

May 17, 2022

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Dear Ms. Mineo:

On February 4, 2020, pursuant to Section 564(b)(1)(C) of the Federal Food, Drug, and Cosmetic Act (the FD&C Act or the Act), the Secretary of the Department of Health and Human Services (HHS) determined that there is a public health emergency that has a significant potential to affect national security or the health and security of United States citizens living abroad, and that involves the virus that causes Coronavirus Disease 2019 (COVID-19).¹ On the basis of such determination, the Secretary of HHS on March 27, 2020, declared that circumstances exist justifying the authorization of emergency use of drugs and biological products during the COVID-19 pandemic, pursuant to Section 564 of the Act (21 U.S.C. 360bbb-3), subject to terms of any authorization issued under that section.²

On December 11, 2020, the Food and Drug Administration (FDA) issued an Emergency Use Authorization (EUA) for emergency use of Pfizer-BioNTech COVID-19 Vaccine for the prevention of COVID-19 for individuals 16 years of age and older pursuant to Section 564 of the Act. FDA reissued the letter of authorization on: December 23, 2020,³ February 25, 2021,⁴ May

¹ U.S. Department of Health and Human Services, Determination of a Public Health Emergency and Declaration that Circumstances Exist Justifying Authorizations Pursuant to Section 564(b) of the FD&C Act, 21 U.S.C. § 360bbb-3, February 4, 2020.

² U.S. Department of Health and Human Services, *Declaration that Circumstances Exist Justifying Authorizations Pursuant to Section 564(b) of the Federal Food, Drug, and Cosmetic Act, 21 U.S.C. § 360bbb-3*, 85 FR 18250 (April 1, 2020).

³ In the December 23, 2020 revision, FDA removed reference to the number of doses per vial after dilution from the letter of authorization, clarified the instructions for vaccination providers reporting to VAERS, and made other technical corrections. FDA also revised the Fact Sheet for Healthcare Providers Administering Vaccine (Vaccination Providers) to clarify the number of doses of vaccine per vial after dilution and the instructions for reporting to VAERS. In addition, the Fact Sheet for Healthcare Providers Administering Vaccine (Vaccination Providers) and the Fact Sheet for Recipients and Caregivers were revised to include additional information on safety monitoring and to clarify information about the availability of other COVID-19 vaccines.

⁴ In the February 25, 2021 revision, FDA allowed flexibility on the date of submission of monthly periodic safety reports and revised the requirements for reporting of vaccine administration errors by Pfizer Inc. The Fact Sheet for Health Care Providers Administering Vaccine (Vaccination Providers) was revised to provide an update to the storage and transportation temperature for frozen vials, direct the provider to the correct CDC website for information on monitoring vaccine recipients for the occurrence of immediate adverse reactions, to include data from a developmental toxicity study, and add adverse reactions that have been identified during post authorization use. The Fact Sheet for Recipients and Caregivers was revised to add adverse reactions that have been identified during post authorization use.

10, 2021,⁵ June 25, 2021,⁶ and August 12, 2021.⁷ On August 23, 2021, FDA approved COMIRNATY (COVID-19 Vaccine, mRNA)⁸ and reissued the letter in its entirety for both Pfizer-BioNTech COVID-19 Vaccine and certain uses of COMIRNATY (COVID-19 Vaccine, mRNA).⁹ Subsequently, FDA reissued the letter of authorization on September 22, 2021,¹⁰

⁵ In the May 10, 2021 revision, FDA authorized Pfizer-BioNTech Vaccine for the prevention of COVID-19 in individuals 12 through 15 years of age, as well as for individuals 16 years of age and older. In addition, FDA revised the Fact Sheet for Healthcare Providers Administering Vaccine (Vaccination Providers) to include the following Warning: “Syncope (fainting) may occur in association with administration of injectable vaccines, in particular in adolescents. Procedures should be in place to avoid injury from fainting.” In addition, the Fact Sheet for Recipients and Caregivers was revised to instruct vaccine recipients or their caregivers to tell the vaccination provider about fainting in association with a previous injection.

⁶ In the June 25, 2021 revision, FDA clarified terms and conditions that relate to export of Pfizer-BioNTech COVID-19 Vaccine from the United States. In addition, the Fact Sheet for Healthcare Providers Administering Vaccine (Vaccination Providers) was revised to include a Warning about myocarditis and pericarditis following administration of the Pfizer-BioNTech COVID-19 Vaccine. The Fact Sheet for Recipients and Caregivers was updated to include information about myocarditis and pericarditis following administration of the Pfizer-BioNTech COVID-19 Vaccine.

⁷ In the August 12, 2021 revision, FDA authorized a third dose of the Pfizer-BioNTech COVID-19 Vaccine administered at least 28 days following the two dose regimen of this vaccine in individuals 12 years of age or older who have undergone solid organ transplantation, or individuals 12 years of age or older who are diagnosed with conditions that are considered to have an equivalent level of immunocompromise.

⁸ COMIRNATY (COVID-19 Vaccine, mRNA) was approved for active immunization to prevent COVID-19 caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) in individuals 16 years of age and older.

⁹ In the August 23, 2021 revision, FDA clarified that, subsequent to the FDA approval of COMIRNATY (COVID-19 Vaccine, mRNA) for the prevention of COVID-19 for individuals 16 years of age and older, this EUA would remain in place for the Pfizer-BioNTech COVID-19 Vaccine for the previously-authorized indication and uses. It also authorized COMIRNATY (COVID-19 Vaccine, mRNA) under this EUA for certain uses that are not included in the approved biologics license application (BLA). In addition, the Fact Sheet for Healthcare Providers Administering Vaccine (Vaccination Providers) was revised to provide updates on expiration dating of the authorized Pfizer-BioNTech COVID-19 Vaccine and updated language regarding warnings and precautions related to myocarditis and pericarditis. The Fact Sheet for Recipients and Caregivers was updated as the Vaccine Information Fact Sheet for Recipients and Caregivers, which comprises the Fact Sheet for the authorized Pfizer-BioNTech COVID-19 Vaccine and information about the FDA-licensed vaccine, COMIRNATY (COVID-19 Vaccine, mRNA).

¹⁰ In the September 22, 2021 revision, FDA authorized the administration of a single booster dose of COMIRNATY (COVID-19 Vaccine, mRNA) or Pfizer-BioNTech COVID-19 Vaccine at least 6 months after completing the primary series of this vaccine in individuals: 65 years of age and older; 18 through 64 years of age at high risk of severe COVID-19; and 18 through 64 years of age whose frequent institutional or occupational exposure to SARS-CoV-2 puts them at high risk of serious complications of COVID-19 including severe COVID-19.

October 20, 2021,¹¹ October 29, 2021,¹² November 19, 2021,¹³ December 9, 2021,¹⁴ December 16, 2021,¹⁵ January 3, 2022,¹⁶ and March 29, 2022.¹⁷

On May 17, 2022, having concluded that revising this EUA is appropriate to protect the public health or safety under Section 564(g)(2) of the Act, FDA is reissuing the March 29, 2022 letter

¹¹ In the October 20, 2021 revision, FDA clarified eligibility for the booster dose of COMIRNATY (COVID-19 Vaccine, mRNA) or Pfizer-BioNTech COVID-19 Vaccine and authorized the administration of a single booster dose of Pfizer-BioNTech COVID-19 Vaccine or COMIRNATY (COVID-19 Vaccine, mRNA) as a heterologous booster dose following completion of primary vaccination with another authorized COVID-19 vaccine. The eligible population(s) and dosing interval for the heterologous booster dose are the same as those authorized for a booster dose of the vaccine used for primary vaccination.

¹² In the October 29, 2021 revision, FDA authorized: 1) the use of Pfizer-BioNTech COVID-19 Vaccine for children 5 through 11 years of age; and 2) a manufacturing change to include an additional formulation of the Pfizer-BioNTech COVID-19 Vaccine that uses tromethamine (Tris) buffer instead of phosphate buffered saline (PBS) used in the originally authorized Pfizer-BioNTech COVID-19 Vaccine. The formulation of the Pfizer-BioNTech COVID-19 Vaccine that uses Tris buffer was authorized in two presentations: 1) multiple dose vials, with gray caps and labels with a gray border, formulated to provide, without need for dilution, doses (each 0.3 mL dose containing 30 microgram (mcg) nucleoside-modified messenger RNA (modRNA)) for individuals 12 years of age and older; and 2) multiple dose vials, with orange caps and labels with an orange border, formulated to provide, after dilution, doses (each 0.2 mL dose containing 10 mcg modRNA) for individuals 5 through 11 years of age. The formulation that uses Tris buffer is the only formulation that is authorized for use in individuals 5 through 11 years of age.

