INVESTIGATIONAL PRODUCT MANUAL (IPM)

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CONFIDENTIALITY STATEMENT

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1. INTRODUCTION

This Investigational Product Manual (IPM) describes the procedures for collecting Mononuclear/ Mononucleated Cells (MNC) (via leukapheresis) from enrolled participants for the manufacturing, handling, storage, preparation, and infusion of the Investigational Product (IP). Refer to the study protocol for any other protocol required therapies (i.e., add-on therapies) and study-specific details relevant to the activities described in this IPM.

Investigative sites participating in a Kite clinical trial will be trained on the activities described in this manual. The need for additional trainings (e.g., for other Kite studies, changes in investigative site staff, etc.) will be determined by Kite and the investigative site.

Sample documents associated with this IPM are provided in Section 5. Documents that must be filed at the investigative site include, but are not limited to:

- Airway Bill
- Temperature Stability Report (TSR)
- Investigational Product Reconciliation Form (IPRF)

Investigative sites are expected to follow their own policies and/or guidelines on the receipt, handling, storage, and disposal of human samples, and/or cell therapy/Genetically Modified Organism (GMO) products to carry out the procedures described in this manual. If the study is randomized, an Interactive Response Technology (IRT) system will be used to assign the participant to receive either IP or Standard of Care (SOC). Please see IRT manual and training for more information.

When communicating with Kite, the investigative site should utilize the study specific distribution list so that all study team members have visibility.

1.1. Investigational Product

In this manual, IP refers to Anitocabtagene Autoleucel.

1.1.1. Description of Anitocabtagene Autoleucel

Anitocabtagene Autoleucel is a cell therapy product.

Refer to the current Investigator's Brochures (IB) for more information on this product.

2. ENROLLMENT & CELL JOURNEY

The term "cell journey" refers to a series of events that occur from apheresis shipment collection to IP delivery, including manufacturing. Prior to site activation, investigative sites are required to complete a Site Contact List which includes shipping addresses and contact details for personnel that are responsible for the cell journey.

2.1. Clinical Logistics (CL)

Clinical Logistics (CL) is a functional area responsible for the following:

- Verifying enrollment (or randomization, if applicable) data received through the Kite Clinical portal
- Coordinating the cell journey
    - Manufacturing slot confirmation
    - Scheduling courier shipments and ensuring timely pickup and delivery
    - Ordering shipping supplies for leukapheresis and IP
- Receiving and escalating product complaints

CL acts as the conduit between the investigative site and Kite manufacturing.

The general email address for CL is Logistics-Coordinator@kitepharma.com. Please refer to the Study Appendix for additional contact information.

2.2. Participant Registration and Request for a Manufacturing Slot Assignment

CL may send a slot availability notification e-mail providing a six-week window of available manufacturing slots.

Once a participant is identified for a study and the Informed Consent Form (ICF) has been signed, the investigative site registers the participant in the Kite Clinical portal and requests a manufacturing slot referencing GXPMAN-00462 Cell Therapy Research Hospital Portal User Guide which is available under the Knowledge Articles tab. Kite Clinical assigns a unique nine-digit Subject Identification number (SID) to every participant.

Participant demographics that are entered into Kite Clinical during registration must match source documents and will be used on all documentation throughout the study, therefore, it is critical that the correct information is entered. Participant initials are not required if prohibited by regional and/or institutional regulations.

Every participant must be assigned to a manufacturing slot prior to leukapheresis, and dates cannot be changed without CL's approval. A dedicated team, equipment, and space at the manufacturing facility are required to manufacture IP for each participant.

Once registration is completed by the investigative site, CL reviews the participant demographics and tentatively reserves the leukapheresis date (manufacturing slot).

It is vital that the Kite study team is kept informed of the status of all participants from the time they are identified to the time they are infused.

Please refer to the study protocol for the required screening, enrollment, and infusion procedures.

2.3. Good Documentation Practices (GDP)

Good Documentation Practices (GDP) must be adhered to when completing paper-based forms (if applicable). No fields should be left blank.

For example, participant initials are represented as three alphabetical characters (e.g., JSS). If a participant does not have a middle initial, a dash (-) shall be used (e.g., J-S). If regional or institutional regulations prohibit the use of participant initials, mark "N/A" or enter a dash (-).

2.4. Patient Health Information (PHI)

Patient Health Information (PHI) should never be provided to Kite as per Good Clinical Practice (GCP) standards. This includes any confidential identifying participant information such as name, full date of birth, etc.

2.5. Screening Confirmation

Prior to confirming participant eligibility, the required screening assessments must be completed as outlined in the study protocol.

2.6. Eligibility Confirmation for Leukapheresis and Randomization (if applicable)

Once the required screening assessments have been completed per the study protocol, the below process is followed to confirm the manufacturing slot:

- Investigative site personnel must log into EDC RAVE and complete the Eligibility CRF to confirm the eligibility status of the participant as soon as possible before proceeding with leukapheresis (or randomization, if applicable). Source documentation must reflect the same date as what is entered into EDC RAVE. If the participant is deemed ineligible, contact Kite for next steps.
- For randomized studies, participants must be randomized through the IRT to receive IP.
- Once the participant is deemed eligible and randomization is complete (if applicable) CL confirms the leukapheresis date and provides the apheresis bag label and required shipping documents. (i.e., airway bill).
- The courier is always scheduled to collect the leukapheresis material on the day of leukapheresis.
- **If courier rescheduling is necessary or if there are any issues, please contact CL. Do not contact or communicate with the courier directly aside from handing off and receiving shipments.**

2.7. Leukapheresis

Refer to the study protocol for procedures that are required to be completed prior to and/or on the day of leukapheresis as well as timing of leukapheresis in relation to the randomization date.

Leukapheresis must be done on the agreed upon date with CL. **IP will not be manufactured with cells that are leukapheresed on a date that has not been confirmed by CL.**

2.7.1. Leukapheresis Equipment and Materials

Kite does not provide equipment, systems, or other supplies/materials to be used for leukapheresis. Examples of acceptable systems that use a single-stage filter and WBCs functionally closed tubing set include the following:

- COBE® Spectra Apheresis System
- Spectra Optia® Apheresis System
- Fenwal / Fresenius Amicus™ Separator

If your site uses an alternative system, please reach out to Kite.

A **citrate-based anticoagulant** must be used. The investigative site must contact Kite immediately if a citrate-based anticoagulant cannot be used.

The investigative site must ensure that all materials (e.g., collection bags, supplies, medications, etc.) needed for leukapheresis are available and accessible prior to the procedure.

2.7.1.1. Leukapheresis Equipment Documentation and Maintenance

Kite requires that all instruments used for leukapheresis include the following:

- Documents of purchases or lease, maintenance, and parts history
- Calibrations and maintenance to manufacturer's specifications, records should be available at the investigative site for review
- Undergo routine documented maintenance programs (cleaning and decontamination requirements per manufacturer's guidelines)

2.7.2. Leukapheresis Procedure and Cell Collection Target

Leukapheresis is done in accordance with institutional guidelines. It is preferred that the same staff and equipment are used to minimize any variability in the collection of WBCs from each participant.

Collection orders should be written to process approximately **12 to 15 liters** with a goal to collect approximately 5 to 15 x 10^9 mononuclear cells which is necessary to manufacture the target dose of the IP. If the above processing goal is not achievable, contact Kite for further instructions. Kite will attempt to manufacture IP regardless of the volume processed. To collect the target number of cells, leukapheresis should take approximately 4 hours to complete.

2.7.3. Leukapheresed Product Shipment Supplies

The clinical apheresis shipper kit is used to transport the leukapheresed product from the investigative site to the manufacturing facility.

Each clinical apheresis shipper kit contains:

- One (1) apheresis shipper kit cooling engine (lid) and vacuum insulation panel
- One (1) biohazard outer specimen bag
- One (1) gray absorbent sheet
- One (1) temperature monitoring device
- One (1) white filler padding material
- Three (3) strips of tamper resistant tape
- One (1) adhesive shipping pouch
- One (1) plastic tie
- One (1) plastic pouch for apheresis bag label

It is the responsibility of the investigative site to inspect all new clinical apheresis shipper kits upon arrival to ensure they are complete, undamaged, and/or did not activate during transit. If any materials are missing, damaged, or activated, immediately inform CL. Clinical apheresis shipper kits should be stored at room temperature as they are temperature-controlled internally. Leukapheresis material must be packed into the clinical apheresis shipper kit on the day of leukapheresis.

Clinical apheresis shipper kit inventory is monitored and managed by CL to ensure that each investigative site is adequately supplied at all times based on enrollment volume and number of active studies the investigative site is participating on (i.e., at least one extra kit for back-up). **The investigative site should follow institutional procedures for inventory management and follow the First In First Out (FIFO) method when pulling for use.** The kit expiry date can be found on the bottom right corner of the clinical apheresis shipper kit. If needed, the investigative site may contact CL to request a resupply. On average, resupply requests take 7 days to fulfill depending on the region/country.

2.7.4. Prior to Leukapheresis

Prior to leukapheresis, ensure that all investigative site staff involved with the procedure and leukapheresis pack out are trained, have access to, and have tested their Kite Clinical login credentials.

