FACT SHEET FOR HEALTH CARE PROVIDERS EMERGENCY USE AUTHORIZATION (EUA) OF BAMLANIVIMAB

AUTHORIZED USE

The U.S. Food and Drug Administration (FDA) has issued an Emergency Use Authorization (EUA) to permit the emergency use of the unapproved product bamlanivimab for the treatment of mild to moderate coronavirus disease 2019 (COVID-19) in adults and pediatric patients with positive results of direct SARS-CoV-2 viral testing who are 12 years of age and older weighing at least 40 kg, and who are at high risk for progressing to severe COVID-19 and/or hospitalization.

LIMITATIONS OF AUTHORIZED USE

- Bamlanivimab is not authorized for use in patients:
 - o who are hospitalized due to COVID-19, OR
 - o who require oxygen therapy due to COVID-19, OR
 - who require an increase in baseline oxygen flow rate due to COVID-19 in those on chronic oxygen therapy due to underlying non-COVID-19 related comorbidity.
- Benefit of treatment with bamlanivimab has not been observed in patients hospitalized due to COVID-19. Monoclonal antibodies, such as bamlanivimab, may be associated with worse clinical outcomes when administered to hospitalized patients with COVID-19 requiring high flow oxygen or mechanical ventilation.

Bamlanivimab has been authorized by FDA for the emergency uses described above. Bamlanivimab is not FDA-approved for these uses.

Bamlanivimab is authorized only for the duration of the declaration that circumstances exist justifying the authorization of the emergency use of bamlanivimab under section 564(b)(1) of the Act, 21 U.S.C. § 360bbb-3(b)(1), unless the authorization is terminated or revoked sooner.

This EUA is for the use of the unapproved product bamlanivimab for the treatment of mild to moderate COVID-19 in adults and pediatric patients with positive results of direct SARS-CoV-2 viral testing who are 12 years of age and older weighing at least 40 kg, and who are at high risk for progressing to severe COVID-19 and/or hospitalization [see Limitations of Authorized Use].

High risk is defined as patients who meet at least one of the following criteria:

- Have a body mass index (BMI) ≥35
- Have chronic kidney disease
- Have diabetes
- Have immunosuppressive disease
- Are currently receiving immunosuppressive treatment
- Are ≥65 years of age

- Are ≥55 years of age AND have
 - o cardiovascular disease, OR
 - o hypertension, OR
 - o chronic obstructive pulmonary disease/other chronic respiratory disease.
- Are 12 17 years of age AND have
 - BMI ≥85th percentile for their age and gender based on CDC growth charts, https://www.cdc.gov/growthcharts/clinical_charts.htm, OR
 - o sickle cell disease, OR
 - o congenital or acquired heart disease, OR
 - o neurodevelopmental disorders, for example, cerebral palsy, OR
 - a medical-related technological dependence, for example, tracheostomy, gastrostomy, or positive pressure ventilation (not related to COVID-19), OR
 - o asthma, reactive airway or other chronic respiratory disease that requires daily medication for control.

Bamlanivimab must be administered by intravenous (IV) infusion.

Bamlanivimab may only be administered in settings in which health care providers have immediate access to medications to treat a severe infusion reaction, such as anaphylaxis, and the ability to activate the emergency medical system (EMS), as necessary.

Health care providers must submit a report on all medication errors and <u>ALL</u>
<u>SERIOUS ADVERSE EVENTS</u> potentially related to bamlanivimab. See Sections 8 and 9 of the Full EUA Prescribing Information for reporting instructions below.

- The authorized dosage for bamlanivimab is a single intravenous (IV) infusion of 700 mg administered as soon as possible after positive viral test for SARS-CoV-2 and within 10 days of symptom onset.
- Bamlanivimab is available as concentrated solution and must be diluted prior to administration.
- Administer bamlanivimab 700 mg via IV infusion over at least 60 minutes via pump or gravity.
- Clinically monitor patients during infusion and observe patients for at least 1 hour after infusion is complete.
- Patients treated with bamlanivimab should continue to self-isolate and use infection control measures (e.g., wear mask, isolate, social distance, avoid sharing personal items, clean and disinfect "high touch" surfaces, and frequent handwashing) according to CDC guidelines.

The authorized dosage may be updated as additional data from clinical trials becomes available.

