attention' noticeboard on the TrialManager Main Page to find any DCFs that need action to be taken.
3. Sites should ensure that all devices at site have sent data so that all data is uploaded and visible in TrialManager.
4. Please be aware that Signant Health does not review data or raise DCFs.

6 Setting up SMS notifications

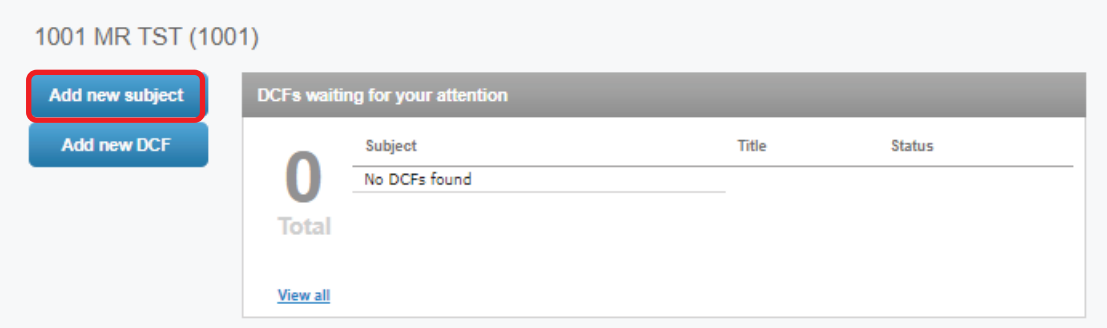
As part of participant setup, you can choose to enter a participant's personal mobile number to receive activation details via SMS. **US participants will need to** subscribe with the mobile phone number they wish to receive this message on. **This should be completed before setting up a participant.**

To opt-in to receive SMS activation code, send a text message with the word **SUBSCRIBE** to phone number **42526**. When you opt-in to the service, you will receive a reply confirming your signup. Once confirmation of subscription message is received, the participant will be able to receive SMS activation code.

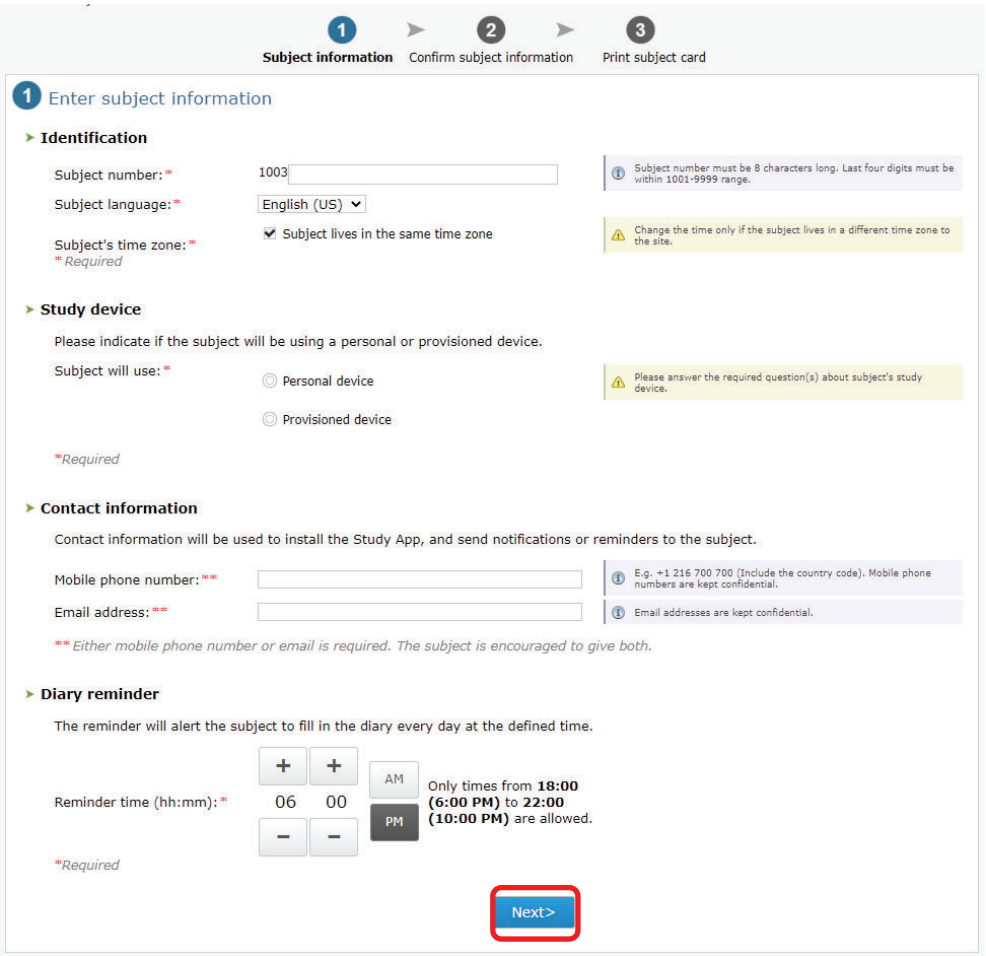
7 How to set up a participant in TrialManager

Participant setup must be performed by site staff through TrialManager for all participants. This must be done when the participant is at your site for their first study visit and not prior as it is a prerequisite for the participant to start entering data in the App. Login to TrialManager to begin.

Select 'Add new participant'



You will then be taken to a screen where you will need to enter the participant number and provide participant information; including their language, time zone, device type, contact information (for receiving activation details), and Daily Diary reminder time.