Ensure that all required materials are in good order, (e.g., not expired, incomplete, damaged, or activated). On the day of leukapheresis, investigative site staff must ensure the following is performed prior to the leukapheresis procedure:

- Prepare all equipment, supplies, and other materials for leukapheresis for use in accordance with Standard Operating Procedures (SOPs), operator's manual(s), and/or other institutional guidelines.
- Prepare the shipping materials provided by Kite for immediate use after leukapheresis. When the courier airway bill is provided, print three copies (two for the shipment and one to file at the investigative site) and print any other required shipping documentation provided by Kite.
- Initiate the Apheresis Collection Flow in Kite Clinical referencing GXPMAN-00462.
- Fold the apheresis bag label that is provided by Kite and insert into the plastic pouch ensuring that the information is visible.
- If a Donor Identification Number (DIN), Single European Coding (SEC) number, or other type of identifying number is required by the institution, add the number into the required field in Kite Clinical during the Apheresis Collection Flow when prompted. Kite manufacturing will use this information to print additional labels at various stages of the manufacturing process. Prior to the Site Initiation Visit (SIV) and during feasibility/Pre-Site Selection Visit (PSSV), Kite should be notified of any institutional labeling requirements.
- Attach the pouch to the apheresis collection bag using the plastic tie.
- Once the participant is ready for leukapheresis, verify the participant's identity and confirm that they remain eligible to proceed with leukapheresis.
- Collect the participant's weight on the day of leukapheresis.
- Assess and prepare the participant's venous access in accordance with institutional guidelines.
- Prepare the leukapheresis instrument in accordance with its operator's manual.
- Participant characteristics (e.g., gender, height, weight obtained on the date of leukapheresis, etc.) used to estimate the total blood volume to be collected must be consistent with source documents.
- Refer to the appropriate institutional guidelines to mitigate errors in cell collection.
- If 12 to 15 liters exceeds the standard amount of blood typically apheresed, the total blood processed may have to be manually adjusted. This can be accomplished by following the appropriate operator's manual or contacting the instrument's customer support for instructions.

2.7.4.1. During and After Leukapheresis

After the participant and equipment have been prepared for leukapheresis, begin the procedure per manufacturer's guidelines.

- Once the leukapheresis procedure has commenced, record the start time in the participant's source documents.
- Leukapheresis is complete when the target volume has been processed. Record the leukapheresis stop time in the participant's source documents.

- Ensure that the actual volume processed is adequately documented in the participant's source documents.
- If approximately 12 to 15 liters was not processed, please contact Kite and provide an explanation as to why the target volume was not attainable.

Note: Leukapheresed product that **unexpectedly** does not meet the target volume processed could delay the start of manufacturing.

In the event that multiple leukapheresis bags are collected, they must be combined into a single collection bag before being shipped to Kite manufacturing, if possible, per the investigative site's SOP. If multiple bags cannot be combined, please contact Kite.

Note: Per Kite manufacturing's requirement, please ensure that a 12-inch (30 cm) tail of tubing (do not strip) is left on the leukapheresis collection bag and is double heat sealed to prevent accidental leakage. **Tails shorter than 12-inches (30 cm) will likely delay the manufacturing process.**

2.7.5. Entering Apheresis Collection Information into the Database

Complete the Apheresis Collection Flow in Kite Clinical referencing GXPMAN-00462.

- A second research staff member is required to review and sign in as a verifier to confirm that all data entered into Kite Clinical is complete and accurate.
- An Apheresis Report will be available for download/printing once data entry is complete and must be packed into the apheresis shipper kit accompanying the apheresis material.

Complete the necessary fields within EDC RAVE including the leukapheresis completion time.

2.7.5.1. Packing the Apheresis Bag into the Clinical Apheresis Shipper Kit

The process described below outlines the steps for packaging the leukapheresed product in the clinical apheresis shipper kit for shipment to Kite manufacturing. The investigative site will follow SOPs and/or other institutional guidelines for handling live human cells. In addition to the instructions outlined in this IPM for apheresis pack out, the investigative site can reference the training video provided by Kite.

- Place the cooling engine on a flat, sturdy surface with the foil side down. Firmly depress the actuator buttons located on the underside of the cooling engine with the pad of the thumb by pressing straight down. Do not press at an angle or use any instruments that could puncture the buttons.
- **Note**: Do not remove the foam covers that are located around the actuator buttons as this could damage the cooling engine and result in an inability to properly maintain the required temperature. In some cases, depending on the temperature of the storage area, the blue logo may be visible prior to pressing the actuator buttons which is acceptable as long as the engine cools properly after activation.
- Inspect the leukapheresed product bag to ensure that there are no visible defects (e.g., leaks).

- Wrap the absorbent sheets around the leukapheresed product bag and carefully insert into the biohazard bag. Insert the Kite Clinical Apheresis Report into the biohazard bag pouch with the apheresis bag label.
- Gently remove any excess air from the biohazard bag and seal the bag.
- Carefully place the entire bag assembly into the clinical apheresis shipper kit, laying it as flat as possible.
- Activate the temperature monitoring device by pressing and holding the green start button until the sun and hourglass icons appear on the top left corner of the display screen. The green start button may need to be held for 15 seconds.
    - **Note**: Do not activate the temperature monitoring device until the product is ready to be placed into the clinical apheresis shipper kit.
    - **Note**: The temperature monitoring device is programmed with a start-up delay indicated by the hourglass icon, and the sun icon will blink during the delay. The hourglass icon will disappear, and the temperature monitoring device will begin recording data after the start-up delay has passed (approximately 45 minutes). It is not required to wait until the start-up delay has passed to proceed with shipping the leukapheresed material.
- Remove the adhesive strip from the back of the temperature monitoring device and adhere it to the top side of the biohazard bag in the center.
- Fill the space between the biohazard bag and cooling engine of the shipper with the white foam padding material to minimize direct contact with the underside of the cooling engine and shifting of components during transport.
- Confirm that the cooling engine is cold to the touch and that the blue logo is visible. Place the cooling engine on the top of the clinical apheresis shipper kit.
    - **Note:** If the cooling engine did not cool successfully, contact CL for further instructions.
- Close the box and apply tamper resistant tape where indicated. Avoid tilting the box while applying the tape.
- Review and sign two copies of the airway bill.
- Place the two signed airway bills into the provided shipping pouch and affix to the top of the box where indicated being careful not to cover any text or labels that are on the shipper. Retain one airway bill copy at the investigative site.
- Ensure the shipment is picked up by the courier at the designated location and time as confirmed by CL.

The leukapheresis material must be monitored by and remain in possession of investigative site staff until the courier arrives to maintain chain of custody. If there are any issues with the courier collection, please notify CL.

2.7.6. Shipment of Leukapheresed Product

Once the courier has picked up the leukapheresed product from the investigative site, the shipment will be tracked by CL. Delivery date and time to Kite Manufacturing varies depending on investigative site location.

2.7.7. Leukapheresed Product Receipt

Once the leukapheresed product is received at Kite manufacturing, it is inspected to ensure it is in good condition, the cells are from the expected participant, and the Apheresis Report is reviewed. Kite immediately contacts the investigative site if there are any issues with the quality of the product or participant identification.

2.8. Investigational Product

2.8.1. IP Manufacturing

Once the leukapheresis product inspection is completed, the cells undergo manufacturing where they are processed, transduced, and expanded to manufacture the IP at a dose specified per protocol.

2.8.2. IP Labeling

Information that is provided on the product labeling complies with International Conference on Harmonisation (ICH), GCP, and local regulatory requirements. Study specific treatment label examples may be provided in the Study Appendix. Product details are specified on the IP label. If there are questions about IP labeling, please reach out to CL.

2.8.3. IP Release and Sterility Testing

IP shipments include documentation which confirms that the final IP has met release specifications as per Quality Assurance. **Investigative sites are not required to perform any additional testing prior to infusion.**

If IP does not pass any of the release criteria, the Kite Medical Monitor immediately informs the PI of the result and discusses other potential treatment options for the participant according to local institutional guidelines and their clinical assessment. Additional information regarding the results of the investigation and corrective measures are provided when available, and Kite must notify country specific health authorities per local reporting guidelines.

2.8.4. Preparation of IP for Shipment to the Investigative Site

The IP is transferred to a cryostorage bag which is labeled, placed in an aluminum cassette, cryopreserved, and inserted in the LN_2 dewar. The LN_2 dewar maintains a temperature of $\leq -150°C$.

The cassette includes an insert which is placed over the bag prior to freezing during the manufacturing process.

2.8.5. IP Shipment

CL schedules the IP delivery and provides details to the investigative site.

> **Note:** For EU/UK/CH, Qualified Person Release (QPR) is required to be completed before delivery to the investigative site can be scheduled. Once QPR is completed, CL will notify the investigative site and arrange the delivery.

Kite will immediately inform the investigative site if there is a delay with the IP release or shipment.

It is important for investigative sites to disclose if IP cannot be stored on site in a vapor phase freezer during the feasibility or qualification process. If IP cannot be stored at the investigative site, notify Kite immediately so the IP delivery can be arranged for the evening before or the morning of the planned infusion.

Region-specific documents that are required to accompany the cell therapy product are included in the shipment.

2.8.6. IP Delivery

The IP arrives via a certified courier in a LN_2 shipper. Prior to IP delivery, the investigative site must ensure:

- The appropriate staff are available to receive the IP.
- The staff receiving the IP have source documents containing participant demographic information (e.g., Subject ID) to confirm participant identity.
- All investigative site staff involved with IP receipt and unpacking are trained, have access to, and have tested their Kite Clinical login credentials.
- **Recommended:** A container of dry ice should be prepared for IP inspection. IP inspection may also occur over the LN_2 vapor phase freezer.

2.8.7. Instructions for Safe Use, Handling, and Disposal of IP

IP contains autologous human T cells which have been genetically engineered. Healthcare professionals should employ universal precautions for the prevention of transmission of bloodborne infections per the investigative site's country and/or local requirements (e.g., US investigative sites should follow the Centers for Disease Control and Prevention guidelines for universal precautions for preventing transmission of blood borne infections, (https://www.cdc.gov/niosh/healthcare/risk-factors/bloodborne-infectious-diseases.html?CDC_AAref_Val=) and also local institutional policy for handling of GMOs.

Established procedures for handling live human cells, which are GMOs, should be followed per the local institutional policy and processes. After IP is administered to the participant, the Intravenous (IV) bag, along with the IV tubing and any other components that have contact with the product, should be disposed of in the appropriate biohazard waste system at the institution.

2.8.8. IP Receipt

IP should not be stored in the LN_2 dewar. For investigative sites that do not have access to a vapor phase freezer, IP infusion should occur the same day as receipt. In addition to the instructions outlined in this IPM for IP receipt and unpacking, the investigative site can reference the training video provided by Kite.