¹³ In the November 19, 2021 revision, FDA authorized the use of COMIRNATY (COVID-19 Vaccine, mRNA) and the Pfizer-BioNTech COVID-19 Vaccine as a single booster dose in individuals 18 years of age or older at least 6 months after completing the primary series of this vaccine (i.e., as a homologous booster dose), and as a single booster dose following completion of primary vaccination with another authorized COVID-19 vaccine (i.e., as a heterologous booster dose) in individuals 18 years of age or older. The dosing interval for the heterologous booster dose is the same as that authorized for a booster dose of the vaccine used for primary vaccination.

¹⁴ In the December 9, 2021 revision, FDA authorized the use of the vaccine as a single booster dose in individuals 16 and 17 years of age, at least 6 months after completing the primary series of this vaccine (i.e., as a homologous booster dose).

¹⁵ On December 16, 2021, FDA approved a supplement to the COMIRNATY (COVID-19 Vaccine, mRNA) BLA to include a new 30 mcg dose formulation of COMIRNATY (COVID-19 Vaccine, mRNA) that uses Tris buffer instead of the PBS buffer used in the originally approved vaccine. At that time the EUA was revised to clarify that the Pfizer-BioNTech COVID-19 Vaccine that uses Tris buffer and COMIRNATY (COVID-19 Vaccine, mRNA) that uses the Tris buffer have the same formulation and can be used interchangeably. In addition, FDA extended the expiration date of the Pfizer-BioNTech COVID-19 Vaccine that uses the Tris buffer from 6 months to 9 months when held at -90 °C to -60 °C. FDA also updated the fact sheets to reflect these revisions.

¹⁶ In the January 3, 2022 revision, FDA: (i) authorized the use of the vaccine as a single booster dose in individuals 12 through 15 years of age; (ii) lowered the authorized dosing interval of the homologous booster dose to at least five (5) months after completion of the primary series; and (iii) authorized a third primary series dose of the vaccine administered at least 28 days following the two dose regimen of this vaccine in individuals 5 through 11 years of age who have undergone solid organ transplantation, or 5 through 11 years of age who are diagnosed with conditions that are considered to have an equivalent level of immunocompromise. In addition, FDA revised the Fact Sheets for Healthcare Providers Administering Vaccine (Vaccination Providers) and the Fact Sheet for Recipients and Caregivers to reflect these revisions.

¹⁷ In the March 29, 2022 revision, FDA authorized a second booster dose of COMIRNATY (COVID-19 Vaccine, mRNA) or the Pfizer-BioNTech COVID-19 Vaccine at least 4 months after receipt of a first booster dose of any FDA-authorized or approved COVID-19 vaccine to: 1) individuals 50 years of age and older; and 2) individuals 12 years of age or older who have undergone solid organ transplantation, or individuals 12 years of age or older who have been diagnosed with conditions that are considered to have an equivalent level of immunocompromise.

of authorization in its entirety with revisions incorporated to authorize the administration of a single booster dose of the Pfizer-BioNTech COVID-19 Vaccine in individuals 5 through 11 years of age, at least 5 months after completing a primary series with this vaccine.

For the December 11, 2020 authorization for individuals 16 years of age and older, FDA reviewed safety and effectiveness data from an ongoing Phase 1/2/3 trial in approximately 44,000 participants randomized 1:1 to receive Pfizer-BioNTech COVID-19 Vaccine or saline control. The trial enrolled participants 12 years of age and older. FDA's review at that time considered the safety and effectiveness data as they related to the request for emergency use authorization in individuals 16 years of age and older. FDA's review of the available safety data from 37,586 of the participants 16 years of age and older, who were followed for a median of two months after receiving the second dose, did not identify specific safety concerns that would preclude issuance of an EUA. FDA's analysis of the available efficacy data from 36,523 participants 12 years of age and older without evidence of SARS-CoV-2 infection prior to 7 days after dose 2 confirmed that the vaccine was 95% effective (95% credible interval 90.3, 97.6) in preventing COVID-19 occurring at least 7 days after the second dose (with 8 COVID-19 cases in the vaccine group compared to 162 COVID-19 cases in the placebo group). Based on these data, and review of manufacturing information regarding product quality and consistency, FDA concluded that it is reasonable to believe that Pfizer-BioNTech COVID-19 Vaccine may be effective. Additionally, FDA determined it is reasonable to conclude, based on the totality of the scientific evidence available, that the known and potential benefits of Pfizer-BioNTech COVID-19 Vaccine outweigh the known and potential risks of the vaccine, for the prevention of COVID-19 in individuals 16 years of age and older. Finally, on December 10, 2020, the Vaccines and Related Biological Products Advisory Committee voted in agreement with this conclusion.

For the May 10, 2021 authorization for individuals 12 through 15 years of age, FDA reviewed safety and effectiveness data from the above-referenced, ongoing Phase 1/2/3 trial that enrolled approximately 46,000 participants, including 2,260 participants 12 through 15 years of age. Trial participants were randomized 1:1 to receive Pfizer-BioNTech COVID-19 Vaccine or saline control. FDA's review of the available safety data from 2,260 participants 12 through 15 years of age, who were followed for a median of 2 months after receiving the second dose, did not identify specific safety concerns that would preclude issuance of an EUA. FDA's analysis of SARS-CoV-2 50% neutralizing antibody titers 1 month after the second dose of Pfizer-BioNTech COVID-19 Vaccine in a subset of participants who had no serological or virological evidence of past SARS-CoV-2 infection confirm that the geometric mean antibody titer in participants 12 through 15 years of age was non-inferior to the geometric mean antibody titer in participants 16 through 25 years of age. FDA's analysis of available descriptive efficacy data from 1,983 participants 12 through 15 years of age without evidence of SARS-CoV-2 infection prior to 7 days after dose 2 confirm that the vaccine was 100% effective (95% confidence interval 75.3, 100.0) in preventing COVID-19 occurring at least 7 days after the second dose (with no COVID-19 cases in the vaccine group compared to 16 COVID-19 cases in the placebo group). Based on these data, FDA concluded that it is reasonable to believe that Pfizer-BioNTech COVID-19 Vaccine may be effective in individuals 12 through 15 years of age. Additionally, FDA determined it is reasonable to conclude, based on the totality of the scientific evidence available, that the known and potential benefits of Pfizer-BioNTech COVID-19

Vaccine outweigh the known and potential risks of the vaccine, for the prevention of COVID-19 in individuals 12 through 15 years of age.

For the August 12, 2021 authorization of a third primary series dose in individuals 12 years of age or older who have undergone solid organ transplantation, or individuals 12 years of age or older who are diagnosed with conditions that are considered to have an equivalent level of immunocompromise, FDA reviewed safety and effectiveness data reported in two manuscripts on solid organ transplant recipients. The first study was a single arm study conducted in 101 individuals who had undergone various solid organ transplant procedures (heart, kidney, liver, lung, pancreas) a median of 97±8 months earlier. A third dose of the Pfizer-BioNTech COVID-19 Vaccine was administered to 99 of these individuals approximately 2 months after they had received a second dose. Levels of total SARS-CoV-2 binding antibodies meeting the pre-specified criteria for success occurred four weeks after the third dose in 26/59 (44.0%) of those who were initially considered to be seronegative and received a third dose of the Pfizer-BioNTech COVID-19 Vaccine; 67/99 (68%) of the entire group receiving a third vaccination were subsequently considered to have levels of antibodies indicative of a significant response. In those who received a third vaccine dose, the adverse event profile was similar to that after the second dose and no grade 3 or grade 4 events were reported. A supportive secondary study was a double-blind, randomized-controlled study conducted in 120 individuals who had undergone various solid organ transplant procedures (heart, kidney, kidney-pancreas, liver, lung, pancreas) a median of 3.57 years earlier (range 1.99-6.75 years). A third dose of a similar messenger RNA vaccine (the Moderna COVID-19 vaccine) was administered to 60 individuals approximately 2 months after they had received a second dose (i.e., doses at 0, 1 and 3 months); saline placebo was given to 60 individuals for comparison. The primary outcome was anti-RBD antibody at 4 months greater than 100 U/mL. This titer was selected based on NHP challenge studies as well as a large clinical cohort study to indicate this antibody titer was protective. Secondary outcomes were based on a virus neutralization assay and polyfunctional T cell responses. Baseline characteristics were comparable between the two study arms as were pre-intervention anti-RBD titer and neutralizing antibodies. Levels of total SARS-CoV-2 binding antibodies indicative of a significant response occurred four weeks after the third dose in 33/60 (55.0%) of the Moderna COVID-19 vaccinated group and 10/57 (17.5%) of the placebo individuals. In the 60 individuals who received a third vaccine dose, the adverse event profile was similar to that after the second dose and no grade 3 or grade 4 adverse events were reported. Despite the moderate enhancement in antibody titers, the totality of data (i.e., supportive paper by Hall et al. demonstrated efficacy of the product in the elderly and persons with co-morbidities) supports the conclusion that a third dose of the Pfizer-BioNTech COVID-19 Vaccine may be effective in this population, and that the known and potential benefits of a third dose of Pfizer-BioNTech COVID-19 Vaccine outweigh the known and potential risks of the vaccine for immunocompromised individuals at least 12 years of age who have received two doses of the Pfizer-BioNTech COVID-19 Vaccine and who have undergone solid organ transplantation, or who are diagnosed with conditions that are considered to have an equivalent level of immunocompromise.