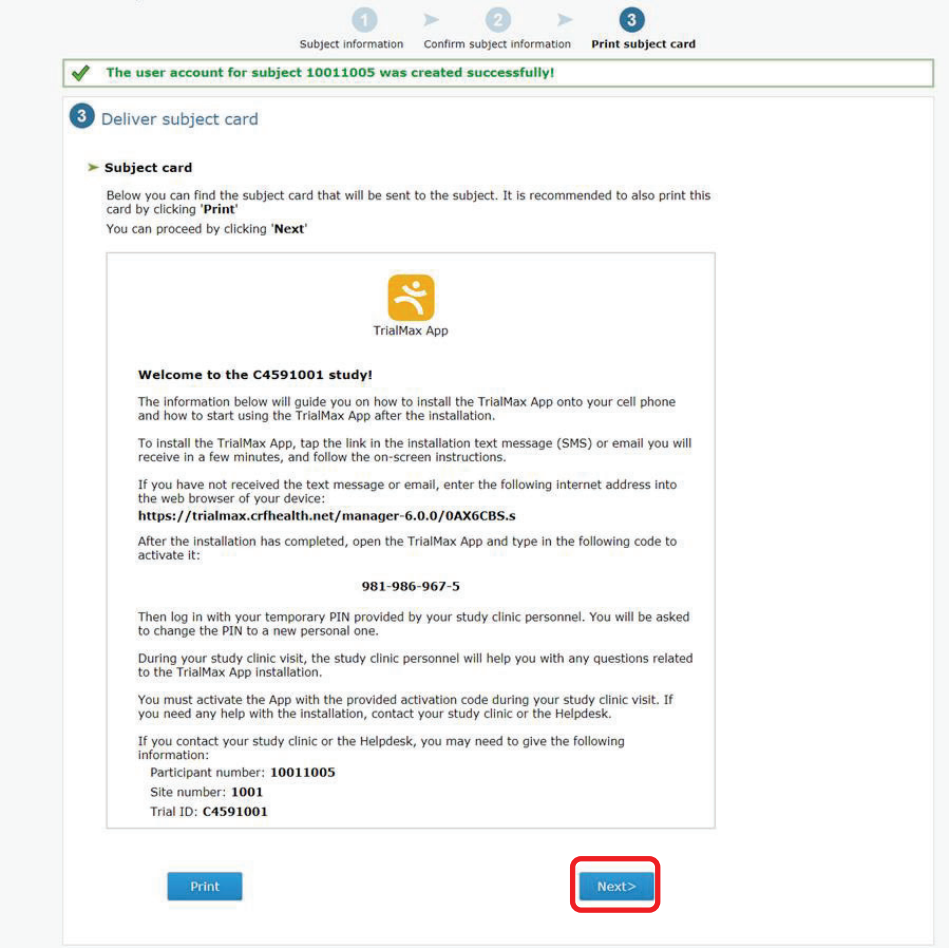
Select “Next” once all the required fields have been filled out.

Note: Mobile phone number and email address are used by the TrialMax system to send an activation code to participant. Therefore, it is important that this information is entered correctly. The participant should enter either their personal email address and/or mobile number to receive the activation code.

Next you will see a confirmation screen, where you will be able to review the participant contact information (mobile phone number and email address) you have entered. Carefully check the details and then select “Confirm”. This will lead you to another page confirming the other participant information that has been entered. Carefully check this information as well, then select “Confirm”.

You will then receive a message on screen that will confirm that the participant was created successfully. You will also see displayed a Participant Card that is sent to the participant via email/SMS. This participant card contains their activation code and applicable instructions for getting set up with the App.

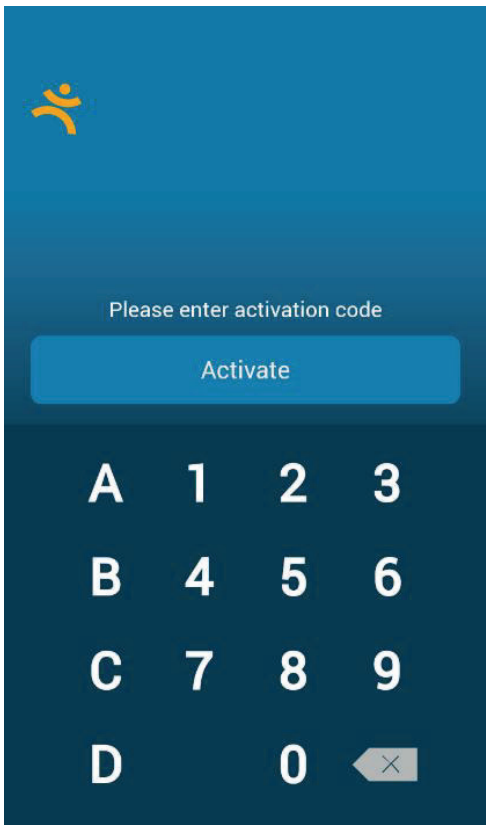
TrialManager will also display a copy of the participant's card on screen and this should be printed if possible, to make it more convenient for the participant. **Be sure to write down the Activation Code displayed on screen and provide this to the participant.**



Press "Next" to conclude setup.

7.1 How to Activate the App

When the participant setup is complete and the participant receives their participant card with the welcome message and activation code, the participant should also be provided with a fully charged Samsung device (provisioned device) to use in the study.



The activation screen is the first screen presented when the provisioned device is turned on. Here, the participant will need to enter the activation code provided in the participant card/ SMS/email message.

Once the activation code has been entered appropriately, the participant will be taken to the login screen where they should enter the default PIN code '**1234**' to login for the first time.

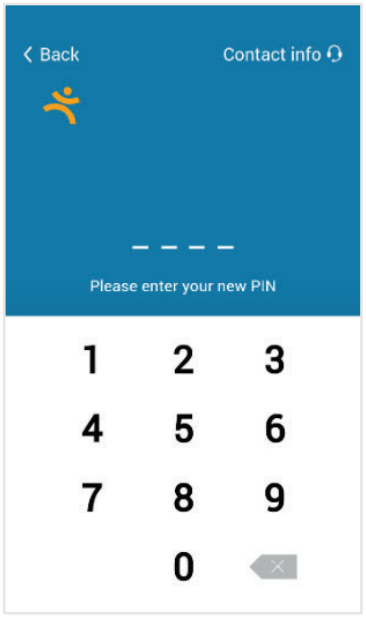
7.1.1 How to setup WiFi on the Provisioned Device

WiFi can be configured on the provisioned devices. To access the WiFi Settings on the provisioned device please follow these steps:

1. Press the 'home' button on the device.
2. Next, press the 'gear' symbol in the top right-hand corner of the screen.
3. Select 'WiFi settings' to display a list of available networks.
4. Select the appropriate network from the list and enter the password if required. *Once the connection is authenticated, the WiFi will connect.*
5. You can then return by clicking the 'home' button, and the App will automatically open.