For information on clinical trials that are testing the use of bamlanivimab in COVID-19, please see www.clinicaltrials.gov.

Contraindications

None.

Dosing

Patient Selection and Treatment Initiation

This section provides essential information on the unapproved product bamlanivimab for the treatment of mild to moderate COVID-19 in adults and pediatric patients with positive results of direct SARS-CoV-2 viral testing who are 12 years of age and older weighing at least 40 kg, and who are at high risk for progressing to severe COVID-19 and/or hospitalization [see Limitations of Authorized Use].

High risk is defined as patients who meet at least one of the following criteria:

- Have a body mass index (BMI) ≥35
- Have chronic kidney disease
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- Are ≥65 years of age
- Are ≥55 years of age AND have
 - o cardiovascular disease, OR
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- Are 12 17 years of age AND have
 - BMI ≥85th percentile for their age and gender based on CDC growth charts, https://www.cdc.gov/growthcharts/clinical_charts.htm, OR
 - o sickle cell disease, OR
 - o congenital or acquired heart disease, OR
 - o neurodevelopmental disorders, for example, cerebral palsy, OR
 - a medical-related technological dependence, for example, tracheostomy, gastrostomy, or positive pressure ventilation (not related to COVID-19), OR
 - asthma, reactive airway or other chronic respiratory disease that requires daily medication for control.

Dosage

The dosage of bamlanivimab in adults and pediatric patients 12 years of age and older weighing at least 40 kg is a single IV infusion of 700 mg bamlanivimab administered over at least 60 minutes. Bamlanivimab should be given as soon as possible after positive results of direct SARS-CoV-2 viral testing and within 10 days of symptom onset.

Dosage Adjustment in Specific Populations

No dosage adjustment is recommended based on age, sex, race, body weight, renal or mild hepatic impairment, during pregnancy or while lactating, or for disease severity or inflammation [see Full EUA Prescribing Information, Use in Specific Populations (11)].

Preparation and Administration

Preparation

Bamlanivimab solution for infusion should be prepared by a qualified healthcare professional using aseptic technique:

 Remove the bamlanivimab vial from refrigerated storage and allow to equilibrate to room temperature for approximately 20 minutes before preparation. Do not expose to direct heat.

- Inspect bamlanivimab visually for particulate matter and discoloration.
 - Bamlanivimab is a clear to slightly opalescent and colorless to slightly yellow to slightly brown solution.
- Gently invert vial by hand approximately 10 times. **Do not shake.**
- Dilute bamlanivimab using a 250 mL prefilled 0.9% Sodium Chloride Injection bag for intravenous infusion according to **Table 1**.
 - Withdraw and discard required volume of 0.9% Sodium Chloride Injection from infusion bag.
 - Withdraw required volume of bamlanivimab from the vial using an appropriately sized syringe.
 - Transfer bamlanivimab to the 0.9% Sodium Chloride Injection infusion bag.
 - Discard any product remaining in the vial.
- Gently invert IV bag by hand approximately 10 times to mix. Do not shake.
- This product is preservative-free and therefore, the diluted infusion solution should be administered immediately. If immediate administration is not possible, store the diluted bamlanivimab infusion solution for up to 24 hours at refrigerated temperature (2°C to 8°C [36°F to 46°F]) or up to 7 hours at room temperature (20°C to 25°C [68°F to 77°F]) including infusion time. If refrigerated, allow the infusion solution to equilibrate to room temperature for approximately 20 minutes prior to administration.

Table 1: Recommended Dilution and Administration Instructions for Bamlanivimab

Treatment	Dose/Volume of Bamlanivimab (# of vials)	Volume of 0.9% sodium chloride to Discard from a 250 mL IV bag	Total Volume for Infusion	Minimum Infusion Rate	Minimum Infusion Time
Bamlanivimab	700 mg/20 mL (1 vial)	70 mL	200 mL	200 mL/hr	60 minutes

<u>Administration</u>

Bamlanivimab infusion solution should be administered by a qualified healthcare professional.

- Gather the recommended materials for infusion:
 - Polyvinylchloride (PVC) infusion set containing a 0.20/0.22 micron in-line polyethersulfone (PES) filter.
- Attach the infusion set to the IV bag.
- Prime the infusion set.
- Administer the infusion solution via pump or gravity over at least 60 minutes (see Table 1).
- Once infusion is complete, flush the infusion line to ensure delivery of the required dose.
- Discard unused product.
- Clinically monitor patients during administration and observe patients for at least 1 hour after infusion is complete.

