Office of Biostatistics and Epidemiology/Division of Epidemiology Periodic Safety Report Review Checklist Completed by Reviewer					
Manufacturer	Pfizer-BioNTech				
STN #	19736/289				
DCC Login ID #	Process Track ID: 528778				
Submission Type	PAER PSUR				
	PBRER PADER				
Submission Format					
Reporting Period	FROM March 1, 2021				
	TO March 31, 2021				
Date Received by FDA	April 15, 2021				
Date Routed to Reviewer	April 15, 2021				
Regulatory Information Specialist (RIS) - Name	Ramachandra Naik				
Reviewer - Name	Deborah Thompson				
Reviewer Signature (electronic signature)	Deborah L. Thompson -S				
	Deborah L. Digital y signed by Deborah Tompson 5 Discuto and Society Society and the second s				

COMMENTS

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1. Countries where the product is licensed or authorized for distribution:

	Not Reported	us 🖌	Worldwide			
2.	2. Estimated number of doses distributed by reporting period/cumulative:					
	Not Reported	^{US} (b) (4)	current / (b) (4)	cumulative		
	Not Applicable	Worldwide 120,9	017,940 current / 243,14	45,305 cumulative		
3.	Does this report describe any actions ta this product (e.g. labeling changes)?	taken by the manufact Yes	cturer or other regulatory age No	ency for		
4.	Have there been any new safety issues identified by the reviewer in this PSUR? Yes 🖌 No					
	If YES, please provide pertinent information below AND notify/discuss safety issues with the Team Lead and/or Branch Chief. The reference safety information (RSI) was updated on March 2, 2021 with the following safety-related changes: diarrhea, pain in extremity (arm), and vomiting (added as adverse reactions in Section 4.8 Undesirable Effects).					
	Reviewer comment: Section 6.2 of he EUA product lab	beling was updated with the t	erms diarrhea, pain in extremity (arm), a	and vomiting.		
	In addition, the following safety topics and signals were addressed by the sponsor in his reporting period and will be added to the RSI and proposed local labels "in due course" per labeling and regulatory processes: vaccine stress-related responses, including dizziness, paraesthesia, and tachycardia. Evaluation of hepa ic events, herpes zoster, and seizure is ongoing. The sponsor evaluated the following events and determined hey are not a risk/not a validated signal: delayed skin reactions, extensive swelling of vaccinated limb, reactions associated wi h dermal fillers, thromboembolic events (including those with thrombocytopenia), anosmia, ageusia, arrhythmia, dysphagia, hoarseness, hypertension, hypoglycemia, meningitis, myasthenia gravis, periphera neuropathy, and transverse myeli is.					
	The company investigated reports of vials with leakage container closure process (crimping) batches were affected and were quarantined. The com Macau. No batches (b) (4) are currently distrib	(b) (4) npany excluded any influence				
	Conclusions:					

The contents of this PSUR/PAER do not indicate a need for further regulatory action.

Please see the following comments and recommendations:

Reference Documents (X:\DE\MEDICAL OFFICER\Guidance Documents):

- 1. E2C Clinical Safety Data Management: Periodic Safety Update Reports for Marketed Drugs 1996
- 2. Addendum to E2C Safety Data Management: Periodic Safety Update Reports for Marketed Drugs 2004

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