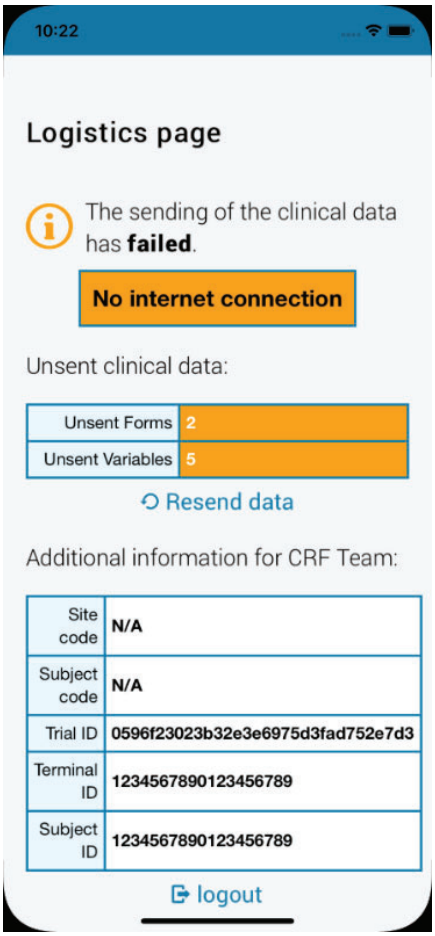
7.1.2 Instructions for reusing the Provisioned Device

The App supports the reuse of the Provisioned Devices, meaning that when one participant has finished using the device, it can be setup for a subsequent participant. To reuse the Provisioned Device for another participant, all unsent clinical data must first be sent to Signant Health.



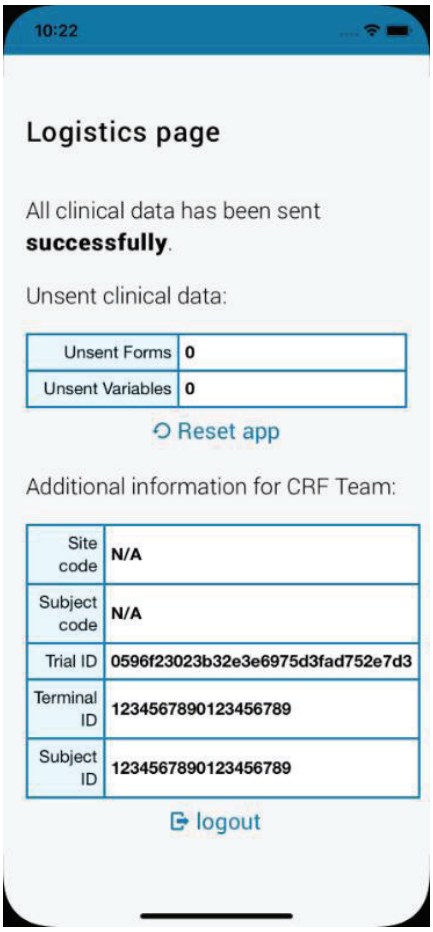
In order to do this, you will first need to login to the Logistics Page on the device.

- From the login screen, first enter the **'Special Code', 8888** to ready the device for the logistics pIN
- Then enter the **'Logistics PIN', 4422**
- Once both PINs have been entered in succession, you will be taken to the Logistics Page



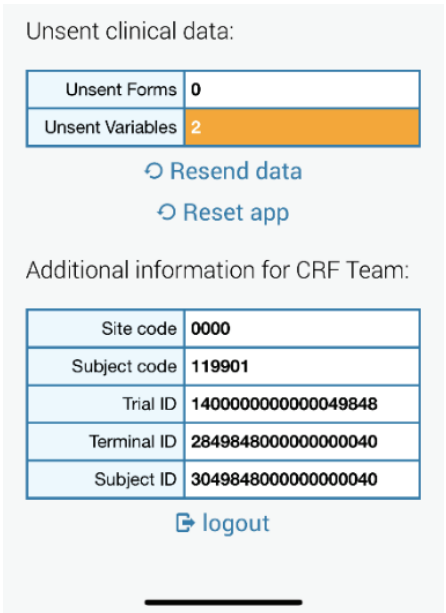
- From the Logistics Page, select 'Resend data' to send any unsent clinical data to Signant Health

The device cannot be reset until all clinical data has successfully been sent.

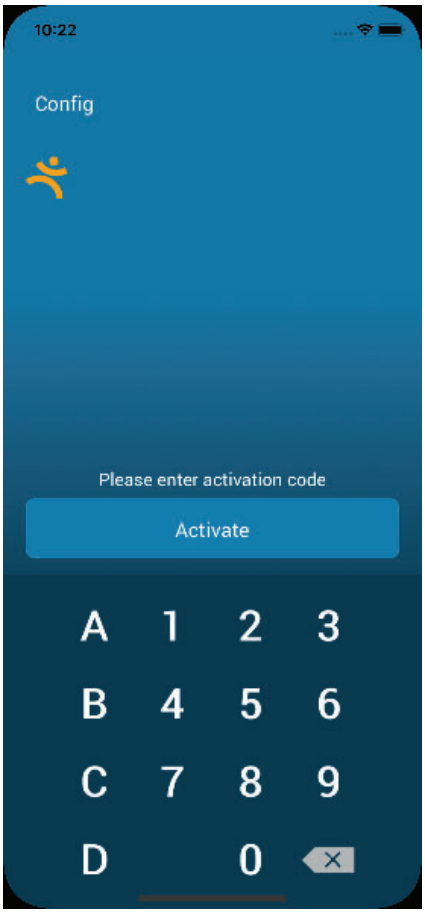


If there is no unsent data, or once all unsent data has successfully been sent, the 'Reset app' button will appear

Selecting 'Reset app Button will reset the App for the next participant



Note: if there are new unsent variables after the data send (due to protocol), but all Daily Diary data has successfully been sent, then the App can still be reset



Selecting the 'Reset app' Button will reset the App; the App will do one more final data sync, then is reset and returns to pre-activated state, ready for another participant to be setup