After the IP arrives at the investigative site:

- Check the airway bill to confirm that the LN_2 shipper has arrived to its intended destination. The LN_2 shipper must be kept upright at all times.
- Carefully transport the LN_2 shipper to its unpacking/storage location. Due to the size and weight of the shipper, a sturdy, stable cart must be used for transport. The LN_2 shipper should be kept in an area that has adequate cellular or Wi-Fi network to avoid temperature reporting gaps.
- If possible, the LN_2 shipper should be unpacked and inspected near the vapor phase freezer, if storing IP, or near the thaw bath if IP will be administered immediately.
- The unpacking area should have adequate empty counter space or other sturdy flat surfaces for IP inspection and completing the applicable documentation.
- Inspect the exterior of the LN_2 shipper to check for any visual damage (e.g., visible cracks, leakage, broken latch, etc.).
- Immediately report any issues with the LN_2 shipper to CL and wait for further instructions.

2.8.9. IP Unpacking and Inspection

Once the LN_2 shipper passes visual inspection and IP is ready to be unpacked:

- Prior to opening the LN_2 shipper, ensure it is in an area with adequate cellular or Wi-Fi network and review the LN_2 supplier portal to document the internal temperature:
    - Cryoport: https://www.cryoportal.com/livetemp
    - Marken: https://marken-dev.sendum.com/visibility/public
- A Temperature Stability Report (TSR) will be available in Kite Clinical after IP delivery and may be emailed to investigative site staff directly from the LN_2 shipper supplier. Please contact CL if the TSR is not available upon IP delivery. File TSRs and other related temperature reports/forms with other study specific forms at the investigative site.
    - The TSR displays the internal temperatures during transit and indicates an alarm if the temperature deviates from the required range for more than 15 consecutive minutes.
    - Review the TSR to confirm that there is no alarm present.
    - If an alarm is noted on the TSR, immediately contact CL and wait for further instructions before proceeding with unpacking.
- Once the product is ready to be unpacked, cut the zip ties on each side of the LN_2 shipper lid.

- Pull up on the black latches to open.
- Carefully lift the shipper lid to expose the dewar and remove the documentation that was included with the shipment.
- A temperature monitoring device is located on the lid of the dewar. There is no need to open or inspect the device unless requested by CL.
- Verify that the participant information matches the participant demographics in Kite Clinical.
- Remove the fleece vapor plug, if applicable (Cryoport dewars only). The vapor plug for Marken dewars is built into the dewar lid.
- Cut the serialized zip tie and set aside. Keep the zip tie or make a photocopy showing the serial number to keep with the source documents.
    - **Note: For EU/UK/CH, please reach out to your primary EU Logistics Coordinator for further instructions if IP has been delivered but will not be infused.**
- Lift the dewar lid and set aside.
    - **Note:** If 3 or more IP bags are received, see instructions below on how to unpack and inspect 3 or more bags.
- Carefully remove the foam cassette rack by pulling the string straight up.
    - The foam cassette rack should always be supported from the bottom. Do not carry by the string only.
    - Please note the IP inside of the foam rack is extremely fragile.
- Place the foam rack on a flat, sturdy surface.
- Put the LN_2 dewar lid back on to keep the internal environment cold in the event that the IP needs to be returned to the dewar (e.g., for transport).
- Carefully open the foam rack by lifting the upper portion to reveal the product cassette inside.
- Using extreme care, remove the cassette from the rack (do not bend, shake, or put weight on the cassette).
- Gently place the cassette on a container of dry ice on a flat, sturdy surface. The cassette can also be inspected directly over the vapor phase freezer or placed in a Cryopod for inspection.
- Review the cassette label to verify that the information is an exact match to the information in Kite Clinical as well as any other documentation that was provided with the shipment.
- Carefully open the cassette and review the IP bag label to verify that the information is an exact match to the information in Kite Clinical as well as any other documentation that was provided with the shipment.

- The product in the bag is clear to opaque, with white to red color. Each cryostorage bag contains approximately 10-68 mL of product per bag. Each product bag has an affixed IP label. Depending on the dose to be administered (as described in the study protocol), the IP may be supplied in multiple bags. Human serum albumin, and CryoStor® CS10 (cryopreservative containing 10% dimethyl sulfoxide) are added to the product to assure viability and stability of the live cells through the freezing, thawing, and infusion process.
- Carefully inspect the IP bag for discoloration or signs of damage (cracks, broken ports, etc.).
    - **Note:** The IP bag and bag label inspections should take approximately five minutes per bag. Please take all measures to avoid prolonged exposure to conditions outside of the LN_2 dewar and/or vapor phase freezer.
- After completing the inspection of one side, gently close the cassette.
- Carefully turn the cassette over to the other side, and re-open to inspect.
- Once the IP has been fully inspected, complete the Product Shipment Receipt Flow in Kite Clinical referencing GXPMAN-00462.
- A second research staff member is required to sign in as a Verifier to confirm that all data entered by the Performer is complete and accurate.
- A Product Shipment Receipt Report will be available for download/printing once data entry and verification are complete.
- Once the Product Shipment Receipt Flow is completed in Kite Clinical, close the cassette.
- If infusion will not occur right away and IP will be stored, immediately transfer the IP to the vapor phase freezer.
- **Note:** If multiple IP bags are delivered, perform the steps above for each bag and label inspection and verification.
- **If 3 or more IP bags are received:**
- Lift the dewar lid and carefully remove the SafepakXL by pulling straight up on the strap that is attached.
- The SafepakXL should always be supported from the bottom. Do not carry the SafepakXL by the strap only.
- Place the SafepakXL on a flat, sturdy surface and carefully open at the top.
- Remove the cassettes by pulling up on the Cryostrap.
- Secure the cassettes with the opposite hand as the assembly is removed from the SafepakXL.

Immediately contact Kite to report any signs of damage to the LN_2 shipper/components, IP bag, or IP bag label.

2.8.10. IP Storage

The IP must be stored at ≤ -150°C immediately after IP receipt and inspection if infusion will not occur right away. IP must remain in cryogenic storage until thawing and infusion. The investigative site must follow institutional guidelines for inventory and/or storage.

For storage in the vapor phase freezer:

- Ensure the IP is stored in a designated location within the chosen vapor phase freezer to prevent potential mix-up with other products.
- Per institutional guidelines, log the temperature of the vapor phase freezer at the time the IP is placed inside.
- Temperature is required to be monitored by continuous reading and recorded per institutional guidelines to ensure it does not rise above -150°C.

If IP must be stored in the LN_2 shipper temporarily, the investigative site must inform CL and confirm that the continuous temperature readings from the temperature monitoring device are being adequately monitored by the investigative site until the IP is removed.

To return the IP to the LN_2 dewar for temporary storage after inspection:

- Carefully place the cassette(s) back into the foam rack and place the foam lid on top, or into the Safepak XL.
- Remove the dewar lid and insert the foam rack or Safepak XL into the dewar.
- Place the lid on the dewar.
- For Cryoport shippers, replace the fleece vapor plug.
- The temperature monitoring device continuously logs the temperature within the LN_2 dewar. Questions regarding the stability of the IP in storage should be directed to CL.

2.8.11. LN_2 Shipper Return

Immediately after storing or infusing the IP, the investigative site must return the empty LN_2 shipper by following the steps below:

- **Do not place the empty cassette(s), foam rack or SafePak XL back into the dewar.** These items should be discarded per institutional guidelines.
- Replace the dewar lid, close the outer shipper lid, secure the side latches, and apply the provided zip ties.
- Remove the previous airway bill (from Kite Manufacturing to the investigative site) from the shipping pouch and add the provided return shipping label/airway bill.
- Affix the “Empty” label to the outside of the shipper. Do not cover any labels or other information on the outside of the shipper.

- Place the shipper in the pick-up location for the appropriate carrier.

2.8.12. Infusion Procedure Plan

The investigative site informs Kite of the planned date of infusion. It is recommended to start the lympho-depleting chemotherapy regimen for the IP infusion soon after the receipt of the IP, unless otherwise instructed by Kite.

Please refer to the study protocol for the lympho-depleting chemotherapy regimen requirements.

2.8.13. IP Infusion Preparation

Infusion must be done in accordance with institutional guidelines for infusion of blood products. Please refer to the study protocol for IP infusion requirements. Kite will not provide any equipment, supplies, medications, or other materials for IP infusion.

It is preferred that the same staff and equipment are used to minimize variability with IP infusion preparation.

- Coordinate the timing of IP thaw and infusion by confirming the infusion time in advance.
- Adjust the start time of IP thaw so it's available for infusion when the patient is ready.

Refer to the study protocol for procedures to be done prior to and/or on the date of IP infusion (e.g., lympho-depleting chemotherapy, pre-infusion eligibility check, pre-infusion medications, etc.).

Before infusion:

- A second staff member must verify the participant information prior to dosing and record in the source documents.
- Confirm with the PI that the participant remains eligible for IP infusion and proceed to prepare the participant for infusion per the study protocol and institutional guidelines.

2.8.14. IP Thawing

The product should be entirely infused within 1 hour, post thaw. For infusion of multiple bags, thaw and infuse each bag of the product one at a time within 1 hour, post thaw.

Ensure the thawing equipment is properly calibrated as per the supplier's standards.

Within approximately 30 minutes of the planned infusion start time, proceed to thawing the IP bag. Thawing should proceed per institutional guidelines.

> **Note:** The investigative site must inform Kite immediately if IP thawing will take place at another location or in a dry bath.

To prepare for the thaw:

- Obtain a re-sealable plastic bag (overwrap bag) that is large enough to comfortably fit the IP bag.

- Set up the water bath with the water temperature at approximately 37°C ± 1°C.
- Thawing is typically completed in three to five minutes.
- For alternative thawing mechanisms (e.g., dry bath), please reach out to Kite.