For the September 22, 2021 authorization of a single booster dose administered at least 6 months after completing the primary series in individuals: 65 years of age and older; 18 through 64 years of age at high risk of severe COVID-19; and 18 through 64 years of age whose frequent

institutional or occupational exposure to SARS-CoV-2 puts them at high risk of serious complications of COVID-19 including severe COVID-19, FDA reviewed safety and effectiveness data from the above-referenced, ongoing Phase 1/2/3 trial in which 329 participants 18 through 75 years of age received a booster dose of the Pfizer-BioNTech COVID-19 Vaccine approximately 6 months (range 4.8 to 8.8 months) after completion of the primary series. FDA's review of the available safety data from 329 participants 18 through 75 years of age, who had been followed for a median of 2.6 months after receiving the booster dose, did not identify specific safety concerns that would preclude issuance of an EUA. The effectiveness of the booster dose of the Pfizer-BioNTech COVID-19 Vaccine is based on an assessment of 50% neutralizing antibody titers (NT50) against SARS-CoV-2 (USA_WA1/2020). FDA's analysis of SARS-CoV-2 NT50 one month after the booster dose compared to 1 month after the primary series in study participants 18 through 55 years of age who had no serological or virological evidence of past SARS-CoV-2 infection up to 1 month after the booster dose confirmed noninferiority for both geometric mean ratio and difference in seroresponse rates. Based on the totality of the scientific evidence available, including data from the above-referenced clinical trial, FDA concluded that a booster dose the Pfizer-BioNTech COVID-19 Vaccine may be effective, and that the known and potential benefits of a single booster dose at least 6 months after completing the primary series outweigh the known and potential risks for individuals 65 years of age and older; individuals 18 through 64 years of age at high risk of severe COVID-19; and individuals 18 through 64 years of age whose frequent institutional or occupational exposure to SARS-CoV-2 puts them at high risk of serious complications of COVID-19 including severe COVID-19.

For the October 20, 2021 authorization of a single booster dose as a heterologous booster dose following completion of primary vaccination with another authorized COVID-19 vaccine, FDA reviewed data from an ongoing Phase 1/2 clinical trial in participants 19-85 years of age. In this trial, adults who had completed primary vaccination with a Moderna COVID-19 Vaccine 2-dose series (N=151), a Janssen COVID-19 Vaccine single dose (N=156), or a Pfizer-BioNTech COVID-19 Vaccine 2-dose series (N=151) at least 12 weeks prior to enrollment and who reported no history of SARS-CoV-2 infection were randomized 1:1:1 to receive a booster dose of one of three vaccines: Moderna COVID-19 Vaccine, Janssen COVID-19 Vaccine, or Pfizer-BioNTech COVID-19 Vaccine. Adverse events were assessed through 28 days after the booster dose. An overall review of adverse reactions reported following the Pfizer-BioNTech COVID-19 Vaccine heterologous booster dose did not identify any new safety concerns, as compared with adverse reactions reported following Pfizer-BioNTech COVID-19 Vaccine primary series doses or homologous booster dose. Neutralizing antibody titers, as measured by a pseudovirus neutralization assay using a lentivirus expressing the SARS-CoV-2 Spike protein with D614G mutation, were assessed on Day 1 prior to administration of the booster dose and on Day 15 after the booster dose. A booster response to the Pfizer-BioNTech COVID-19 Vaccine was demonstrated regardless of primary vaccination. Based on the on the totality of the scientific evidence available, including data from the above-referenced clinical trial, FDA concluded that a heterologous booster dose of the Pfizer-BioNTech COVID-19 Vaccine may be effective, and that the known and potential benefits of a heterologous booster dose of the Pfizer-BioNTech COVID-19 Vaccine following completion of primary vaccination with another authorized COVID-19 vaccine outweigh the known and potential risks.

For the October 29, 2021 authorization for the Pfizer-BioNTech COVID-19 Vaccine that uses Tris buffer for individuals 5 through 11 years of age, FDA reviewed safety and effectiveness data from an ongoing Phase 1/2/3 trial that has enrolled 4,695 participants 5 through 11 years of age, of whom 3,109 participants received Pfizer-BioNTech COVID-19 Vaccine (containing 10 mcg modRNA) formulated using PBS buffer and approximately 1,538 participants received saline control in Phase 2/3. FDA's review of the available safety data from 3,109 participants 5 through 11 years of age who received Pfizer-BioNTech COVID-19 Vaccine (containing 10 mcg modRNA), including 1,444 who were followed for at least 2 months after receiving the second dose, did not identify specific safety concerns that would preclude issuance of an EUA. SARS-CoV-2 50% neutralizing antibody titers 1 month after the second dose were compared between a subset of participants 5 through 11 years of age who received Pfizer-BioNTech COVID-19 Vaccine (containing 10 mcg modRNA) and a subset of participants 16 through 25 years of age who received Pfizer-BioNTech COVID-19 Vaccine (containing 30 mcg modRNA) in the above-referenced ongoing Phase 1/2/3 trial that enrolled approximately 46,000 participants. Immunobridging analyses included a subset of participants from each study who had no serological or virological evidence of past SARS-CoV-2 infection. FDA's analyses confirm that immunobridging criteria were met for both geometric mean antibody titers and seroresponse rates. FDA's analysis of available descriptive efficacy data from 1,968 participants 5 through 11 years of age without evidence of SARS-CoV-2 infection prior to 7 days after dose 2 confirm that the vaccine was 90.7% effective (95% confidence interval 67.7, 98.3) in preventing COVID-19 occurring at least 7 days after the second dose (with 3 COVID-19 cases in the vaccine group compared to 16 COVID-19 cases in the placebo group). Based on these data, FDA concluded that it is reasonable to believe that Pfizer-BioNTech COVID-19 Vaccine may be effective in individuals 5 through 11 years of age. Additionally, FDA determined it is reasonable to conclude, based on the totality of the scientific evidence available, that the known and potential benefits of Pfizer-BioNTech COVID-19 Vaccine outweigh the known and potential risks of the vaccine, for the prevention of COVID-19 in individuals 5 through 11 years of age. Finally, on October 26, 2021, the Vaccines and Related Biological Products Advisory Committee voted in agreement with this conclusion.

For the October 29, 2021 authorization of the manufacturing change to include an additional formulation of the Pfizer-BioNTech COVID-19 Vaccine that uses Tris buffer instead of PBS buffer used in the originally authorized Pfizer-BioNTech COVID-19 Vaccine, FDA reviewed data on analytical comparability, which uses laboratory testing to demonstrate that a change in product formulation is not expected to impact safety or effectiveness. In the case of Pfizer-BioNTech COVID-19 Vaccine, multiple different release parameters were evaluated, ranging from product appearance to size of the lipid-nanoparticle to the integrity of the modRNA in the product. Release and characterization tests include tests for purity, composition, and critical attributes of mRNA associated with the activity of the vaccine. In this case, analytical comparability to the current PBS formulation of the Pfizer-BioNTech COVID-19 Vaccine was demonstrated for the Tris formulation of the Pfizer-BioNTech COVID-19 Vaccine through a combination of release and characterization testing.