7.2 Selecting a TrialMax App PIN

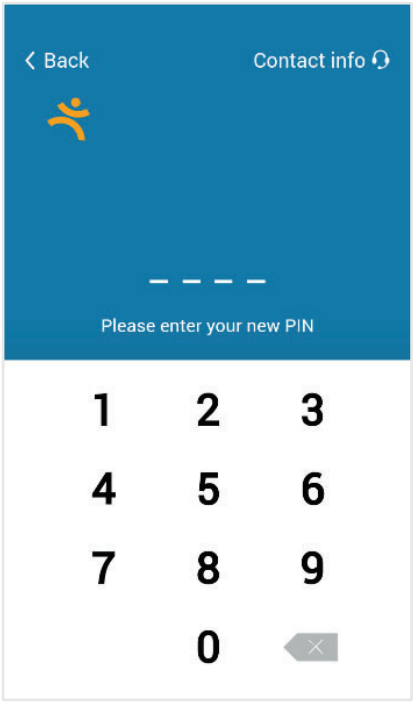
The TrialMax app has certain restrictions for PIN codes:

- Easily remembered by the user (ex: memorable date)
- It cannot be the same as the default PIN code
- It must be four digits
- It must not contain running numbers, e.g. 2345, 5678 will not be accepted
- It must not contain more than three consecutively repeated numbers, e.g. 1111, 2222 will not be accepted

The participant should not share their PIN code with anyone, not even with study staff. The new PIN code must remain confidential, with only the participant knowing the PIN code.

If a participant forgets their PIN code, they will need to contact the helpdesk who will be able to reset the PIN code.

7.3 Logging In & Setting Security Question



After the activation code is entered, the participant will be asked to log in to the App. The user will have to enter the default four-digit PIN code (**1234**) to access the App and will then be prompted to change their PIN to a unique 4-digit PIN.

The participant should not share his/her PIN code with anyone, not even with study staff. The new PIN code must remain confidential, with only the participant knowing the PIN code.

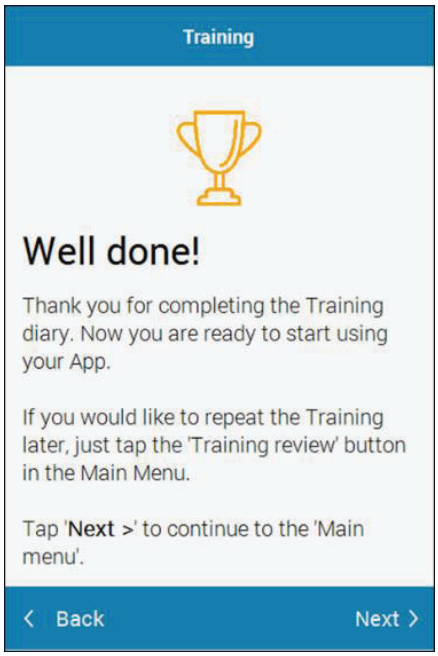
Once the participant has changed their PIN, they will be prompted to select and answer a security question which will assist the helpdesk in resetting their PIN code should they forget it during the study.

After PIN code change and security question selection is fully complete, the participant will be led straight into training on how to use the App.

7.4 Training on the TrialMax App

This initial, mandatory training is required to be completed before the participant can access any other portions of the App (including the Daily Diary).

The training is brief and provides helpful information on App usage as well as a sampling of the types of questions they will encounter while using the App over the course of the study.



Once the participant has concluded the Training, they will receive this screen confirming their completion.

By tapping 'Next' the participant will then be directed to the main menu of the App where they will be able complete their Daily Diary and modify their settings.

***Please note** – any activities performed while logged into the App should be performed by the participant only. Site staff will not need to login to the App for any purposes.*

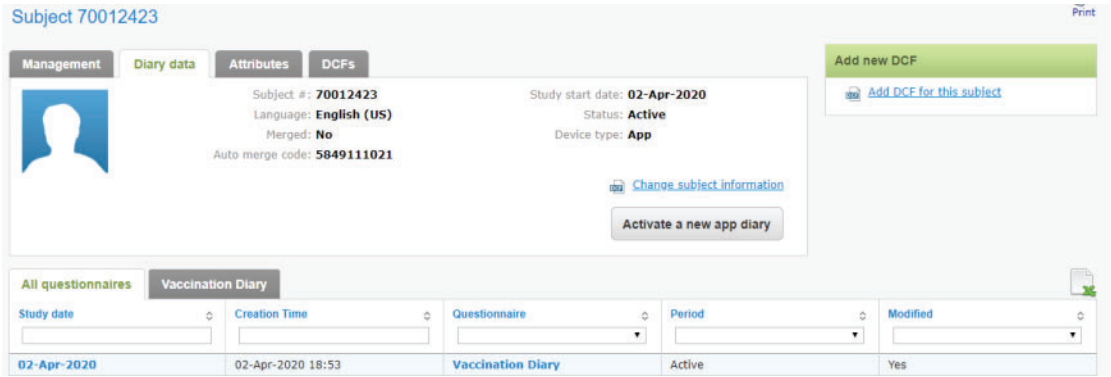
7.5 Software Updates

Site users/participants do not need to take any special action to perform a software update during the course of the study; any available update is automatically downloaded when the TrialMax App is opened and logged in. The login process may appear to take longer than usual when there is a software update, however a percentage will be displayed on the device indicating progress.

8 Managing Participants in TrialManager

8.1 Participant Card

Upon clicking on a participant number from the main page in TrialManager, the participant/subject's information card will display:



This will show details for the participant, including: language, participant status, study group, study start date, and the status of App installation.

Here is where you will activate a new App for a participant due to loss, theft, or change in provision device over the course of the study.

8.2 Activating a new App for an Existing Participant

This section will explain how the participant and site will handle activating new Apps for existing participants.