Once it is confirmed that the participant and investigative site staff are ready for the infusion, proceed to thawing the IP:

- Remove the IP from the vapor phase freezer.
- Verify that the SID on the cassette label matches the intended participant.
    - **Note:** Do not remove the IP bag from the cassette if the participant's identity does not match.
- Immediately transport the IP to the thawing station.
    - IP must be transported in the cassette and in the vapor phase of a suitable transport vessel to maintain a temperature of ≤ -150°C while in transit to the thaw station.
- Remove the IP bag from the cassette and verify that the information on the IP bag label matches the cassette label.
- Inspect the IP bag for damage, such as breaks or cracks.
    - Immediately report any signs of damage or contamination to CL and await further instructions.
- Inspect the re-sealable plastic bag (overwrap bag) before use to ensure it is intact and there are no visible holes or tears.
- Remove the IP bag from the cassette, carefully place into the over wrap bag removing any excess air out of the over wrap, and seal the bag.
- Document the water bath temperature prior to thaw and thaw start time in the source documents.
- While in the water bath:
    - Check the overwrap bag periodically to ensure it is still intact and there are no leaks.
    - Gently agitate the bag until no visible cell clumps remain.
        - Small clumps of cellular material should disperse with gentle manual mixing.
        - Do not wash, spin down, and/or re-suspend the IP in new media prior to infusion.
- Thaw the IP bag until there is no visible ice in the infusion bag.
- Once thawing is complete, immediately remove the bag from the thaw bath
- **Note**: Frozen IP is cream to yellow in color. After thawing, the IP may turn slightly pink to red.
- Ensure the thaw date, start time, and stop time are recorded in the source documentation.

- Ensure the water bath temp is recorded in the source documentation.
- Once thawed, it is recommended to infuse within 30 minutes, but no longer than 1 hour.
- Immediately transport the thawed IP bag directly to the participant's bedside for infusion.

2.8.15. Infusion Procedure

Prior to the arrival of thawed IP at the participant's bedside, all pre-infusion procedures must have been completed per the study protocol. **Refer to the study protocol for a description of the pre-infusion procedures.**

Upon arrival of the thawed IP, two investigative site staff members must confirm that the IP belongs to the intended participant by reviewing the IP bag label.

If SID verification fails, do not proceed with the infusion. Contact the CL immediately for further instructions.

Ensure tocilizumab and emergency equipment are available prior to infusion and during the recovery period.

After the participant's identity is verified, proceed with IP infusion following institutional guidelines. **Please refer to the study protocol for other study-specific infusion requirements.**

- Do not use a leukodepleting filter. Infusion sets without any in-line filters, or with in-line filters of equal or greater than 200 µm pore size are allowed. Please contact the Kite Medical Monitor if you do not have infusion sets without leukodepleting filters available.
- IP must be administered intravenously via gravity drip or IV pump (no leukodepleting filter).
    - If administered via an IV pump, the rate should be set to administer IP over approximately 15-20 minutes.
- Central venous access is recommended for infusion of the IP.
- Flush the venous line with normal saline (no heparin) to keep open.
- Spike the IP bag with infusion set (no leukodepleting filter). Infusion set with a flow regulator is recommended.
- Prime the line carefully to prevent cells from flowing out before connecting to the participant's venous access.
- Once the line is open and the IP is being infused, record the infusion start time.
- During infusion, gently agitate the IP bag to prevent cell clumping.
- After the entire contents of the bag are infused, the bag and tubing should be back flushed at the same infusion rate with normal saline (no heparin) to ensure all cells are infused following institutional guidelines

- After the back flush with normal saline, record the infusion stop time in the source documents and on the Countersignature Form.
- The investigative site proceeds with post-infusion procedures per the study protocol and institutional guidelines.

2.8.16. IP Infusion Interruption

Contact the Kite Medical Monitor immediately for any infusion reactions or issues requiring interruption that cannot be administered within three hours of thaw start.

> **Note:** Administration or dosing errors need to be documented in the participant's source documentation and respective electronic case report form. For dosing errors that require immediate attention, investigative sites should contact the Kite Medical Monitor for guidance.

2.8.17. Disposal of IP and Infusion Materials

IP should be disposed of following institutional guidelines.

The investigative site may dispose of the empty IP bag, IV tubing, and other materials used during infusion per institutional guidelines.

If the IP bag was partially infused (i.e., some product still remains in the bag), contact Kite for further instructions.

2.8.18. IP Disposition

An IPRF must be completed for every participant to document the disposition of the IP. It is critical to maintain the IPRF at the investigative site as an important piece of source documentation. Complete the IPRF accordingly:

- If IP was administered, complete Sections 1 & 2 and "N/A" all other sections.
- If IP will not be administered, notify Kite and await further instructions. An IP return may be requested by Kite Quality Assurance.
    - If an IP return is requested by Kite, complete Sections 1, 3 & 4 and "N/A" Sections 2, 5 & 6.
    - If Quality Assurance recommends IP disposal at the investigative site, complete Sections 1, 3 & 5 and "N/A" all other sections.

Email the completed IPRF to CL.

2.8.19. Retreatment

If retreatment is allowed per the study protocol, refer to the retreatment criteria.

If retreatment is requested by the investigative site and approved by the Medical Monitor, the investigative site will complete the eligibility process again. CL will provide further instructions based on the retreatment options that are available.

3. PRODUCT COMPLAINTS

All product complaints must be immediately reported to CL.

Product complaints may include the following:

- Clinical apheresis shipper kit
    - Missing or damaged components
- LN_2 shipper and/or dewar
    - Broken or cracked components
    - Cut or missing zip ties
    - Broken temperature devices
    - Temperature excursions
- IP
    - Cracked bag
    - Bag labels are missing, illegible, and/or display incorrect participant information
    - Participant or healthcare provider cannot use the product in accordance with study requirements
    - Change in IP color, presence of particulate matter, or foreign objects within infusion bag
    - Evidence of tampering

Product complaints must be reported as follows:

- Investigative site must report the complaint to CL immediately upon discovery/notification.
- Timeliness of the reporting is important to ensure any necessary precautions are taken to avoid delay of participant treatment.
- If the product complaint is due to a compromised IP bag (e.g., cracked or broken IP bag), complete the Compromised IP Questionnaire and email to CL.
- If possible, please include pictures of the product complaint to CL.

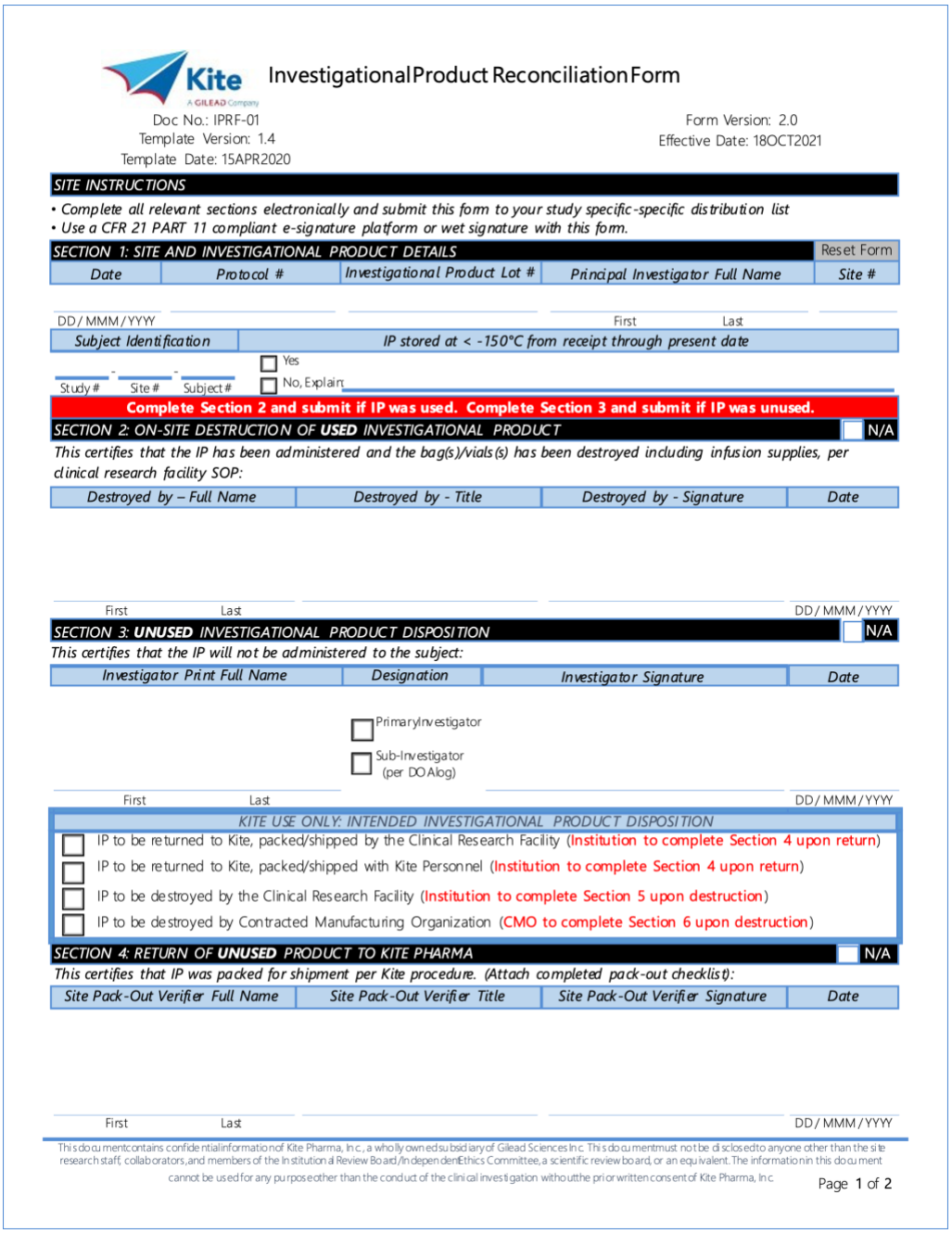
The information provided with the complaint should be as comprehensive as possible to allow for appropriate assessment and action if necessary. As applicable, investigative sites will be notified of any actions needed to resolve the complaint.

4. STUDY APPENDIX

For additional study specific information, refer to the IPM Study Appendix provided by Kite.

5. EXAMPLES OF IPM DOCUMENTS AND FORMS

Investigational Product Reconciliation Form



Kite
A GILEAD Company

Investigational Product Reconciliation Form

Doc No.: IPRF-01
Template Version: 1.4
Template Date: 15APR2020

Form Version: 2.0
Effective Date: 18OCT2021

SITE INSTRUCTIONS

- Complete all relevant sections electronically and submit this form to your study specific-specific distribution list
- Use a CFR 21 PART 11 compliant e-signature platform or wet signature with this form.