Storage

Refrigerate unopened vials at 2°C to 8°C (36°F to 46°F) in the original carton to protect from light. Do not freeze, shake, or expose to direct light.

Warnings

There are limited clinical data available for bamlanivimab. Serious and unexpected adverse events may occur that have not been previously reported with bamlanivimab use.

Hypersensitivity Including Anaphylaxis and Infusion-Related Reactions

There is a potential for serious hypersensitivity reaction, including anaphylaxis, with administration of bamlanivimab. If signs and symptoms of a clinically significant hypersensitivity reaction or anaphylaxis occur, immediately discontinue administration and initiate appropriate medications and/or supportive therapy.

Infusion-related reactions have been observed with administration of bamlanivimab.

Signs and symptoms of infusion related reactions may include:

• fever, chills, nausea, headache, bronchospasm, hypotension, angioedema, throat irritation, rash including urticaria, pruritus, myalgia, dizziness.

If an infusion-related reaction occurs, consider slowing or stopping the infusion and administer appropriate medications and/or supportive care.

<u>Limitations of Benefit and Potential for Risk in Patients with Severe COVID-19</u>
Benefit of treatment with bamlanivimab has not been observed in patients hospitalized due to COVID-19. Monoclonal antibodies, such as bamlanivimab, may be associated with worse clinical outcomes when administered to hospitalized patients with COVID-19 requiring high flow oxygen or mechanical ventilation. Therefore, bamlanivimab is not authorized for use in patients [see Limitations of Authorized Use]:

- o who are hospitalized due to COVID-19, OR
- o who require oxygen therapy due to COVID-19, OR
- who require an increase in baseline oxygen flow rate due to COVID-19 in those on chronic oxygen therapy due to underlying non-COVID-19 related comorbidity.

Side Effects

Adverse events have been reported with bamlanivimab [see Full EUA Prescribing Information, Clinical Trials Experience (6.1)].

Additional adverse events associated with the drug may become apparent with more widespread use.

INSTRUCTIONS FOR HEALTHCARE PROVIDERS

As the healthcare provider, you must communicate to your patient or parent/caregiver, as age appropriate, information consistent with the "Fact Sheet for Patients, Parents and Caregivers" (and provide a copy of the Fact Sheet) prior to the patient receiving bamlanivimab, including:

 FDA has authorized the emergency use of bamlanivimab for the treatment of mild to moderate COVID-19 in adults and pediatric patients with positive results of direct SARS-CoV-2 viral testing who are 12 years of age and older weighing at

- least 40 kg, and who are at high risk for progressing to severe COVID-19 and/or hospitalization [see Limitations of Authorized Use].
- The patient or parent/caregiver has the option to accept or refuse bamlanivimab.
- The significant known and potential risks and benefits of bamlanivimab, and the extent to which such potential risks and benefits are unknown.
- Information on available alternative treatments and the risks and benefits of those alternatives, including clinical trials.
- Patients treated with bamlanivimab should continue to self-isolate and use infection control measures (e.g., wear mask, isolate, social distance, avoid sharing personal items, clean and disinfect "high touch" surfaces, and frequent handwashing) according to CDC guidelines.

For information on clinical trials that are testing the use of bamlanivimab for COVID-19, please see www.clinicaltrials.gov.

MANDATORY REQUIREMENTS FOR BAMLANIVIMAB ADMINISTRATION UNDER EMERGENCY USE AUTHORIZATION:

In order to mitigate the risks of using this unapproved product under the EUA and to optimize the potential benefit of bamlanivimab, the following items are required. Use of bamlanivimab under this EUA is limited to the following (all requirements **must** be met):

- 1. Treatment of mild to moderate COVID-19 in adults and pediatric patients with positive results of direct SARS-CoV-2 viral testing who are 12 years of age and older weighing at least 40 kg, and who are at high risk for progressing to severe COVID-19 and/or hospitalization [see Limitations of Authorized Use].
- 2. As the healthcare provider, communicate to your patient or parent/caregiver, as age appropriate, information consistent with the "Fact Sheet for Patients, Parents and Caregivers" prior to the patient receiving bamlanivimab. Healthcare providers (to the extent practicable given the circumstances of the emergency) must document in the patient's medical record that the patient/caregiver has been:
 - a. Given the "Fact Sheet for Patients, Parents and Caregivers",
 - b. Informed of alternatives to receiving authorized bamlanivimab, and
 - c. Informed that bamlanivimab is an unapproved drug that is authorized for use under this Emergency Use Authorization.
- 3. Patients with known hypersensitivity to any ingredient of bamlanivimab must not receive bamlanivimab.
- 4. The prescribing health care provider and/or the provider's designee are/is responsible for mandatory reporting of all medication errors and serious adverse events* potentially related to bamlanivimab treatment within 7 calendar days from the onset of the event. The reports should include unique identifiers and the words "Bamlanivimab treatment under Emergency Use Authorization (EUA)" in the description section of the report.
 - Submit adverse event reports to FDA MedWatch using one of the following methods:
 - Complete and submit the report online: www.fda.gov/medwatch/report.htm, or

- By using a postage-paid Form FDA 3500 (available at http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM163919.pdf) and returning by mail (MedWatch, 5600 Fishers Lane, Rockville, MD 20852-9787), or by fax (1-800-FDA-0178), or
- Call 1-800-FDA-1088 to request a reporting form
- Submitted reports should include in the field name, "Describe Event, Problem, or Product Use/Medication Error" the statement "Bamlanivimab treatment under Emergency Use Authorization (EUA)"

*Serious Adverse Events are defined as:

- death:
- a life-threatening adverse event;
- inpatient hospitalization or prolongation of existing hospitalization;
- a persistent or significant incapacity or substantial disruption of the ability to conduct normal life functions;
- a congenital anomaly/birth defect;
- a medical or surgical intervention to prevent death, a life-threatening event, hospitalization, disability, or congenital anomaly.
- 5. The prescribing health care provider and/or the provider's designee are/is to provide mandatory responses to requests from FDA for information about adverse events and medication errors following receipt of bamlanivimab.
- 6. OTHER REPORTING REQUIREMENTS

In addition, please provide a copy of all FDA MedWatch forms to:

Eli Lilly and Company, Global Patient Safety

Fax: 1-317-277-0853

E-mail: mailindata gsmtindy@lilly.com

Or call Eli Lilly and Company at 1-855-LillyC19 (1-855-545-5921) to report adverse events.

APPROVED AVAILABLE ALTERNATIVES

There is no adequate, approved and available alternative to bamlanivimab for patients who have mild to moderate COVID-19 who are at high risk for progressing to severe COVID-19 and/or hospitalization. Additional information on COVID-19 treatments can be found at https://www.cdc.gov/coronavirus/2019-ncov/index.html. The health care provider should visit https://clinicaltrials.gov/ to determine whether the patient may be eligible for enrollment in a clinical trial.

AUTHORITY FOR ISSUANCE OF THE EUA

The Secretary of the Department of Health and Human Services (HHS) has declared a public health emergency that justifies the emergency use of drugs and biological products during the COVID-19 pandemic. FDA has issued this EUA, requested by Eli Lilly and Company for the <u>unapproved product</u> bamlanivimab for the treatment of mild to moderate COVID-19 in adults and pediatric patients with positive results of direct SARS-CoV-2 viral testing who are 12 years of age and older weighing at least 40 kg, and who

are at high risk for progressing to severe COVID-19 and/or hospitalization. As a health care provider, you must comply with the mandatory requirements of the EUA (see above).

Although limited scientific information is available, based on the totality of the scientific evidence available to date, it is reasonable to believe that bamlanivimab may be effective for the treatment of mild to moderate COVID-19 in certain high-risk patients as specified in this Fact Sheet. You may be contacted and asked to provide information to help with the assessment of the use of the product during this emergency.

This EUA for bamlanivimab will end when the Secretary determines that the circumstances justifying the EUA no longer exist or when there is a change in the approval status of the product such that an EUA is no longer needed.

CONTACT INFORMATION

For additional information visit www.bamlanivimab.com

If you have questions, please contact 1-855-LillyC19 (1-855-545-5921)

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¹ The health care provider should visit clinicaltrials.gov to determine whether there is an active clinical trial for the product in this disease/condition and whether enrollment of the patient(s) in a clinical trial is more appropriate than product use under this EUA.