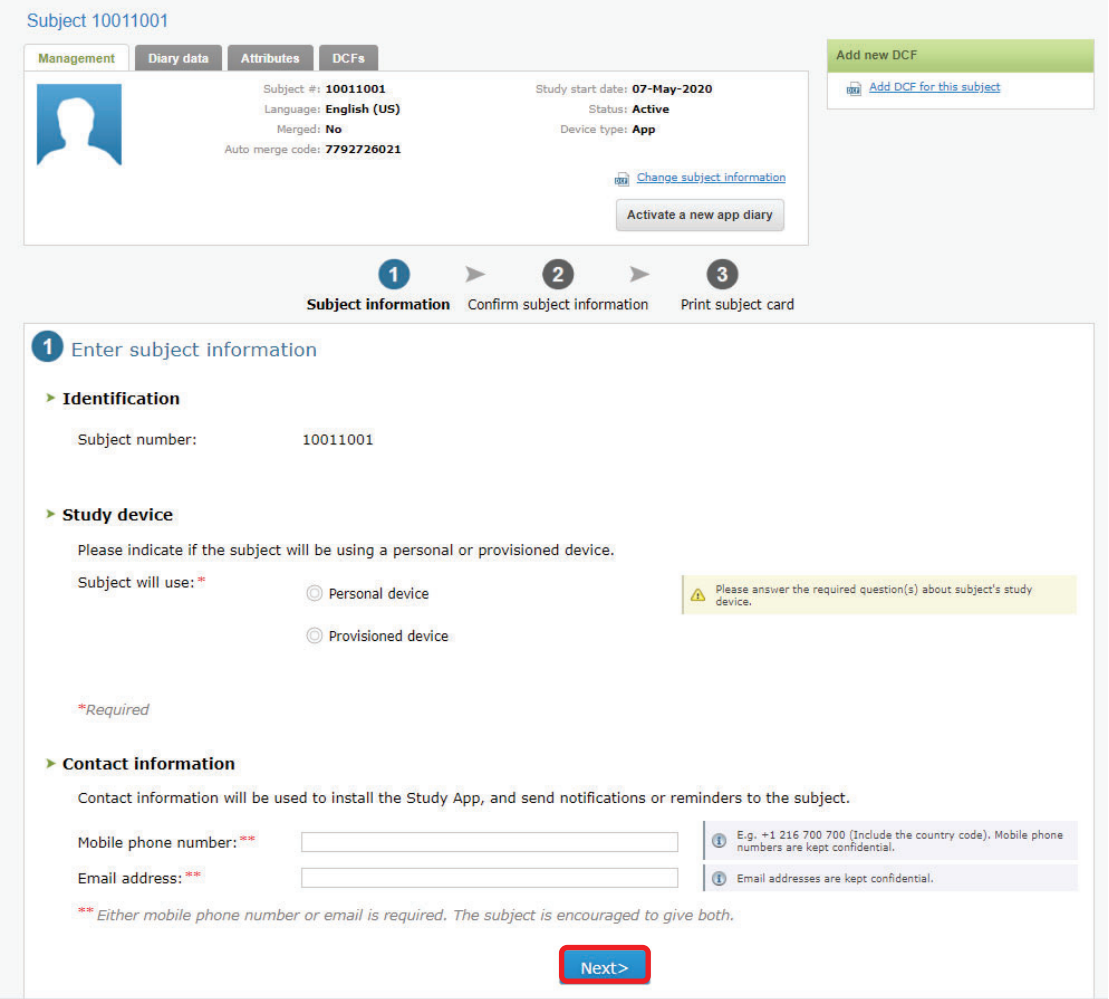
There are three instances in which a new App activation may be needed:

1) If the participant needs a new activation code due broken device, loss or theft of device, changing device during the study, or
2) If the participant has not used their provided activation code within 72 hours which is the expiration limit. This should not occur since the participant is to activate the app as soon as possible at the visit, or
3) If the subject is switching between using their personal device and a provisioned device.

The steps to handle either of these situations are the same:

Login to TrialManager and select the appropriate participant. From the participant card screen, select the 'Activate a new app diary' button

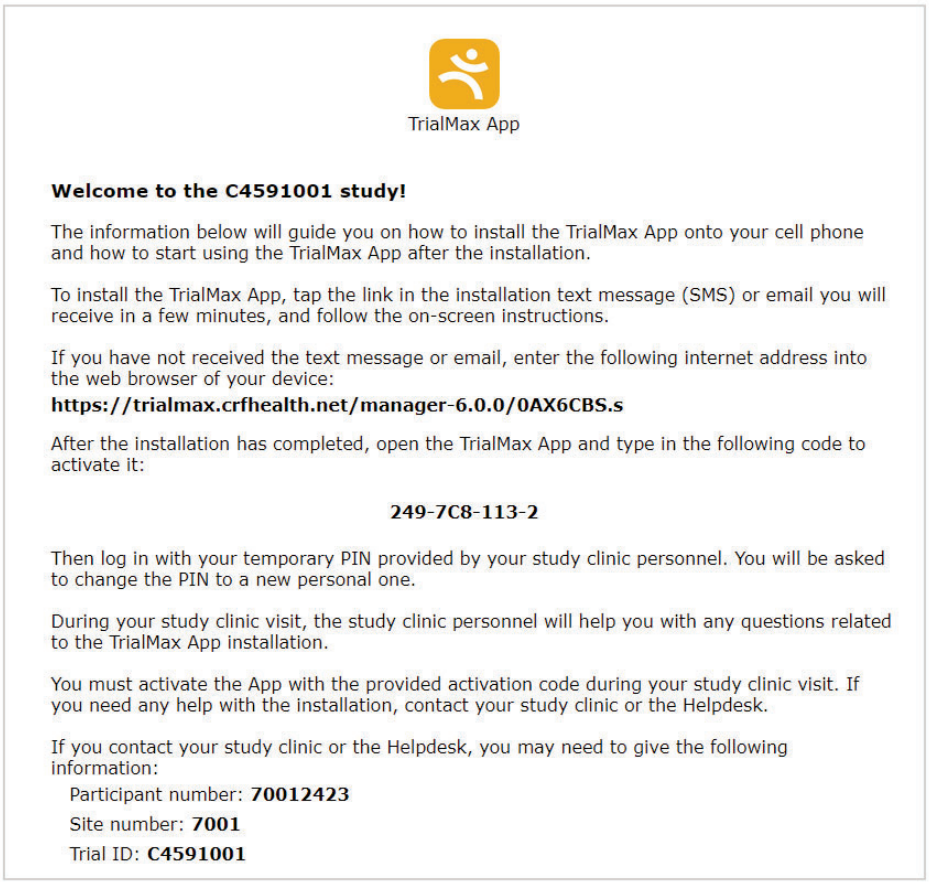
You will be required to select the participant's mobile phone number and/or email address. Once entered, select 'Next'.