SECTION 1: SITE AND INVESTIGATIONAL PRODUCT DETAILS — Reset Form

Date	Protocol #	Investigational Product Lot #	Principal Investigator Full Name	Site #
DD / MMM / YYYY			First Last	

Subject Identification	IP stored at < -150°C from receipt through present date
Study # - Site # - Subject #	☐ Yes ☐ No, Explain

Complete Section 2 and submit if IP was used. Complete Section 3 and submit if IP was unused.

SECTION 2: ON-SITE DESTRUCTION OF USED INVESTIGATIONAL PRODUCT ☐ N/A

This certifies that the IP has been administered and the bag(s)/vials(s) has been destroyed including infusion supplies, per clinical research facility SOP:

Destroyed by – Full Name	Destroyed by - Title	Destroyed by - Signature	Date
First Last			DD / MMM / YYYY

SECTION 3: UNUSED INVESTIGATIONAL PRODUCT DISPOSITION ☐ N/A

This certifies that the IP will not be administered to the subject:

Investigator Print Full Name	Designation	Investigator Signature	Date

☐ Primary Investigator
☐ Sub-Investigator (per DOA log)

First Last DD / MMM / YYYY

KITE USE ONLY: INTENDED INVESTIGATIONAL PRODUCT DISPOSITION

- ☐ IP to be returned to Kite, packed/shipped by the Clinical Research Facility (Institution to complete Section 4 upon return)
- ☐ IP to be returned to Kite, packed/shipped with Kite Personnel (Institution to complete Section 4 upon return)
- ☐ IP to be destroyed by the Clinical Research Facility (Institution to complete Section 5 upon destruction)
- ☐ IP to be destroyed by Contracted Manufacturing Organization (CMO to complete Section 6 upon destruction)

SECTION 4: RETURN OF UNUSED PRODUCT TO KITE PHARMA ☐ N/A

This certifies that IP was packed for shipment per Kite procedure. (Attach completed pack-out checklist):

Site Pack-Out Verifier Full Name	Site Pack-Out Verifier Title	Site Pack-Out Verifier Signature	Date
First Last			DD / MMM / YYYY

Page 1 of 2

Kite A GILEAD Company

Investigational Product Reconciliation Form

Doc No.: IPRF-01
Template Version: 1.4
Template Date: 15APR2020

Form Version: 2.0
Effective Date: 18OCT2021

Complete if a Kite representative is on-site to verify IP pack-out and shipment, otherwise N/A: ☐

Kite Representative - Name	*Kite Representative - Title*	*Kite Representative - Signature*	*Date*
First Last			DD/MMM/YYYY

SECTION 5: ON-SITE DESTRUCTION OF UNUSED INVESTIGATIONAL PRODUCT ☐ N/A

*This certifies that the IP will **not** be administered and the bag(s)/vial(s) has been destroyed, per Clinical Research Facility SOP:*

Destroyed by – Full Name	*Destroyed by – Title*	*Destroyed by – Signature*	*Date*
First Last			DD/MMM/YYYY

Complete a secondary confirmation as required by Clinical Research Facility SOP, otherwise N/A: ☐

Confirmed by – Full Name	*Confirmed by – Title*	*Confirmed by – Signature*	*Date*
First Last			DD/MMM/YYYY

SECTION 6: CMO DESTRUCTION OF UNUSED INVESTIGATIONAL PRODUCT ☐ N/A

This certifies that the IP bag(s)/vial(s) has been destroyed, per Contracted Manufacturing Organization SOP:

Destroyed by – Full Name	*Destroyed by – Title*	*Destroyed by – Signature*	*Date*
First Last			DD/MMM/YYYY

Airway Bill

Marken:

MARKEN
a UPS Company

AIRWAYBILL *606X27948519*

Marken LosAngeles
+1 310 641 8393 606X27948519 1 of 1

Shipper	Consignee	Waybill Number
Kite Pharma, Inc. 1800 Stewart Street Santa Monica, CA 90404 United States	ABC 123 Mountain Rd. Draper, UT 12345 United States	606X27948519
Contact	Contact	Schd Collection: 19 Mar 2024
Reference	Reference	Schd Delivery: 20 Mar 2024
Telephone	Telephone	Client Account: LA1241

Content Description	Pcs	Range (°C)	Kgs	Packaging Type	Packaging Supplier	Packaging Dims (LxWxH) cm	Assets Type	Assets Supplier	Assets Rcv'd	Assets Serial #
ENGINEERED HUMANCELLS	1	-150	35.38	Cryoport MVE IATA	Client	56 56 69				
TOTALS Pieces	1	Actual Kgs	35.38	Volu Kgs	43.28	Value	0.00			

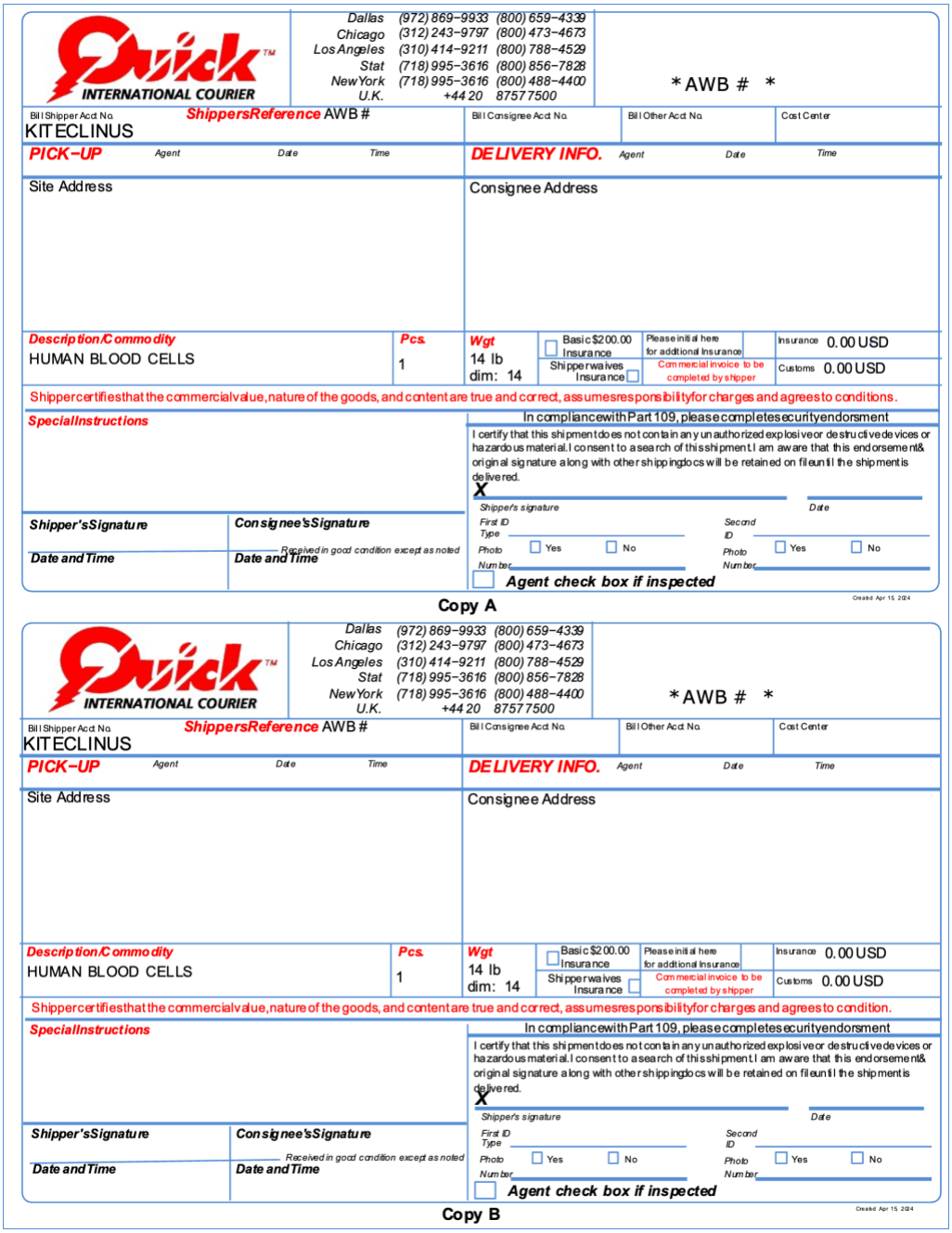
Special Instructions	Collected in good order & condition	Received in good order & condition
	Signature	Signature
Shippers signature	Printed name	Printed name
Printed Name	Date / Time	Date / Time
Date / Photo ID Type	NOTE: The goods described above are accepted in apparent good order and condition (except where noted by shipper or noted above) for delivery to the stated consignee, subject to Marken's Standard Terms and Conditions, available for review at http://www.marken.com/terms-and-conditions.aspx, which limit Marken's liability	

MARKEN
a UPS Company

606X27948519
606X27948519

Package
1 of 1

Quick:



Quick INTERNATIONAL COURIER

Dallas (972) 869-9933 (800) 659-4339
Chicago (312) 243-9797 (800) 473-4673
Los Angeles (310) 414-9211 (800) 788-4529
Stat (718) 995-3616 (800) 856-7828
NewYork (718) 995-3616 (800) 488-4400
U.K. +44 20 87577500

*AWB # *

Bill Shipper Acct No. KITECLINUS | Shippers Reference | AWB # | Bill Consignee Acct No. | Bill Other Acct No. | Cost Center

PICK-UP Agent Date Time

DELIVERY INFO. Agent Date Time

Site Address

Consignee Address

Description/Commodity	Pcs.	Wgt			
HUMAN BLOOD CELLS	1	14 lb dim: 14	Basic $200.00 Insurance / Shipper waives Insurance	Please initial here for additional Insurance / Commercial invoice to be completed by shipper	Insurance 0.00 USD / Customs 0.00 USD

Shipper certifies that the commercial value, nature of the goods, and content are true and correct, assumes responsibility for charges and agrees to conditions.