For the November 19, 2021 authorization expanding the eligible population for the homologous and heterologous booster doses to individuals 18 years of age and older, FDA reviewed data provided by the sponsor and other data available to FDA, including real world evidence. Data

previously reviewed to support the September 22, 2021 authorization of a homologous booster dose, together with new real-world data indicating increasing COVID-19 cases in the United States, including among vaccinated individuals, and suggesting a decreased risk of myocarditis following mRNA COVID-19 vaccine booster doses compared with second primary series doses, support expansion of the population eligible for a Pfizer-BioNTech COVID-19 vaccine homologous booster dose to include all individuals 18 years of age and older who completed the primary series at least 6 months previously. Data previously reviewed to support the October 20, 2021 authorization of a heterologous booster dose, together with data and information to support authorization of the EUA amendment to expand the eligible population for a homologous booster dose of the Moderna COVID-19 Vaccine, support a revision to the Pfizer-BioNTech COVID-19 Vaccine EUA such that the eligible population for a heterologous booster dose of the Pfizer-BioNTech COVID-19 Vaccine is all adults 18 years of age and older who completed primary vaccination with another authorized COVID-19 vaccine. Based on the totality of the scientific evidence available, FDA concluded that a homologous or heterologous booster dose of the Pfizer-BioNTech COVID-19 Vaccine may be effective, and that the known and potential benefits of the booster dose of the Pfizer-BioNTech Vaccine following completion of primary vaccination with Pfizer-BioNTech COVID-19 Vaccine or another authorized COVID-19 vaccine, outweigh the known and potential risks in individuals 18 years of age and older.

For the December 9, 2021 authorization expanding the eligible population for the homologous booster doses to individuals 16 years of age and older, FDA reviewed: data submitted previously by the sponsor to support the September 22, 2021 and November 19, 2021 authorization of a homologous booster dose under EUA; real-world data, which includes data that indicates increasing COVID-19 cases in the United States amongst vaccinated and unvaccinated individuals, and data suggesting a decreased risk of myocarditis following administration of Pfizer-BioNTech COVID-19 Vaccine booster doses compared with second primary series doses among vaccinated individuals; and a benefit-risk assessment from the sponsor, to support the expansion of the population eligible for a Pfizer-BioNTech COVID-19 Vaccine homologous booster dose to include all individuals 16 years of age and older who completed the primary series at least 6 months previously. Based on the totality of the scientific evidence available, FDA concluded that a homologous booster dose of the Pfizer-BioNTech COVID-19 Vaccine may be effective, and that the known and potential benefits of the booster dose of the Pfizer-BioNTech COVID-19 Vaccine following completion of primary vaccination with Pfizer-BioNTech COVID-19 Vaccine outweigh the known and potential risks in individuals 16 years of age and older.

For the December 16, 2021 authorization, the FDA reviewed manufacturing information indicating that the expiration date of the Pfizer-BioNTech COVID-19 Vaccine that uses the Tris buffer could be extended from 6 months to 9 months when held at -90 °C to -60 °C.

For the January 3, 2022 authorization expanding the use of the vaccine as a single booster dose in individuals 12 through 15 years of age and lowering the authorized dosing interval of the homologous booster dose to at least 5 months after completion of the primary series, the FDA reviewed: prepublications; accepted publications; published publications; real world evidence on the safety of booster doses provided by the Israeli Ministry of Health, which includes data from over 6,300 individuals 12 to 15 years of age who received a Pfizer-BioNTech COVID-19

Vaccine booster dose at least 5 months following completion of the primary series, noting no cases of myocarditis or pericarditis reported to date; and real world evidence data from approximately 4.7 million third (booster) doses of the Pfizer-BioNTech COVID-19 Vaccine given to individuals 16 years of age and older at least 5 months after the primary series. Based on the totality of the scientific evidence available, FDA concluded that a homologous booster dose of the Pfizer-BioNTech COVID-19 Vaccine may be effective and that the known and potential benefits of the booster dose of the Pfizer-BioNTech COVID-19 Vaccine following completion of primary vaccination with the Pfizer-BioNTech COVID-19 Vaccine outweigh the known and potential risks in individuals 12 years of age and older when given at least 5 months following the primary series.

For the January 3, 2022 authorization of a third primary series dose in individuals 5 through 11 years of age who have undergone solid organ transplantation, or individuals 5 through 11 years of age who are diagnosed with conditions that are considered to have an equivalent level of immunocompromise, data on safety in this population is inferred from the experience in healthy children 5 through 11 years of age who were vaccinated with the primary series, and data from vaccine efficacy in individuals 12 years of age and older is extrapolated to determine efficacy. Based on the totality of the scientific evidence available, FDA concluded that a third dose of the Pfizer-BioNTech COVID-19 Vaccine may be effective and that the known and potential benefits of a third dose of the Pfizer-BioNTech COVID-19 Vaccine outweigh the known and potential risks of the vaccine for immunocompromised individuals 5 through 11 years of age who have received two doses of the Pfizer-BioNTech COVID-19 Vaccine and who have undergone solid organ transplantation, or who are diagnosed with conditions that are considered to have an equivalent level of immunocompromise.

For the March 29, 2022 authorization of a second booster dose of the Pfizer-BioNTech COVID-19 Vaccine for administration to individuals 50 years of age and older and to individuals 12 years of age or older with certain kinds of immunocompromise at least 4 months after receipt of a first booster dose of any of the FDA authorized or approved COVID-19 vaccines, the sponsor submitted a publication which included immunogenicity data from an ongoing study in Israel. (*Gili Regev-Yochay, Tal Gonen, Mayan Gilboa, et al. 2022 DOI: 10.1056/NEJMc2202542*). In this open-label, non-randomized clinical study in healthcare workers at a single center in Israel, 154 individuals 18 years of age and older who had received primary vaccination and a first booster dose with Pfizer-BioNTech COVID-19 Vaccine were administered a second booster dose of Pfizer-BioNTech COVID-19 Vaccine at least four months after the first booster dose. Among these individuals, approximately 11-fold increases in geometric mean neutralizing antibody titers against wild-type virus and Delta and Omicron variants, respectively, were reported at two weeks after the second booster dose as compared to 5 months after the first booster dose. Safety surveillance data from the Ministry of Health of Israel on the administration of approximately 700,000 fourth doses of the Pfizer-BioNTech COVID-19 Vaccine given at least 4 months after the third dose in adults 18 years of age and older (approximately 600,000 of whom were 60 years of age and older) revealed no new safety concerns. Based on the totality of the scientific evidence available, FDA concluded that a second booster dose of the Pfizer-BioNTech COVID-19 Vaccine may be effective and that the known and potential benefits of a second booster dose of the Pfizer-BioNTech COVID-19 Vaccine following receipt of a first booster dose of any FDA authorized or approved COVID-19 vaccine outweigh the known and

potential risks in the authorized populations when given at least 4 months following the first booster dose.

For the May 17, 2022 authorization of a single booster dose administered at least 5 months after completing a primary series of the Pfizer-BioNTech COVID-19 Vaccine in individuals 5 through 11 years of age, FDA reviewed safety and effectiveness data from a subset of participants 5 through 11 years of age enrolled in an ongoing study described above (see October 29, 2021 authorization). A total of 401 participants 5 through 11 years of age received a booster dose of Pfizer-BioNTech COVID-19 Vaccine (10 mcg modRNA) at least 5 months after completing the primary series (range 5 to 9 months, 86.8% of participants received the booster dose at least 8 months after Dose 2). FDA's review of the available safety data collected up to the cutoff date of March 22, 2022 (median follow-up time of 1.3 months), did not identify specific safety concerns that would preclude issuance of an EUA. The geometric mean SARS-CoV-2 50% neutralizing antibody titer (NT50) 1 month after the booster dose was compared to the pre-booster dose geometric mean titers (GMT) in 67 participants 5 through 11 years of age who had no serological or virological evidence of SARS-CoV-2 infection up to one month after the booster dose. The NT50 GMT at 1 month after the booster dose was increased compared to before the booster dose. Based on the totality of the scientific evidence available, FDA concludes that a booster dose of the Pfizer-BioNTech COVID-19 Vaccine following completion of primary vaccination with the Pfizer-BioNTech COVID-19 Vaccine may be effective and that the known and potential benefits of a booster dose of the Pfizer-BioNTech COVID-19 Vaccine following completion of primary vaccination with the Pfizer-BioNTech COVID-19 Vaccine outweigh the known and potential risks in individuals 5 through 11 years of age when given at least 5 months following the primary series.

Having concluded that the criteria for issuance of this authorization under Section 564(c) of the Act are met, I am authorizing the emergency use of Pfizer-BioNTech COVID-19 Vaccine¹⁸ for the prevention of COVID-19, as described in the Scope of Authorization section of this letter (Section II) and subject to the terms of this authorization. Additionally, as specified in subsection III.BB., I am authorizing use of COMIRNATY (COVID-19 Vaccine, mRNA)¹⁹ under this EUA as described in the Scope of Authorization section of this letter (Section II).

I. Criteria for Issuance of Authorization

I have concluded that the emergency use of Pfizer-BioNTech COVID-19 Vaccine²⁰ for the prevention of COVID-19 when administered as described in the Scope of Authorization (Section II) meets the criteria for issuance of an authorization under Section 564(c) of the Act, because:

¹⁸ Reference to the Pfizer-BioNTech COVID-19 Vaccine hereinafter refers to both the formulations that use the PBS and Tris buffers, unless specifically delineated otherwise.

¹⁹ Reference to COMIRNATY (COVID-19 Vaccine, mRNA) hereinafter refers to both the formulations that use the PBS and Tris buffers, unless specifically delineated otherwise.

²⁰ In this section (Section I), references to Pfizer-BioNTech COVID-19 Vaccine also apply to COMIRNATY (COVID-19 Vaccine, mRNA).

- A. SARS-CoV-2 can cause a serious or life-threatening disease or condition, including severe respiratory illness, to humans infected by this virus;
- B. Based on the totality of scientific evidence available to FDA, it is reasonable to believe that Pfizer-BioNTech COVID-19 Vaccine may be effective in preventing COVID-19, and that, when used under the conditions described in this authorization, the known and potential benefits of Pfizer-BioNTech COVID-19 Vaccine when used to prevent COVID-19 outweigh its known and potential risks; and
- C. There is no adequate, approved, and available alternative²¹ to Pfizer-BioNTech COVID-19 Vaccine to prevent COVID-19.²²

II. Scope of Authorization

I have concluded, pursuant to Section 564(d)(1) of the Act, that the scope of this authorization is limited as follows:

- Pfizer Inc. will supply Pfizer-BioNTech COVID-19 Vaccine either directly or through authorized distributor(s),²³ to emergency response stakeholders²⁴ as directed by the U.S. government, including the Centers for Disease Control and Prevention (CDC) and/or other designee, for use consistent with the terms and conditions of this EUA; and
- Pfizer-BioNTech COVID-19 Vaccine may be administered by a vaccination provider²⁵

²¹ Although COMIRNATY (COVID-19 Vaccine, mRNA) and SPIKEVAX (COVID-19 Vaccine, mRNA) are approved to prevent COVID-19 in certain individuals who fall within the scope of the Pfizer-BioNTech COVID-19 Vaccine authorization, there is not sufficient approved vaccine available for distribution to this population in its entirety at the time of reissuance of this EUA. Additionally, there are no COVID-19 vaccines that are approved to provide: COVID-19 vaccination in individuals 5 through 15 years of age; a third primary series dose to certain immunocompromised populations described in this EUA; a homologous booster dose to the authorized population described in this EUA; or a heterologous booster dose following completion of primary vaccination with another authorized COVID-19 vaccine.

²² No other criteria of issuance have been prescribed by regulation under Section 564(c)(4) of the Act.

²³ “Authorized Distributor(s)” are identified by Pfizer Inc. or, if applicable, by a U.S. government entity, such as the Centers for Disease Control and Prevention (CDC) and/or other designee, as an entity or entities allowed to distribute authorized Pfizer-BioNTech COVID-19 Vaccine.

²⁴ For purposes of this letter, “emergency response stakeholder” refers to a public health agency and its delegates that have legal responsibility and authority for responding to an incident, based on political or geographical boundary lines (e.g., city, county, tribal, territorial, State, or Federal), or functional (e.g., law enforcement or public health range) or sphere of authority to administer, deliver, or distribute vaccine in an emergency situation. In some cases (e.g., depending on a state or local jurisdiction’s COVID-19 vaccination response organization and plans), there might be overlapping roles and responsibilities among “emergency response stakeholders” and “vaccination providers” (e.g., if a local health department is administering COVID-19 vaccines; if a pharmacy is acting in an official capacity under the authority of the state health department to administer COVID-19 vaccines). In such cases, it is expected that the conditions of authorization that apply to emergency response stakeholders and vaccination providers will all be met.

²⁵ For purposes of this letter, “vaccination provider” refers to the facility, organization, or healthcare provider licensed or otherwise authorized by the emergency response stakeholder (e.g., non-physician healthcare professionals, such as nurses and pharmacists pursuant to state law under a standing order issued by the state health

without an individual prescription for each vaccine recipient.

- The Pfizer-BioNTech COVID-19 Vaccine formulations that use either Tris or PBS buffer, as described in more detail under *Product Description* and covered by this authorization, will be administered by vaccination providers to provide for the uses described in Table 1.

Table 1: Authorized and/or Approved Uses of the Pfizer-BioNTech COVID-19 Vaccine Presentations for the Primary Series Doses

Presentation	Authorized Age	Each Primary Series Dose	Primary Vaccination Schedule
Multiple-Dose Vials with Purple Caps OR Multiple-Dose Vials with Gray Caps and Labels with Gray Borders	12 years and older	0.3 mL (containing 30 mcg modRNA)	Two doses 3 weeks apart Individuals with Certain Kinds of Immunocompromise*: A third dose at least 28 days following the second primary series dose
Multiple-Dose Vials with Orange Caps and Labels with Orange Borders	5 years through 11 years	0.2 mL (containing 10 mcg modRNA)	Two doses 3 weeks apart Individuals with Certain Kinds of Immunocompromise*: A third dose at least 28 days following the second primary series dose

* who have undergone solid organ transplantation, or who are diagnosed with conditions that are considered to have an equivalent level of immunocompromise.

officer) to administer or provide vaccination services in accordance with the applicable emergency response stakeholder’s official COVID-19 vaccination and emergency response plan(s) and who is enrolled in the CDC COVID-19 Vaccination Program. If the vaccine is exported from the United States, a “vaccination provider” is a provider that is authorized to administer this vaccine in accordance with the laws of the country in which it is administered. For purposes of this letter, “healthcare provider” also refers to a person authorized by the U.S. Department of Health and Human Services (e.g., under the PREP Act Declaration for Medical Countermeasures against COVID-19) to administer FDA-authorized COVID-19 vaccine (e.g., qualified pharmacy technicians and State-authorized pharmacy interns acting under the supervision of a qualified pharmacist). See, e.g., HHS. *Fourth Amendment to the Declaration Under the Public Readiness and Emergency Preparedness Act for Medical Countermeasures Against COVID-19 and Republication of the Declaration*. 85 FR 79190 (December 9, 2020).

Table 2: Authorized uses of the Pfizer BioNTech COVID-19 Vaccine Presentations for Booster Doses

Presentation	Each Booster Dose	First Booster Dose	Second Booster Dose
Multiple-Dose Vials with Purple Caps OR Multiple-Dose Vials with Gray Caps and Labels with Gray Borders	0.3 mL (containing 30 mcg modRNA)	12 years of age and older One dose at least 5 months after completion of a primary series with this vaccine (homologous); 18 years of age and older One dose after completion of primary vaccination with another FDA authorized or approved COVID-19 vaccine (heterologous). Dosing interval is the same as that authorized for a booster dose of the vaccine used for primary vaccination	50 years of age and older One dose at least 4 months after a first booster dose with any FDA authorized or approved COVID-19 vaccine; 12 years of age and older with certain kinds of immunocompromise* One dose at least 4 months after a first booster dose with any FDA authorized or approved COVID-19 vaccine
Multiple-Dose Vials with Orange Caps and Labels with Orange Borders	0.2 mL (containing 10 mcg modRNA)	5 through 11 years of age One dose at least 5 months after completion of a primary series with this vaccine (homologous)	N/A

* who have undergone solid organ transplantation, or who are diagnosed with conditions that are considered to have an equivalent level of immunocompromise.

For use in individuals who turn from 11 years to 12 years of age between doses in the primary regimen:

- Notwithstanding the age limitations for use of the different formulations and presentations described above, individuals who will turn from 11 years to 12 years of age between doses in the primary regimen may receive, for any dose in the primary regimen, either: (1) the Pfizer-BioNTech COVID-19 Vaccine that uses Tris buffer (each 0.2 mL dose containing 10 mcg modRNA) covered by this authorization; or (2) the Pfizer-BioNTech COVID-19 Vaccine and COMIRNATY (COVID-19 Vaccine, mRNA) formulations provided in one of the presentations for individuals 12 years of age and older (each 0.3 mL dose containing 30 mcg modRNA) covered by this authorization.

This authorization also covers the use of the licensed COMIRNATY (COVID-19 Vaccine, mRNA) product when used to provide: (1) a two-dose primary regimen (0.3 mL each, 3 weeks apart) for individuals 12 through 15 years of age; (2) a third primary series dose at least 28 days following the second dose to individuals 12 years of age or older who have undergone solid organ transplantation or who are diagnosed with conditions that are considered to have an equivalent level of immunocompromise; (3) a first homologous booster dose (0.3 mL) at least 5 months after completion of the primary series to individuals 12 years of age and older; (4) a first heterologous booster dose (0.3 mL) following completion of primary vaccination with another FDA authorized or approved COVID-19 vaccine in individuals 18 years of age and older, where the dosing interval for the heterologous booster dose is the same as that authorized for a booster

dose of the vaccine used for primary vaccination; (5) a second booster dose to individuals 50 years of age and older at least 4 months after a first booster dose with any FDA authorized or approved COVID-19 vaccine; and (6) a second booster dose to individuals 12 years of age or older who have undergone solid organ transplantation or who are diagnosed with conditions that are considered to have an equivalent level of immunocompromise at least 4 months after a first booster dose with any FDA authorized or approved COVID-19 vaccine.

The Pfizer-BioNTech COVID-19 Vaccine that uses PBS buffer and COMIRNATY (COVID-19 Vaccine, mRNA) that uses PBS buffer have the same formulation. Additionally, the Pfizer-BioNTech COVID-19 Vaccine that uses Tris buffer and COMIRNATY (COVID-19 Vaccine, mRNA) that uses Tris buffer have the same formulation. The products are legally distinct with certain differences that do not impact safety or effectiveness. Accordingly, under this EUA, the Pfizer-BioNTech COVID-19 Vaccine that uses PBS buffer and COMIRNATY (COVID-19 Vaccine, mRNA) that uses PBS buffer can be used interchangeably, and the Pfizer-BioNTech COVID-19 Vaccine that uses Tris buffer and COMIRNATY (COVID-19 Vaccine, mRNA) that uses Tris buffer can be used interchangeably, as described above, without presenting any safety or effectiveness concerns. As described below under *Product Description*, the formulations that use Tris and PBS buffers, which are covered by this authorization for use in individuals 12 years of age and older, contain the same modRNA and lipids, and the same quantity of these ingredients, per 0.3 mL dose. The two formulations differ with respect to certain inactive ingredients only and have been shown to be analytically comparable.²⁶ Accordingly, under this EUA, for individuals 12 years of age and older, the two formulations of COMIRNATY (COVID-19 Vaccine, mRNA) and the two formulations of the Pfizer-BioNTech COVID-19 Vaccine, when prepared according to their respective instructions for use, can be used interchangeably without presenting any safety or effectiveness concerns.

Therefore, for individuals 12 years of age and older, COMIRNATY (COVID-19 Vaccine, mRNA) is authorized to complete the primary regimen or provide a booster dose for individuals who received their initial primary dose(s) with the Pfizer-BioNTech COVID-19 Vaccine, and the Pfizer-BioNTech COVID-19 Vaccine is authorized to complete the primary regimen or provide a booster for individuals who received their initial primary dose(s) with COMIRNATY (COVID-19 Vaccine, mRNA). For individuals authorized to receive a second booster dose, COMIRNATY (COVID-19 Vaccine, mRNA) and Pfizer-BioNTech COVID-19 Vaccine are both authorized to provide the second booster dose.

²⁶ Analytical comparability assessments use laboratory testing to demonstrate that a change in product formulation does not impact a product's safety or effectiveness. For the Pfizer-BioNTech COVID-19 Vaccine, multiple different release parameters were evaluated to assess the comparability of the modified formulation (the formulation with the Tris buffer) to the originally-authorized formulation (the formulation with the PBS buffer). These release parameters ranged from product appearance to size of the lipid-nanoparticle to the integrity of the modRNA in the product. Release and characterization tests include tests for purity, composition, and critical attributes of mRNA associated with the activity of the vaccine. The combination of release testing and characterization testing demonstrated that the modified formulation is analytically comparable to the original formulation.

Product Description²⁷

The Pfizer-BioNTech COVID-19 Vaccine, supplied in two formulations, is provided in three different color-coded multiple dose vial presentations:

Table 3: Pfizer-BioNTech COVID-19 Vaccine Vial Presentations.

	Vials with purple caps	Vials with gray caps and labels with gray borders	Vials with orange caps and labels with orange borders
Authorized age	12 years of age and older	12 years of age and older	5 through 11 years of age
Formulated to provide	0.3 mL doses, after dilution (each containing 30 mcg modRNA)	0.3 mL doses (each containing 30 mcg modRNA)	0.2 mL doses, after dilution (each containing 10 mcg modRNA)
Buffer used	PBS	Tris	Tris
Dilution	Dilute with 1.8 mL of sterile 0.9% Sodium Chloride Injection, USP	Not to be diluted	Dilute with 1.3 mL of sterile 0.9% Sodium Chloride Injection, USP

Multiple dose vials with purple caps

Each 0.3 mL dose of the Pfizer-BioNTech COVID-19 Vaccine contains 30 mcg of modRNA encoding the viral spike (S) glycoprotein of SARS-CoV-2. Each dose of the Pfizer-BioNTech COVID-19 Vaccine also includes the following ingredients: lipids (0.43 mg (4-hydroxybutyl)azanediyl)bis(hexane-6,1-diyl)bis(2-hexyldecanoate), 0.05 mg 2[(polyethylene glycol)-2000]-N,N-ditetradecylacetamide, 0.09 mg 1,2-distearoyl-sn-glycero-3-phosphocholine, and 0.2 mg cholesterol), 0.01 mg potassium chloride, 0.01 mg monobasic potassium phosphate, 0.36 mg sodium chloride, 0.07 mg dibasic sodium phosphate dihydrate, and 6 mg sucrose. The Pfizer-BioNTech COVID-19 Vaccine does not contain a preservative. The diluent (0.9% Sodium Chloride Injection) contributes an additional 2.16 mg sodium chloride per dose.

²⁷ For COMIRNATY (COVID-19 Vaccine, mRNA) that uses the PBS buffer product description, please see the COMIRNATY (COVID-19 Vaccine, mRNA) prescribing information, found here: <https://www.fda.gov/media/151707/download>; for COMIRNATY (COVID-19 Vaccine, mRNA) that uses the Tris buffer product description, please see the COMIRNATY (COVID-19 Vaccine, mRNA) prescribing information, found here: <https://www.fda.gov/media/154834/download>.

Multiple dose vials with gray caps and labels with gray borders

Each 0.3 mL dose of the Pfizer-BioNTech COVID-19 Vaccine contains 30 mcg of a modRNA encoding the viral spike (S) glycoprotein of SARS-CoV-2. Each dose of the Pfizer-BioNTech COVID-19 Vaccine also includes the following ingredients: lipids (0.43 mg (4-hydroxybutyl)azanediyl)bis(hexane-6,1-diyl)bis(2-hexyldecanoate), 0.05 mg 2[(polyethylene glycol)-2000]-N,N-ditetradecylacetamide, 0.09 mg 1,2-distearoyl-sn-glycero-3-phosphocholine, and 0.19 mg cholesterol), 0.06 mg tromethamine, 0.4 mg tromethamine hydrochloride, and 31 mg sucrose in sterile water for injection. The Pfizer-BioNTech COVID-19 Vaccine does not contain a preservative.

Multiple dose vials with orange caps and labels with orange borders

Each 0.2 mL dose of the Pfizer-BioNTech COVID-19 Vaccine contains 10 mcg of a modRNA encoding the viral spike (S) glycoprotein of SARS-CoV-2. Each dose of the Pfizer-BioNTech COVID-19 Vaccine also includes the following ingredients: lipids (0.14 mg (4-hydroxybutyl)azanediyl)bis(hexane-6,1-diyl)bis(2-hexyldecanoate), 0.02 mg 2[(polyethylene glycol)-2000]-N,N-ditetradecylacetamide, 0.03 mg 1,2-distearoyl-sn-glycero-3-phosphocholine, and 0.06 mg cholesterol), 10.3 mg sucrose, 0.02 mg tromethamine, and 0.13 mg tromethamine hydrochloride. The Pfizer-BioNTech COVID-19 Vaccine does not contain a preservative. The diluent (0.9% Sodium Chloride Injection, USP) contributes 0.9 mg sodium chloride per dose.

The manufacture of the authorized Pfizer-BioNTech COVID-19 Vaccine is limited to those facilities identified and agreed upon in Pfizer’s request for authorization.

The Pfizer-BioNTech COVID-19 Vaccine vial label and carton labels are clearly marked for “Emergency Use Authorization.” The Pfizer-BioNTech COVID-19 Vaccine is authorized to be distributed, stored, further redistributed, and administered by emergency response stakeholders when packaged in the authorized manufacturer packaging (i.e., vials and cartons), despite the fact that the vial and carton labels may not contain information that otherwise would be required under the FD&C Act.

Pfizer-BioNTech COVID-19 Vaccine is authorized for emergency use with the following product-specific information required to be made available to vaccination providers and recipients, respectively (referred to as “authorized labeling”):

- Fact Sheet for Healthcare Providers Administering Vaccine (Vaccination Providers): Emergency Use Authorization (EUA) of Pfizer-BioNTech COVID-19 Vaccine to Prevent Coronavirus Disease 2019 (COVID-19) - For 12 Years of Age and Older Dilute Before Use
- Fact Sheet for Healthcare Providers Administering Vaccine (Vaccination Providers): Emergency Use Authorization (EUA) of Pfizer-BioNTech COVID-19 Vaccine to Prevent Coronavirus Disease 2019 (COVID-19) - For 12 Years of Age and Older Do Not Dilute
- Fact Sheet for Healthcare Providers Administering Vaccine (Vaccination Providers): Emergency Use Authorization (EUA) of Pfizer-BioNTech COVID-19 Vaccine to Prevent Coronavirus Disease 2019 (COVID-19) - For 5 Through 11 Years of Age Dilute Before

Use

- Vaccine Information Fact Sheet for Recipients and Caregivers About COMIRNATY (COVID-19 Vaccine, mRNA) and Pfizer-BioNTech COVID-19 Vaccine to Prevent Coronavirus Disease (COVID-19) For Use in Individuals 12 Years of Age and Older
- Vaccine Information Fact Sheet for Recipients and Caregivers About the Pfizer-BioNTech COVID-19 Vaccine to Prevent Coronavirus Disease (COVID-19) for Use in Individuals 5 Through 11 Years of Age

I have concluded, pursuant to Section 564(d)(2) of the Act, that it is reasonable to believe that the known and potential benefits of Pfizer-BioNTech COVID-19 Vaccine,²⁸ when used to prevent COVID-19 and used in accordance with this Scope of Authorization (Section II), outweigh its known and potential risks.

I have concluded, pursuant to Section 564(d)(3) of the Act, based on the totality of scientific evidence available to FDA, that it is reasonable to believe that Pfizer-BioNTech COVID-19 Vaccine may be effective in preventing COVID-19 when used in accordance with this Scope of Authorization (Section II), pursuant to Section 564(c)(2)(A) of the Act.

Having reviewed the scientific information available to FDA, including the information supporting the conclusions described in Section I above, I have concluded that Pfizer-BioNTech COVID-19 Vaccine (as described in this Scope of Authorization (Section II)) meets the criteria set forth in Section 564(c) of the Act concerning safety and potential effectiveness.

The emergency use of Pfizer-BioNTech COVID-19 Vaccine under this EUA must be consistent with, and may not exceed, the terms of the Authorization, including the Scope of Authorization (Section II) and the Conditions of Authorization (Section III). Subject to the terms of this EUA and under the circumstances set forth in the Secretary of HHS's determination under Section 564(b)(1)(C) described above and the Secretary of HHS's corresponding declaration under Section 564(b)(1), Pfizer-BioNTech COVID-19 Vaccine is authorized to prevent COVID-19 as described in the Scope of Authorization (Section II) under this EUA, despite the fact that it does not meet certain requirements otherwise required by applicable federal law.

III. Conditions of Authorization

Pursuant to Section 564 of the Act, I am establishing the following conditions on this authorization:

Pfizer Inc. and Authorized Distributor(s)

- A. Pfizer Inc. and authorized distributor(s) will ensure that the authorized Pfizer-BioNTech COVID-19 Vaccine is distributed, as directed by the U.S. government, including CDC and/or other designee, and the authorized labeling (i.e., Fact Sheets) will be made available to vaccination providers, recipients, and caregivers consistent with the terms of this letter.

²⁸ The conclusions supporting authorization stated in this section (Section II) also apply to COMIRNATY (COVID-19 Vaccine, mRNA).

- B. Pfizer Inc. and authorized distributor(s) will ensure that appropriate storage and cold chain is maintained until delivered to emergency response stakeholders' receipt sites.
- C. Pfizer Inc. will ensure that the terms of this EUA are made available to all relevant stakeholders (e.g., emergency response stakeholders, authorized distributors, and vaccination providers) involved in distributing or receiving authorized Pfizer-BioNTech COVID-19 Vaccine. Pfizer Inc. will provide to all relevant stakeholders a copy of this letter of authorization and communicate any subsequent amendments that might be made to this letter of authorization and its authorized labeling.
- D. Pfizer Inc. may develop and disseminate instructional and educational materials (e.g., video regarding vaccine handling, storage/cold-chain management, preparation, disposal) that are consistent with the authorized emergency use of the vaccine as described in the letter of authorization and authorized labeling, without FDA's review and concurrence, when necessary to meet public health needs during an emergency. Any instructional and educational materials that are inconsistent with the authorized labeling are prohibited.
- E. Pfizer Inc. may request changes to this authorization, including to the authorized Fact Sheets for the vaccine. Any request for changes to this EUA must be submitted to Office of Vaccines Research and Review (OVRR)/Center for Biologics Evaluation and Research (CBER). Such changes require appropriate authorization prior to implementation.²⁹
- F. Pfizer Inc. will report to Vaccine Adverse Event Reporting System (VAERS):
- Serious adverse events (irrespective of attribution to vaccination);
 - Cases of Multisystem Inflammatory Syndrome in children and adults; and
 - Cases of COVID-19 that result in hospitalization or death, that are reported to Pfizer Inc.
- These reports should be submitted to VAERS as soon as possible but no later than 15 calendar days from initial receipt of the information by Pfizer Inc.
- G. Pfizer Inc. must submit to Investigational New Drug application (IND) number 19736 periodic safety reports at monthly intervals in accordance with a due date agreed upon with the Office of Biostatistics and Pharmacovigilance (OBPV)/CBER beginning after the first full calendar month after authorization. Each periodic safety report is required to contain descriptive information which includes:

²⁹ The following types of revisions may be authorized without reissuing this letter: (1) changes to the authorized labeling; (2) non-substantive editorial corrections to this letter; (3) new types of authorized labeling, including new fact sheets; (4) new carton/container labels; (5) expiration dating extensions; (6) changes to manufacturing processes, including tests or other authorized components of manufacturing; (7) new conditions of authorization to require data collection or study. For changes to the authorization, including the authorized labeling, of the type listed in (3), (6), or (7), review and concurrence is required from the Preparedness and Response Team (PREP)/Office of the Center Director (OD)/CBER and the Office of Counterterrorism and Emerging Threats (OCET)/Office of the Chief Scientist (OCS).