On the next page, make sure the entered information is correct, then select “Confirm”.

You will then receive a message on screen that will confirm that the participant was created successfully. You will also see displayed a Participant card that is sent to the participant via email/SMS (if provided). This Participant card contains their new activation code and applicable instructions for getting set up with the App. TrialManager will also display a copy of the card which can be printed to make it more convenient for the participant.

Press ‘Exit’ to return to your site in TrialManager.



TrialMax App

Welcome to the C4591001 study!

The information below will guide you on how to install the TrialMax App onto your cell phone and how to start using the TrialMax App after the installation.

To install the TrialMax App, tap the link in the installation text message (SMS) or email you will receive in a few minutes, and follow the on-screen instructions.

If you have not received the text message or email, enter the following internet address into the web browser of your device:
https://trialmax.crfhealth.net/manager-6.0.0/0AX6CBS.s

After the installation has completed, open the TrialMax App and type in the following code to activate it:

249-7C8-113-2

Then log in with your temporary PIN provided by your study clinic personnel. You will be asked to change the PIN to a new personal one.

During your study clinic visit, the study clinic personnel will help you with any questions related to the TrialMax App installation.

You must activate the App with the provided activation code during your study clinic visit. If you need any help with the installation, contact your study clinic or the Helpdesk.

If you contact your study clinic or the Helpdesk, you may need to give the following information:

Participant number: **70012423**
Site number: **7001**
Trial ID: **C4591001**

The participant should then follow the appropriate steps to install and/or activate their App as outlined in the **Participant Setup** section of this guide.

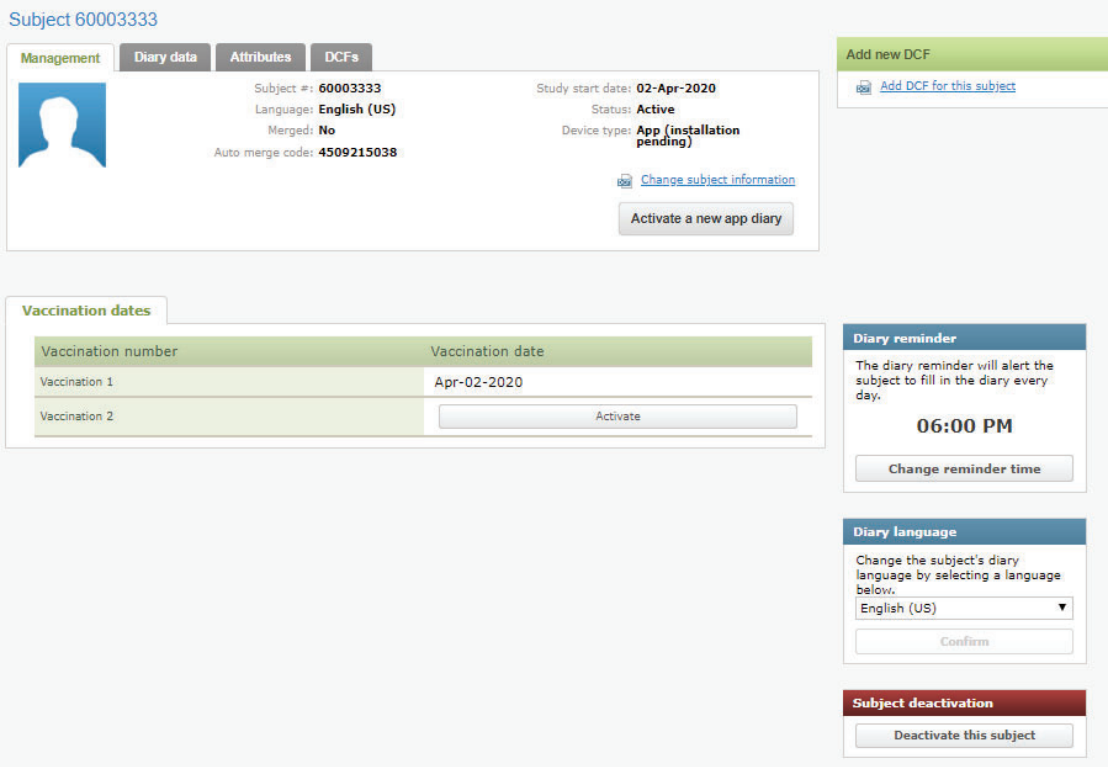
8.3 Management tab

Upon clicking on a participant number from the main page in TrialManager, the participant's information card will display. Clicking on the button titled 'Management' will bring you to a page displaying several options/settings for that participant. Here you can log vaccination dates, update Daily Diary reminder times, change participant language for the App, add or update participant information, and deactivate a participant from the study. Details for each activity are provided in the following sections.

8.3.1 Activating a New Vaccination

When a participant comes in for the first vaccination the participant needs to be set up on TrialManager. The vaccination is automatically activated on the day of a new participant set up, for instance, in the example below, the participant was set up on TrialManager, and vaccinated on 02-Apr-2020.

****If their vaccination date is not set in TrialManager before they leave the site office, they will NOT be able to complete their Daily Diary. Please be sure this is done before they leave.****