Special Instructions

In compliance with Part 109, please complete security endorsment

I certify that this shipment does not contain any unauthorized explosive or destructive devices or hazardous material. I consent to a search of this shipment. I am aware that this endorsement & original signature along with other shipping docs will be retained on file until the shipment is delivered.

X Shipper's signature Date

Shipper's Signature / Consignee's Signature

Received in good condition except as noted

Date and Time / Date and Time

First ID Type Photo Yes No Number

Second ID Photo Yes No Number

Agent check box if inspected

Created Apr 15, 2024

Copy A

Quick INTERNATIONAL COURIER

Dallas (972) 869-9933 (800) 659-4339
Chicago (312) 243-9797 (800) 473-4673
Los Angeles (310) 414-9211 (800) 788-4529
Stat (718) 995-3616 (800) 856-7828
NewYork (718) 995-3616 (800) 488-4400
U.K. +44 20 87577500

*AWB # *

Bill Shipper Acct No. KITECLINUS | Shippers Reference | AWB # | Bill Consignee Acct No. | Bill Other Acct No. | Cost Center

PICK-UP Agent Date Time

DELIVERY INFO. Agent Date Time

Site Address

Consignee Address

Description/Commodity	Pcs.	Wgt			
HUMAN BLOOD CELLS	1	14 lb dim: 14	Basic $200.00 Insurance / Shipper waives Insurance	Please initial here for additional Insurance / Commercial invoice to be completed by shipper	Insurance 0.00 USD / Customs 0.00 USD

Shipper certifies that the commercial value, nature of the goods, and content are true and correct, assumes responsibility for charges and agrees to condition.

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X Shipper's signature Date

Shipper's Signature / Consignee's Signature

Received in good condition except as noted

Date and Time / Date and Time

First ID Type Photo Yes No Number

Second ID Photo Yes No Number

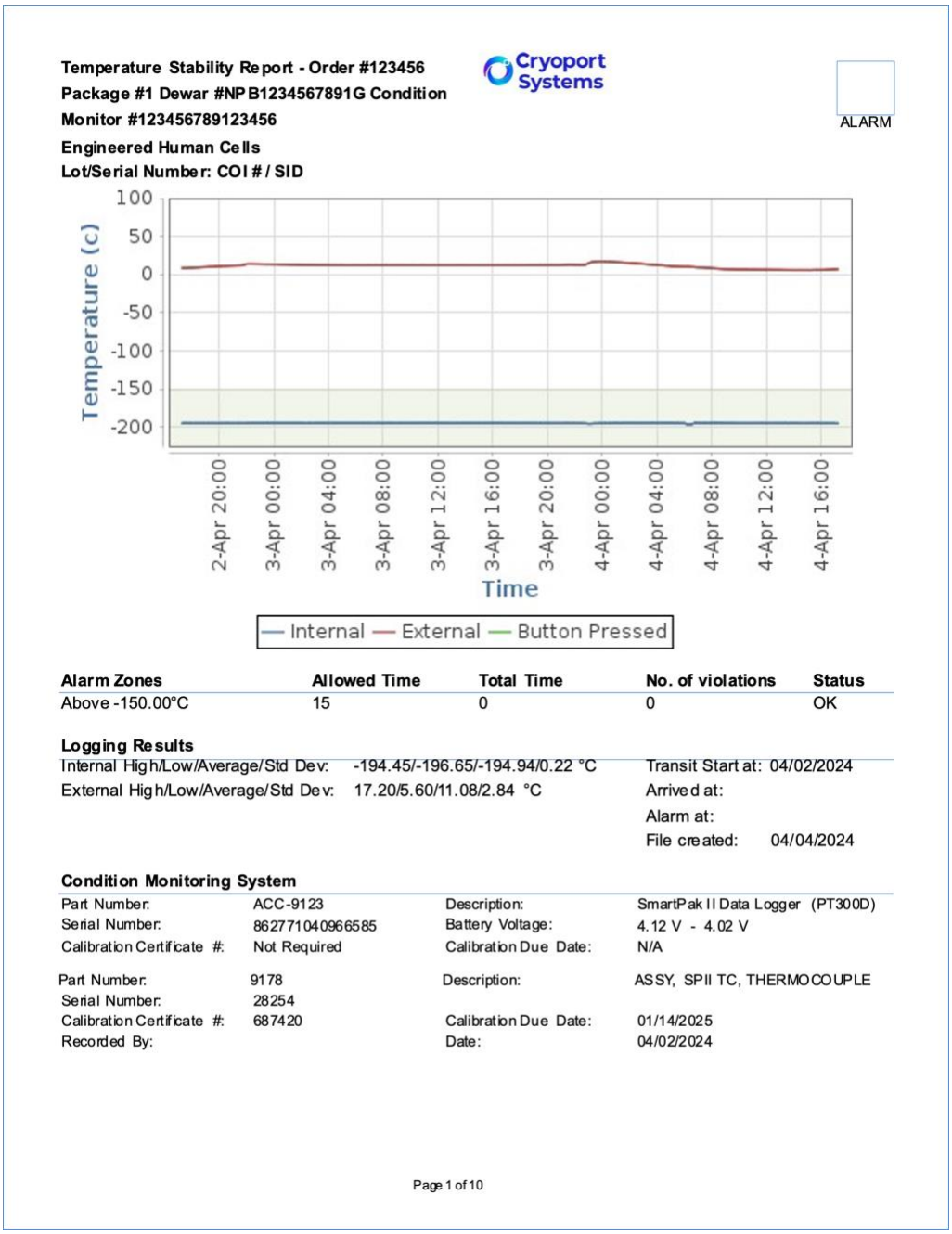
Agent check box if inspected

Created Apr 15, 2024

Copy B

Temperature Stability Report

Cryoport:



Temperature Stability Report - Order #123456
Package #1 Dewar #NPB1234567891G Condition
Monitor #123456789123456
Engineered Human Cells
Lot/Serial Number: COI # / SID

Cryoport Systems

ALARM

Alarm Zones	Allowed Time	Total Time	No. of violations	Status
Above -150.00°C	15	0	0	OK

Logging Results

Internal High/Low/Average/Std Dev: -194.45/-196.65/-194.94/0.22 °C
External High/Low/Average/Std Dev: 17.20/5.60/11.08/2.84 °C

Transit Start at: 04/02/2024
Arrived at:
Alarm at:
File created: 04/04/2024

Condition Monitoring System

Part Number:	ACC-9123	Description:	SmartPak II Data Logger (PT300D)
Serial Number:	862771040966585	Battery Voltage:	4.12 V - 4.02 V
Calibration Certificate #:	Not Required	Calibration Due Date:	N/A
Part Number:	9178	Description:	ASSY, SPII TC, THERMOCOUPLE
Serial Number:	28254		
Calibration Certificate #:	687420	Calibration Due Date:	01/14/2025
Recorded By:		Date:	04/02/2024

Page 1 of 10

Marken:

Sendum PDF Report (report-643X31282675-862771041536163-2024-11-12-689bdcf5-8df3-4796-8731-e7f8bd5

Document Title: Kite Live Group_11/12/2024_00:23:16

Additional Information

HAWB 643X31282675 | Client Id Probe Expiry 21-Aug-2025 | Container NPB2022280623G

Device Configuration

Type:	PT300D	Current State:	Completed
Logger ID:	862771041536163	Remaining Battery:	83 %
Log Interval / Duration:	8 m 31 s / 0.8 d	Probe ID:	28061
Report Time Base:	GMT +01:00	Logger Start:	11/03/2024 15:00:00
Configured by:	sendum@marken.com		
Date format:	MM/DD/YYYY		

ALARM

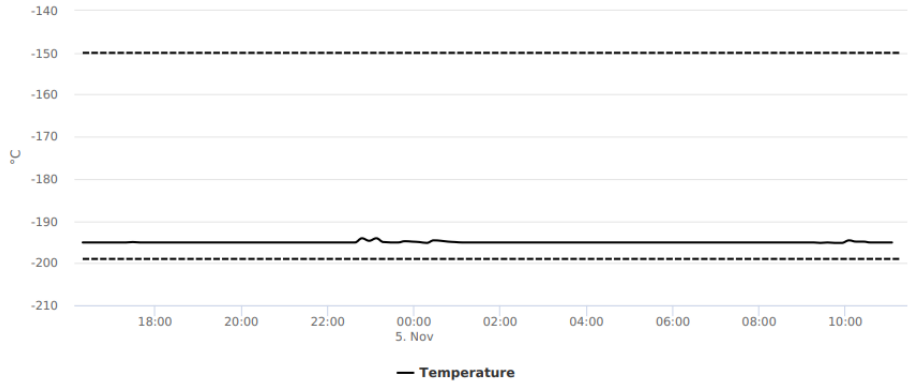
Temperature Data Source

Outside Temperature ( ) Payload Temperature (X)

Alarm Conditions		Total Time		Status
Upper Threshold:	-150 °C	Time above Threshold:	0 s	OK
Lower Threshold:	-199 °C	Time below Threshold:	0 s	OK

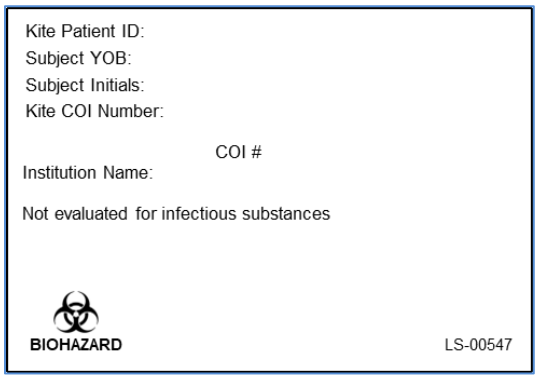
Logging results

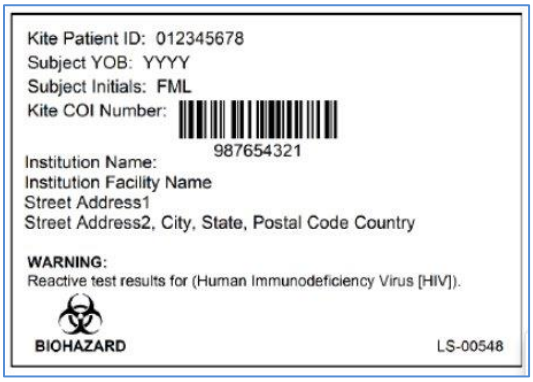
Highest Temperature:	-194.1 °C; 11/04/2024 22:47:20	Transit Start at:	11/04/2024 16:18:55
Lowest Temperature:	-195.2 °C; 11/05/2024 00:17:02	Arrived at:	not available
Average Temperature:	-195.1 °C	Alarm at	--
MKT	-195.0 °C	File created:	11/12/2024 00:23:16



Report created by Findum Page 1/2

Apheresis Bag Label





Compromised IP Questionnaire

Kite Compromised Investigational Product Questionnaire

Doc No.: CPBQ-01
Template Version: 3.1
Template Date: 13APR2020

Form Version: 2.2
Effective Date: 09SEP2020

Site Instructions:

- Contact the Study Team and follow the Investigational Product Manual (IPM) section titled 'Product Complaints' for instructions for the reporting and next steps in managing a compromised Investigational Product (IP).
- If compromised IP is discovered at time of receipt, proceed with accessioning and then store the product at the appropriate conditions (i.e., </= -150°C) per the IPM.
- Please provide the following via email to the study-specific distribution list:
  - Pictures of the compromised IP
  - Institutional SOP regarding use of compromised IP (if not provided previously)
  - Completed subject specific Investigational Product Shipment Receipt (IPSR) Form (print out from Kite Clinical)
  - This completed Compromised Investigational Product Questionnaire
- Contact the Logistics Coordinator via the study-specific distribution list to confirm and arrange shipment of IP receptacle. Follow site's standard decontamination procedures and place the receptacle in a sealed bag for return to Kite Pharma.
- File all relevant documents appropriately at the site

Please provide the following:		
SECTION 1: SITE DETAILS		
1.	**Site name**	
2.	**Principal Investigator (First, Last)**	
3.	**Protocol number**	
4.	**9 digit Subject ID number**	_____-_____-_____
5.	**Site staff who received the product**	**Name:** **Dept.:** **Email:** **Telephone:**
6.	**If applicable, contact information for other personnel who could assist with questions pertaining to the product issue**	**Name:** **Dept.:** **Email:** **Telephone:**

Kite A GILEAD Company

Compromised Investigational Product Questionnaire

Doc No.: CPBQ-01
Template Version: 3.1
Template Date: 13APR2020

Form Version: 2.2
Effective Date: 09SEP2020

7.	Date and time product issue was discovered	Date: Time:
8.	Indicate the step where the product issue was discovered after receipt (e.g. initial receipt at site, upon removal from the sites vapor phase freezer-in preparation for thaw, at the time of thawing or other, such as during hood prep or bedside).	Select One: ☐ Initial Receipt ☐ At time of removal from vapor phase freezer ☐ Time of thawing ☐ Other (please provide more details below)
9.	How long (in minutes) was the IP outside of the LN_2 dewar during receipt and accessioning before it was stored in the site vapor phase freezer?	# Minutes:
10.	Brief description of product issue at time of discovery. Please include relevant details (e.g., observed issues with rack and/or cassette, broken tubing or port, cracked bag/vial).	Description:
Complete the following questions (11a-13) if product issue was discovered at time of initial receipt at site or upon removal of the product from the site's vapor phase freezer: Not applicable ☐		
11a.	Was the IP receptacle (i.e. cassette or Cryobox) first opened at the time the shipper was received at site?	☐Yes ☐No* If 'no', complete 11b
11b.	Date and time IP receptacle (i.e. cassette or Cryobox) was opened	Date: Time:
12.	Was the IP receptacle (i.e. cassette or Cryobox) difficult to open?	☐Yes* ☐No If 'yes', explain:

Kite A GILEAD Company

Compromised Investigational Product Questionnaire

Doc No.: CPBQ-01
Template Version: 3.1
Template Date: 13APR2020

Form Version: 2.2
Effective Date: 09SEP2020

13.	**Did the IP receptacle (e.g. cassette) stick to the product bag?**	☐Yes ☐No ☐ Not applicable
Complete the following question (14) if product issue was discovered upon removal of the product from the site's vapor phase freezer or during thawing and/or preparation: Not applicable ☐		
14.	**Were there any temperature excursions during the time the product was stored in the site's vapor phase freezer?**	☐Yes* ☐No **If 'yes', provide details:**
Complete the following questions (15-17) if product issue was discovered during thawing and/or preparation: Not applicable ☐		
15.	**For how many days was the product stored in the site's vapor phase freezer before thawing?**	**# Days:**
16.	**Was the product thawed at bedside or a central thawing station?**	☐ IP Thawing at Bedside ☐ IP Thawing at Central Station
17.	**Were any reagents used in the process of thawing the product?**	☐Yes* ☐No **If 'yes', provide details (e.g. name of reagent, amount):**
Complete the following questions (18-22): Not applicable ☐		
18.	**Was the site's SOP for use of compromised IP followed for this incident?**	☐Yes ☐No*

Kite A GILEAD Company

Compromised Investigational Product Questionnaire

Doc No.: CPBQ-01
Template Version: 3.1
Template Date: 13APR2020

Form Version: 2.2
Effective Date: 09SEP2020

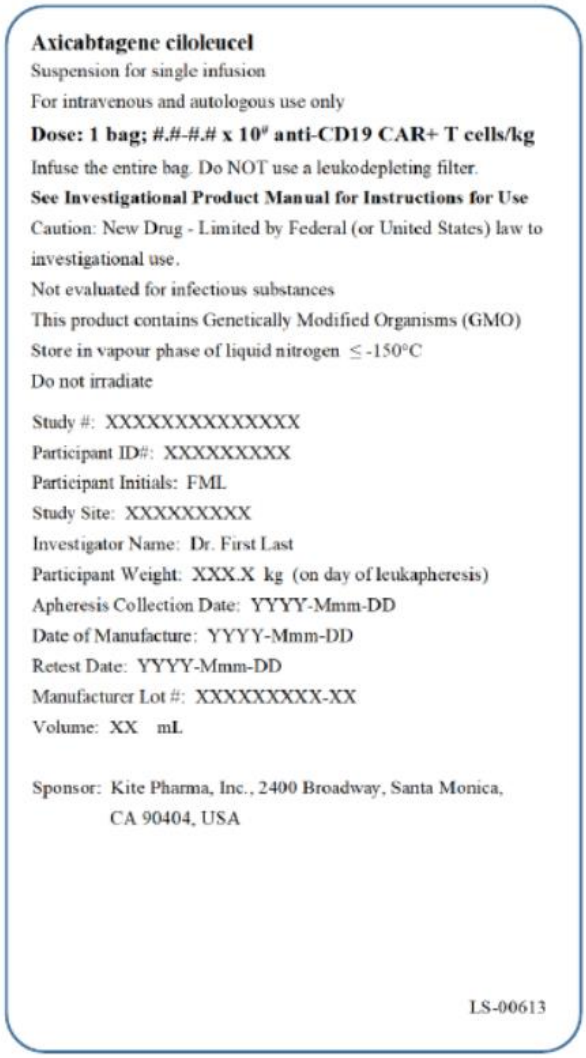
		If 'no', please explain:
19.	**Were there any deviations from the site's SOP for use of compromised IP that was due to the condition of the damaged receptacle?**	☐**Yes*** ☐**No** **If 'yes', please explain:**
20.	**Was a sterility assay performed with the thawed product per the site's SOP?**	☐**Yes*** ☐**No** **If 'yes', please provide details of assay and results once available:**
21.	**If product was administered to the subject, was the subject given prophylactic antibiotics?**	☐**Yes*** ☐**No** **If 'yes', please provide the following:** • **Name of antibiotic:** • **Dose:** • **Start date:** • **Stop date:**
22.	**Was the product issue reported to your IRB/EC per your institutional guidelines?**	☐**Yes** ☐**No**

Name (printed) and Role

Signature

Date (DD/MMM/YYYY)

IP Hang Tag Label



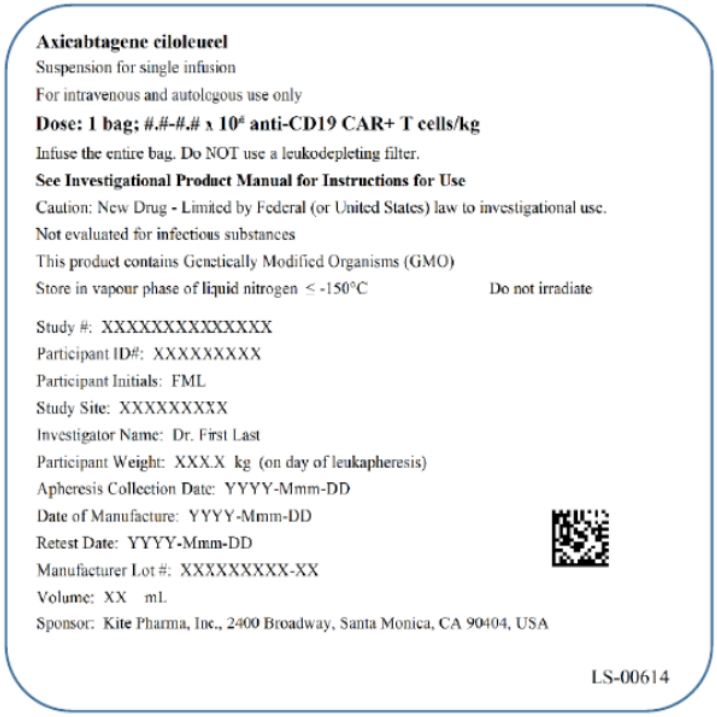
Axicabtagene ciloleucel
Suspension for single infusion
For intravenous and autologous use only
Dose: 1 bag; #.#-#.# x $10^{#}$ anti-CD19 CAR+ T cells/kg
Infuse the entire bag. Do NOT use a leukodepleting filter.
See Investigational Product Manual for Instructions for Use
Caution: New Drug - Limited by Federal (or United States) law to investigational use.
Not evaluated for infectious substances
This product contains Genetically Modified Organisms (GMO)
Store in vapour phase of liquid nitrogen ≤ -150°C
Do not irradiate