- A narrative summary and analysis of adverse events submitted during the reporting interval, including interval and cumulative counts by age groups, special populations (e.g., pregnant women), and adverse events of special interest;
 - A narrative summary and analysis of vaccine administration errors, whether or not associated with an adverse event, that were identified since the last reporting interval;
 - Newly identified safety concerns in the interval; and
 - Actions taken since the last report because of adverse experiences (for example, changes made to Healthcare Providers Administering Vaccine (Vaccination Providers) Fact Sheet, changes made to studies or studies initiated).
- H. No changes will be implemented to the description of the product, manufacturing process, facilities, or equipment without notification to and concurrence by FDA.
- I. All manufacturing facilities will comply with Current Good Manufacturing Practice requirements.
- J. Pfizer Inc. will submit to the EUA file Certificates of Analysis (CoA) for each drug product lot at least 48 hours prior to vaccine distribution. The CoA will include the established specifications and specific results for each quality control test performed on the final drug product lot.
- K. Pfizer Inc. will submit to the EUA file quarterly manufacturing reports, starting in July 2021, that include a listing of all drug substance and drug product lots produced after issuance of this authorization. This report must include lot number, manufacturing site, date of manufacture, and lot disposition, including those lots that were quarantined for investigation or those lots that were rejected. Information on the reasons for lot quarantine or rejection must be included in the report.
- L. Pfizer Inc. and authorized distributor(s) will maintain records regarding release of Pfizer-BioNTech COVID-19 Vaccine for distribution (i.e., lot numbers, quantity, release date).
- M. Pfizer Inc. and authorized distributor(s) will make available to FDA upon request any records maintained in connection with this EUA.
- N. Pfizer Inc. will conduct post-authorization observational studies to evaluate the association between Pfizer-BioNTech COVID-19 Vaccine and a pre-specified list of adverse events of special interest, including myocarditis and pericarditis, along with deaths and hospitalizations, and severe COVID-19. The study population should include individuals administered the authorized Pfizer-BioNTech COVID-19 Vaccine under this EUA in the general U.S. population (5 years of age and older), individuals who receive a booster dose, populations of interest such as healthcare workers, pregnant women, immunocompromised individuals, subpopulations with specific comorbidities. The studies should be conducted in large scale databases with

an active comparator. Pfizer Inc. will provide protocols and status update reports to the IND 19736 with agreed-upon study designs and milestone dates.

Emergency Response Stakeholders

- O. Emergency response stakeholders will identify vaccination sites to receive authorized Pfizer-BioNTech COVID-19 Vaccine and ensure its distribution and administration, consistent with the terms of this letter and CDC’s COVID-19 Vaccination Program.
- P. Emergency response stakeholders will ensure that vaccination providers within their jurisdictions are aware of this letter of authorization, and the terms herein and any subsequent amendments that might be made to the letter of authorization, instruct them about the means through which they are to obtain and administer the vaccine under the EUA, and ensure that the authorized labeling [i.e., Fact Sheet for Healthcare Providers Administering Vaccine (Vaccination Providers) and Vaccine Information Fact Sheet for Recipients and Caregivers] is made available to vaccination providers through appropriate means (e.g., e-mail, website).
- Q. Emergency response stakeholders receiving authorized Pfizer-BioNTech COVID-19 Vaccine will ensure that appropriate storage and cold chain is maintained.

Vaccination Providers

- R. Vaccination providers will administer the vaccine in accordance with the authorization and will participate and comply with the terms and training required by CDC’s COVID-19 Vaccination Program.
- S. Vaccination providers will provide the Vaccine Information Fact Sheet for Recipients and Caregivers to each individual receiving vaccination and provide the necessary information for receiving their second dose and/or third dose.
- T. Vaccination providers administering the vaccine must report the following information associated with the administration of the vaccine of which they become aware to VAERS in accordance with the Fact Sheet for Healthcare Providers Administering Vaccine (Vaccination Providers):
 - Vaccine administration errors whether or not associated with an adverse event
 - Serious adverse events (irrespective of attribution to vaccination)
 - Cases of Multisystem Inflammatory Syndrome in children and adults
 - Cases of COVID-19 that result in hospitalization or deathComplete and submit reports to VAERS online at <https://vaers.hhs.gov/reportevent.html>. The VAERS reports should include the words “Pfizer-BioNTech COVID-19 Vaccine EUA” in the description section of the report. More information is available at vaers.hhs.gov or by calling 1-800-822-7967. To the extent feasible, report to Pfizer Inc. by contacting 1-800-438-1985 or by providing a copy of the VAERS form to Pfizer Inc.; Fax: 1-866-635-8337.

- U. Vaccination providers will conduct any follow-up requested by the U.S government, including CDC, FDA, or other designee, regarding adverse events to the extent feasible given the emergency circumstances.
- V. Vaccination providers will monitor and comply with CDC and/or emergency response stakeholder vaccine management requirements (e.g., requirements concerning obtaining, tracking, and handling vaccine) and with requirements concerning reporting of vaccine administration data to CDC.
- W. Vaccination providers will ensure that any records associated with this EUA are maintained until notified by FDA. Such records will be made available to CDC, and FDA for inspection upon request.

Conditions Related to Printed Matter, Advertising, and Promotion

- X. All descriptive printed matter, advertising, and promotional material, relating to the use of the Pfizer-BioNTech COVID-19 Vaccine shall be consistent with the authorized labeling, as well as the terms set forth in this EUA, and meet the requirements set forth in Section 502(a) and (n) of the FD&C Act and FDA implementing regulations.
- Y. All descriptive printed matter, advertising, and promotional material relating to the use of the Pfizer-BioNTech COVID-19 Vaccine clearly and conspicuously shall state that:
 - This product has not been approved or licensed by FDA, but has been authorized for emergency use by FDA, under an EUA to prevent Coronavirus Disease 2019 (COVID-19) for use either in individuals 12 years of age and older, or in individuals 5 through 11 years of age, as appropriate; and
 - The emergency use of this product is only authorized for the duration of the declaration that circumstances exist justifying the authorization of emergency use of the medical product under Section 564(b)(1) of the FD&C Act unless the declaration is terminated or authorization revoked sooner.

Condition Related to Export

- Z. If the Pfizer-BioNTech COVID-19 Vaccine is exported from the United States, conditions C, D, and O through Y do not apply, but export is permitted only if 1) the regulatory authorities of the country in which the vaccine will be used are fully informed that this vaccine is subject to an EUA and is not approved or licensed by FDA and 2) the intended use of the vaccine will comply in all respects with the laws of the country in which the product will be used. The requirement in this letter that the authorized labeling (i.e., Fact Sheets) be made available to vaccination providers, recipients, and caregivers in condition A will not apply if the authorized labeling (i.e., Fact Sheets) are made available to the regulatory authorities of the country in which the vaccine will be used.

Conditions With Respect to Use of Licensed Product

AA. COMIRNATY (COVID-19 Vaccine, mRNA) is licensed for individuals 16 years of age and older. There remains, however, a significant amount of Pfizer-BioNTech COVID-19 Vaccine that was manufactured and labeled in accordance with this emergency use authorization. The authorization remains in place with respect to the Pfizer-BioNTech COVID-19 Vaccine for this population.

This authorization also covers the use of the licensed COMIRNATY (COVID-19 Vaccine, mRNA) product when used to provide: (1) a two-dose primary regimen for individuals 12 through 15 years of age;³⁰ (2) a third primary series dose to individuals 12 years of age or older who have undergone solid organ transplantation or who are diagnosed with conditions that are considered to have an equivalent level of immunocompromise; (3) a first homologous booster dose after completing the primary series to individuals 12 years of age or older; (4) a first heterologous booster dose to individuals 18 years of age and older who have completed primary vaccination with a different FDA authorized or approved COVID-19 vaccine; (5) a second booster dose to individuals 50 years or older after a first booster dose with any FDA authorized or approved COVID-19 vaccine; and (6) a second booster dose to individuals 12 years of age or older who have undergone solid organ transplantation or who are diagnosed with conditions that are considered to have an equivalent level of immunocompromise after a first booster dose with any FDA authorized or approved COVID-19 vaccine, as described in Scope of Authorization (Section II) under this EUA. Conditions A through W in this letter apply when COMIRNATY (COVID-19 Vaccine, mRNA) is provided for the uses described in this subsection III.BB., except that product manufactured and labeled in accordance with the approved BLA is deemed to satisfy the manufacturing, labeling, and distribution requirements of this authorization

IV. Duration of Authorization

This EUA will be effective until the declaration that circumstances exist justifying the authorization of the emergency use of drugs and biological products during the COVID-19 pandemic is terminated under Section 564(b)(2) of the Act or the EUA is revoked under Section 564(g) of the Act.

Sincerely,

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Jacqueline A. O'Shaughnessy, Ph.D.
Acting Chief Scientist
Food and Drug Administration

³⁰ As noted above, this includes primary series doses for individuals who turn from 11 years to 12 years of age between doses in the primary regimen.

Enclosures