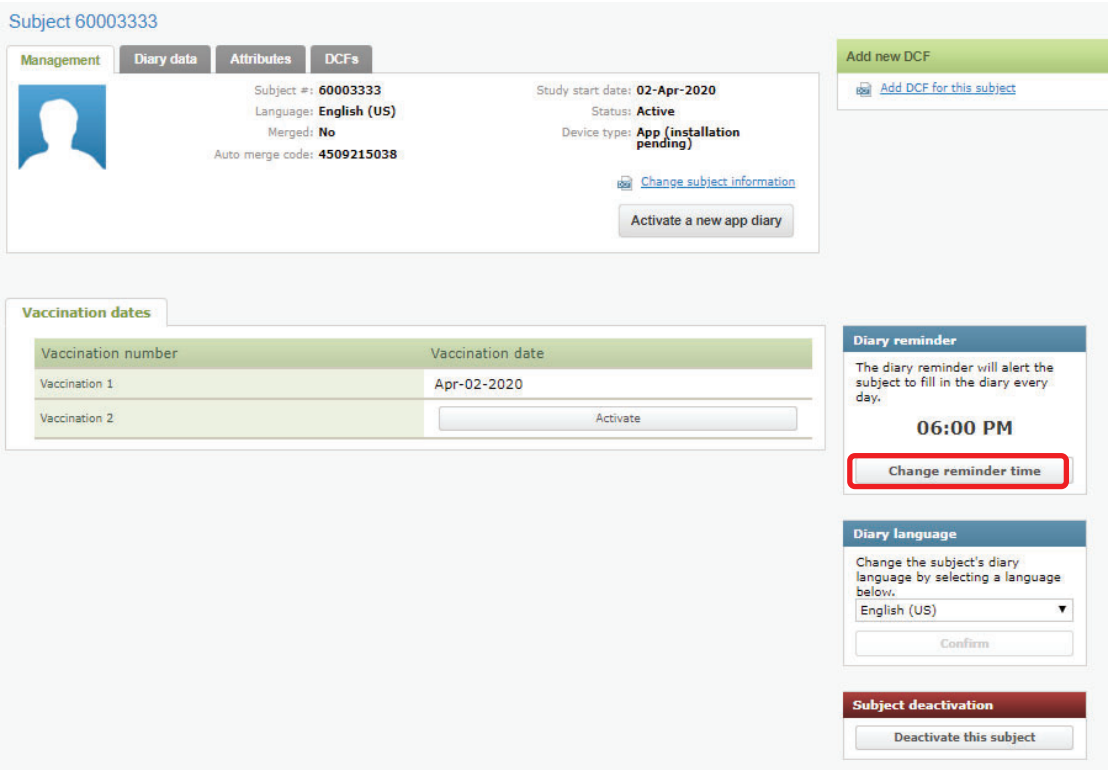


To activate subsequent diaries, click 'Activate' next to the appropriate visit. You will then be asked to select the date of the next vaccination. In the example above, Vaccination 2 still requires activation.

8.3.2 Changing Daily Diary Reminder Time

Site staff have the ability to adjust the time that reminder notifications will be sent to participants to complete their Daily Diary each day (during the post-vaccination periods). This can be modified by accessing the 'Management' tab in TrialManager for the particular participant.

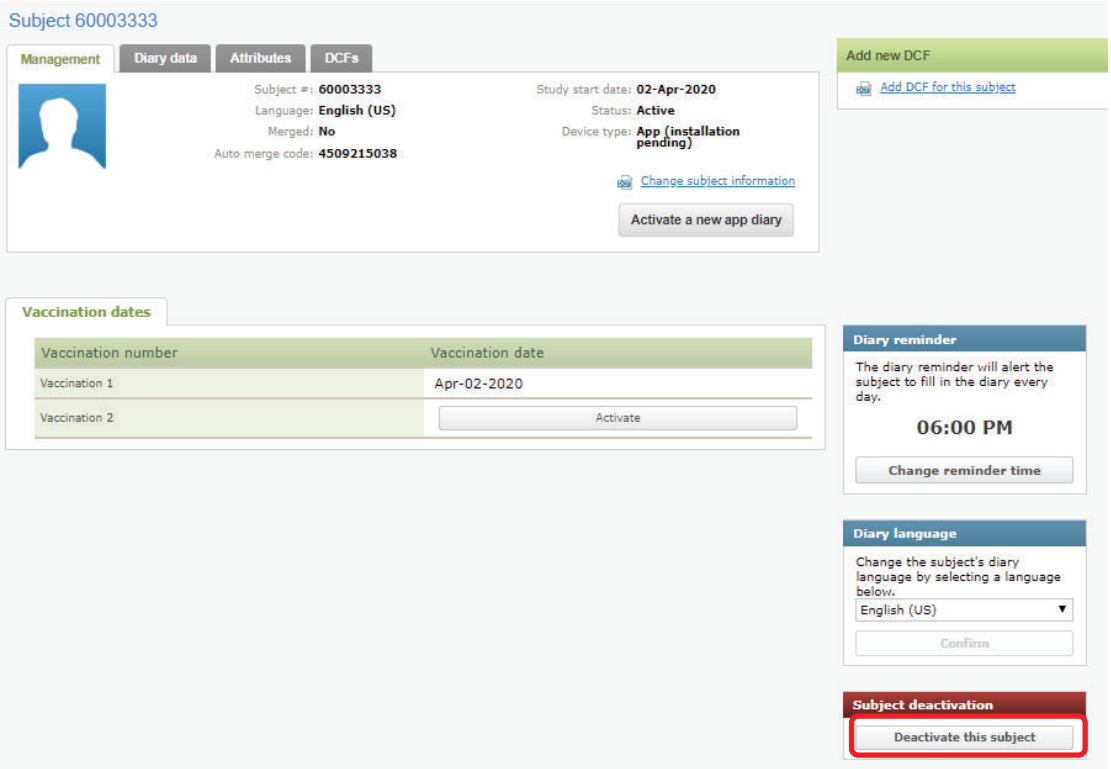
Additionally, participants may change this on their own by logging into the App and selecting 'Information and Settings' from the main menu screen. This will lead them to several options including 'Diary Reminder' which will allow them to adjust the time. The permitted window for reminders to be sent is between 6:00pm and 10:00pm in 15-minute increments.



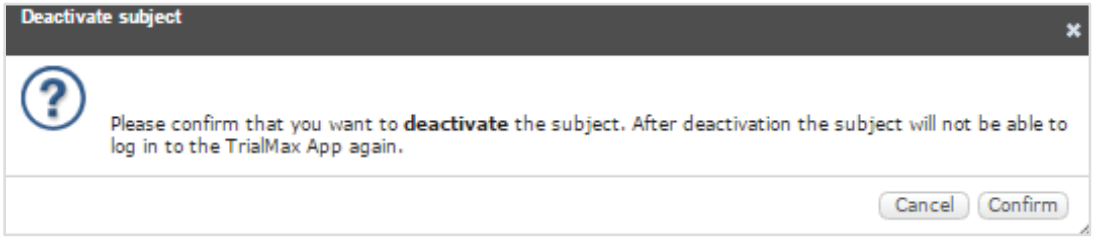
8.4 Deactivating a Participant from the Study

Whether the participant needs to be terminated early or has reached end of study, the participant must be deactivated by the site in TrialManager so that they can no longer login to the App and record study data.