Study #: XXXXXXXXXXXXX
Participant ID#: XXXXXXXXX
Participant Initials: FML
Study Site: XXXXXXXXX
Investigator Name: Dr. First Last
Participant Weight: XXX.X kg (on day of leukapheresis)
Apheresis Collection Date: YYYY-Mmm-DD
Date of Manufacture: YYYY-Mmm-DD
Retest Date: YYYY-Mmm-DD
Manufacturer Lot #: XXXXXXXXX-XX
Volume: XX mL

Sponsor: Kite Pharma, Inc., 2400 Broadway, Santa Monica, CA 90404, USA

LS-00613

IP Cassette Label



IP Bag ID Label

SUMMARY OF CHANGES

Version Date	Version	Description of Changes
01-NOV-2024	2.0	New IPM template

07-APR-2025	3.0	• Updated Template Instructions.
		• Formatted updates throughout.
		• Clarifying/minor verbiage added throughout.
		• Updated “investigational” to “investigative” throughout.
		• Updated “apheresis shipper kit” to “clinical apheresis shipper kit” throughout.
		• Removed Attachment references throughout.
		• Updated “subject” to participant throughout with some exceptions.
		• Organized sections in chronological order.
		• Added ‘(s)’ to Sponsor and Investigational Product Name on title page.
		• Introduction.
		  ○ Added “study” to protocol statement.
		  ○ Updated statement about sample documents as they are provided in Section 5.
		  ○ Updated “investigators” to “investigative”.
		  ○ Added details around how to communicate with Kite.
		• Section 2: Enrollment & Cell Journey.
		  ○ Updated section title.
		  ○ Updated cell journey statement verbiage.
		  ○ Removed specific responsibilities within the cell journey.
		  ○ Defined “PI”.
		• Section 2.1: Clinical Logistics.
		  ○ Updated CL responsibilities.
		  ○ Removed redundant verbiage and incorporated into the appropriate section(s).

		• Section 2.3: Participant Registration and Request for a Manufacturing Slot.
		  ○ Updated section title.
		• Section 2.4: Good Documentation Practices (GDP).
		  ○ Added “if applicable” to completing paper-based forms.
		  ○ Added information about Kite Clinical and GDP.
		  ○ Incorporated previous section: Participant Initials (not applicable for EU, UK, JP and Swiss investigative sites) into this section.
		  ○ Incorporated previous section: Participant Identifiers that Cannot be Disclosed into this section.
		• Section 2.5: Patient Health Information (PHI).
		  ○ Defined PHI.
		  ○ Defined GCP.
		• Section 2.6: Screening Confirmation.
		  ○ Added “prior to confirming participant eligibility”.
		  ○ Moved GXPMAN-00462 to Section 2.3: Participant Registration and Request for a Manufacturing Slot.
		  ○ Moved slot availability statement to Section 2.3: Participant Registration and Request for a Manufacturing Slot.
		  ○ Moved Kite Clinical SID generation statement to Section 2.3: Participant Registration and Request for a Manufacturing Slot.
		  ○ Updated verbiage in statement about required screening assessments.

		○ Moved leukapheresis date change statement to Section 2.3: Participant Registration and Request for a Manufacturing Slot. • Section 2.7: Eligibility Confirmation for Leukapheresis and Randomization (if applicable). ○ Updated section title. ○ Added timeline for logging into EDC to confirm eligibility prior to leukapheresis. ○ Added apheresis label to documents that CL provides. ○ Updated verbiage in courier statements and added instruction to avoid direct contact with the courier aside from handing off and receiving shipments. • Section 2.8: Leukapheresis. ○ Removed eligibility statement. • Section 2.8.1: Leukapheresis Equipment and Materials. ○ Replaced “Study Team” with “Kite”. • Section 2.8.2: Leukapheresis Procedure and Cell Collection Target. ○ Combined previous section 2.6.2 “Leukapheresis Cell Collection Target” with this section. ○ Moved verbiage around the agreed upon leukapheresis date to Section 2.3: Participant Registration and Request for a Manufacturing Slot. • Section 2.8.3: Leukapheresed Product Shipment Supplies. ○ Added instruction for investigative site to use the FIFO method for apheresis shipper kits.

		○ Updated “study specific distribution list” to “CL”. ○ Updated criteria for monitoring apheresis kit inventory. • Section 2.8.4: Prior to Leukapheresis. ○ Updated section title. ○ Defined SOP. ○ Replaced “shipment documents” with “the courier airway bill”. ○ Added step to print other shipping documents provided by Kite. ○ Added previous section 2.6.3.3: Apheresis Bag Label details. ○ Added step for investigative site to enter additional label content into the appropriate field in Kite Clinical when prompted. ○ Added statement regarding investigative site notifying Kite about institutional labeling requirements prior to SIV/PSSV. ○ Rearranged text. • Section 2.8.4.1: During and After Leukapheresis. ○ Added instruction to record the leukapheresis stop time in the participant’s source documents. ○ Removed apheresis procedure duration. ○ Replaced “study specific distribution list” with “Kite”. • Section 2.8.5: Entering Apheresis Collection Information into the Database. ○ Updated instruction for including the Apheresis Report with the aph shipment.

		• Section 2.8.5.1: Packing the Apheresis Bag into the Clinical Apheresis Shipper Kit. ○ Added statement around training videos. ○ Re-worded instructions for pressing the actuator buttons on the NanoCool engine. ○ Added details on potential damage to cooling engine if not activated properly. ○ Removed step to insert aph bag label into pouch and affix using plastic tie (redundant). ○ Added a note for investigative site to contact CL if the NanoCool engine didn't cool properly. ○ Added note to avoid tilting the NanoCool while applying tamper tape. ○ Added instruction for investigative site to contact CL if there are issues with the courier. • Section 2.8.6: Shipment of Leukapheresed Product. ○ Added statement informing that delivery date/time to Kite MFG varies depending on the investigative site location. • Section 2.8.7: Leukapheresed Product Receipt. ○ Updated verbiage to be clearer about receipt process at Kite MFG. • Section 2.8.14: IP Thawing. ○ Updated verbiage on thawing and infusion of multiple bags. ○ Amended infusion duration to align with infusion timeline. • Section 2.9.1: Investigational Product Manufacturing.

		○ Moved details around leukapheresed product receipt to Section 2.8.7: Leukapheresed Product Receipt. • Section 2.9.2: IP Labeling ○ Updated section title. ○ Added instruction to contact CL if there are any questions about IP labeling. • Section 2.9.4 Preparation of IP for Shipment to the Investigative Site. ○ Removed specifics around cassette insert materials. • 2.9.5 IP Shipment. ○ Removed “Once the IP is released from QA” for courier scheduling. ○ Added note regarding QPR and IP delivery scheduling for EU/UK/CH. • Section 2.9.6: IP Delivery to Investigative Site. ○ Updated section title. ○ Added instruction to ensure all investigative site staff involved with IP receipt and unpacking are trained, have access to, and have tested their Kite Clinical login credentials. • Section 2.9.7: Instructions for Safe Use, Handling, and Disposal of IP. ○ Moved verbiage from another section. • Section 2.9.8: IP Receipt. ○ Added statement around training videos. ○ Added instruction to keep the LN2 shipper in an area that has adequate cellular or Wi-Fi network to avoid temperature reporting gaps.

		○ Replaced “study specific distribution list” with “CL”. • Section 2.9.9: IP Unpacking and Inspection. ○ Updated TSR details and instructions. ○ Removed document specifics. ○ Added specifics around vapor plug. ○ Removed statement regarding IP being infused immediately (redundant). ○ Added step to set dewar lid aside once opened. ○ Added instruction for EU/UK/CH: contact EU LC if product will not be infused. ○ Added instructions for receiving 3+ bags. ○ Added note regarding duration of bag inspection and to avoid prolonged exposure to conditions outside of the LN2 dewar and/or vapor phase freezer. ○ Added step to reference GXPMAN-00462 for completing the Product Shipment Receipt Flow in Kite Clinical. ○ Specified “by the Performer”. ○ Updated “study specific distribution list” to “Kite”. • Section 2.9.10: IP Storage. ○ Added instruction to keep IP in cryogenic storage if infusion will not occur right away. • Section 2.9.11: LN2 Shipper Return. ○ Combined bullets 1 and 2. ○ Added step to apply zip ties to outer latches on LN2 shipper.

		○ Added step to ensure no labels on the outside of the LN2 shipper are covered. ○ Updated “courier” to “carrier”. ○ Removed statement about temperature excursions (redundant). • Section 2.9.12: Infusion Procedure Plan. ○ Replaced “study specific distribution list” with “Kite”. • Section 2.9.14: IP Thawing. ○ Updated template instructions for KITE-772. ○ Replaced “study specific distribution list” with “Kite” and “CL”. ○ Removed requirement to keep the top of the ports on the IP bag above the water. ○ Separated out instructions for recording thaw details. • Section 2.9.15: IP Infusion Procedure. ○ Replaced “study specific distribution list” with “CL”. ○ Abbreviated subject ID. ○ Removed redundant verbiage around participant identity confirmation. ○ Added instruction to back flush the bag and tubing after IP is infused. ○ Specified which documents to record the infusion date/time in. ○ Removed IPRF instruction and moved to another section. ○ Replaced “study specific distribution list” with “CL”. • Section 2.9.16: IP Infusion Interruption.

Version Date	Version	Description of Changes
		○ Replaced “study specific distribution list” with “the Kite Medical Monitor”. • Section 2.9.17: Disposal of IP and Infusion Materials. ○ Updated section title. • Section 2.9.18: IP Disposition. ○ New section. ○ Added IPRF details and instructions for various disposition scenarios. • Section 3: Product Complaints. ○ Replaced “study specific distribution list” with “CL”. • Section 4: Study Appendix. ○ Updated verbiage. • Section 5: Examples of IPM Documents and Forms. ○ Removed Attachment letters. ○ Updated IP bag label to IP Hang Tag Label. • Summary of Changes. ○ New section.