This can be handled by accessing the 'Management' tab in TrialManager for the particular participant. Selecting 'Deactivate this participant' at the very bottom of the page (red header) will deactivate the participant and prevent further login to the App.



Upon clicking this button, you will be asked to confirm this is the desired action:



Selecting “Confirm” will successfully deactivate the participant while clicking “Cancel” will return you to the management tab for that participant.

Once deactivated, participants will no longer display on the ‘Active Participants’ tab in your main page of TrialManager. There is a separate tab titled ‘Deactivated Participants’ that will list any participants who have been deactivated.

8.5 Participant Travel

All provisioned devices will update the time zone automatically if the participant travels between different time zones.

9 How to Request Additional Supplies

If a Site requires device re-supply (for example more provisioned devices than initially allocated in their first shipment), they can request it via the Helpdesk (see Helpdesk phone number in Helpdesk Operating Hours). The request must be approved by the Pfizer Study Team, as all initial site allocations are predetermined.

IMPORTANT NOTE: Remember that provisioned devices can be reused after one participant has finished using the device.

Once approved, it will take 5 business days to prepare any additional shipments. These will be shipped with standard delivery service.

Replacement device requests (for example for devices that are lost or broken during use) should be requested via the Helpdesk. A return shipment label will be provided, along with a Faulty Device Return form to indicate why a replacement is needed.

10 How to return the provisioned devices

At the end of the study ALL devices must be returned to Signant Health.

When returning devices to Signant Health, UPS will need to pick them up. If the site does not have a regular pickup, they will have to call their local UPS office for a pickup. The UPS number is different in each country. The UPS driver can bring a manual waybill to the site if they do not have one. Please see Appendix A for US Logistics device returns instructions.

If you need to return a faulty device to Signant Health, make sure to include a completed Faulty Device Return Form (refer to Signant Health Helpdesk for a form) with the return. Only devices with a Faulty Device Return Form included will be investigated for any unsent data.

11 Frequently Asked Questions

Q: Where can I get more help?

A: Please contact the Signant Health Helpdesk. The Helpdesk is available 24/7 via the phone number provided at the beginning of this guide or on the participant's Quick Reference Guide or Device Label. Please make sure to provide as much information as you can about the problem. For any protocol or health-related questions, please contact your study monitor.

Q: How often should the provisioned device be charged?

A: Please be sure to leave the provisioned device plugged into the charger when not in use to keep it fully charged.

Q: What do I do if my provisioned device does not switch on?

A: Charge the provisioned device for two (2) hours. After charging, turn the device on. If the home screen with message and App icons does not appear, call the Helpdesk.

Q: A participant forgot their PIN code and cannot use their provisioned device. How can the PIN code be retrieved?

A: The participant's PIN code can be retrieved. The participant should call the helpdesk who will retrieve their original PIN code.

Q: How will the participant know how to send data?

A: The App will do it automatically, as long as the device is online. The App will send data each time the participant logs in, and also when saving study answers.

Q: A participant forgot to complete their Daily Diary on one day. Can that be added later on?

A: No. Data cannot be entered retrospectively. However, the participant can update their symptoms – both experience and severity within the same day.

Q: What should be done if the device is unable to send data?

A: As soon as the participant logs into the App, unsent data will be sent immediately once a connection is established. If the participant cannot seem to access a connection, please remind them that all data will be saved and automatically sent the next time they use the device online. If they continue to have issues with data sending, please contact helpdesk.

Q: Is the participant able to change the time and/or settings on a provisioned device?

A: The provisioned device is locked to only enable usage of the App and WiFi setup. The participant cannot change the time or make any other changes to the settings. Also, the device uses the network-provided date and time, so if the participant travels to a different time zone or there are changes in daylight savings, the time will automatically be updated.

Q: Can the participant send data while away on vacation in another country or region?

A: Yes, as long as they can connect to a network. Because of time zone differences, the time of entry may appear different.

Q: What happens if the participant forgets to log out of the App?

A: If the participant does not log out of the App, the App will automatically log the participant out. Please note that any unsaved answers will be deleted from the App at that time.

Q: Will the Helpdesk answer questions related to the Daily Diary itself?

A: The Helpdesk can provide answers on how the Daily Diary functions, but for any vaccine or study-related questions, the participant needs to contact the site.

Q: The participant does not understand the questions. What should I do?

A: If the participant does not understand the questions in the TrialMax App, you may have to explain what is being asked. The Helpdesk cannot answer any health-related questions. For further assistance with the questions, please contact your study monitor.

12 APPENDIX A: US LOGISTICS DEVICE RETURNS

US Logistics Device Returns

- When returning devices to Signant Health, UPS will need to pick them up.
- If the site does not have a regular pickup, they will have to call their local UPS office for a pickup. The number is different in each country.
- When calling for a pickup, the site will need to provide the **CRF Health (note CRF not Signant due to how account is set up with UPS) UPS account number 37V198 and postal code 19462** for the pickup charge to be billed on CRF Health(Signant Health)'s account. Sites with regular pickups will not have any issues with pickup charge.
- For returns from USA based sites can request their own return airway bill, quickly and easily. Using this portal sites will be able to choose a pick-up time which best suits their needs The site address is:

  https://row.ups.com/Ship/Ship/StandardShipGuest
- The UPS driver can bring a manual waybill to the site if they do not have one. Please complete the UPS Manual Waybill using the instructions below.
- For returns from outside of the USA or where a commercial invoice is required please email us-logistics@crfhealth.com please include all the information below and a UPS waybill will be emailed back to you.
  - Protocol Number/CRF Project code:
  - Name of sender:
  - Email address of person to be emailed the labels:
  - Contact number for sender:
  - Site Number:
  - Full Site Address:
  - How many electronic devices are being returned:
  - How many boxes will be used for the return of the devices: