INFORMED CONSENT/PARENTAL PERMISSION FORM FOR VIGIV TREATMENT UNDER AN EXPANDED ACCESS INVESTIGATIONAL NEW DRUG (IND) PROGRAM

Please read this consent form carefully and ask any questions you may have. If you want to get VIGIV under this treatment program, we will ask you to sign this consent form. This form is also used for parents or other legal guardians to review the contents of the consent form and give permission for their child to be treated. You will get a copy of this form to keep.

BACKGROUND
VIGIV is being offered because you:

• Have or may have been exposed to a poxvirus (such as monkeypox [mpox]) and have infection or may be at risk of developing infection, including a serious or life-threatening disease.

OR

• Have or may have been exposed to vaccinia (the virus in one of the smallpox vaccines that contains live virus) through getting the vaccine, contact with another person who got the vaccine, because of the work you do, or contact with a person or animal sick with orthopoxvirus, and have developed or are at high risk of having a serious reaction.

This program is sponsored by the Centers for Disease Control and Prevention (CDC). This form provides information you may want about VIGIV before you decide to be part of it.

WHAT ARE POXVIRUSES?
Poxviruses are a family of viruses that can cause serious diseases such as smallpox, mpox and cowpox. Poxviruses also include vaccinia virus, which is most commonly caused by exposure to the smallpox vaccine (ACAM2000). Poxviruses may cause the following symptoms:

• Severe rash, which can leave scars when healed
• High fever
• Chills
• Tiredness
• Severe headaches
• Backache and/or muscle aches
• Swollen glands (lymph nodes)

The illness typically starts with a fever and other symptoms before the rash begins. However, the rash may begin without other symptoms. The rash looks like raised bumps and pus-filled blisters (called lesions). They usually crust, scab, and fall off after about 2-4 weeks, leaving a pitted scar.

Some people who get the smallpox vaccine ACAM2000 or come in contact with a person who got the vaccine may develop serious reactions such as spread of the vaccinia virus to other parts of the body or serious reaction at the injection site. These conditions may require treatment with VIGIV.

WHAT IS VIGIV?
Vaccinia Immune Globulin Intravenous (also known as VIGIV or CNJ-106) is a drug that contains antibodies that can help to treat infections caused by poxviruses and reactions to the smallpox vaccine. People who have been vaccinated more than once (usually many times) with the smallpox vaccine (which contains vaccinia virus) have given their blood to make VIGIV. Blood is collected from these people. The part of the blood that protects from vaccinia infection is taken out, cleaned, and bottled. This part of the blood is called the immune globulin. VIGIV also contains inactive ingredients maltose and polysorbate 80.

VIGIV is approved by the Food and Drug Administration (FDA) to treat certain serious reactions.
as a result of smallpox vaccination. But, it is not currently approved for use in preventing or treating serious complications in persons exposed to non-vaccinia virus (such as mpox). Also, it is not FDA-approved for some vaccinia virus reactions such as vaccinia infection of the eye.

WHAT WILL HAPPEN IF YOU CHOOSE TO BE TREATED WITH VIGIV?

• If you agree to VIGIV treatment, you will need to sign this consent form to begin receiving VIGIV.
• You will be asked about your health, any medicines that you are taking, and any allergies you have.
• Your doctor will give you a physical exam and may perform the following tests before and during your treatment with VIGIV:
  A. Blood tests for liver and kidney functions and a full blood count
  B. Blood test for antibodies you have (about 5 ml or 1 teaspoon of blood) if this testing is performed
• You will then get VIGIV through a needle in a vein in the arm or in another area of the body. This will take about 1–2 hours.
• Your vitals (blood pressure, heart rate, etc.) will be monitored before the infusion starts, during the infusion, and 1 hour following the completion of infusion.
• You may need more doses or higher amounts of VIGIV after the first dose depending on how sick you are or if you do not respond to the first dose.
• If you have any lesions, pictures of them may be taken throughout your treatment to see if they are getting better. If you are being treated as an outpatient, your doctor may also ask you to take pictures of your lesions to send to your doctor. Your doctor may send pictures of your lesions to CDC.
• Your doctor may follow up with you after the last dose or when you have gotten better.
• Your contact information may be provided to CDC to invite you to participate in any post-therapy surveys, if conducted

WHAT ARE THE BENEFITS OF VIGIV?
We don’t know for certain if you will benefit from VIGIV. Based on what we know about VIGIV, the drug may help to treat your infection or vaccine reaction and prevent it from getting worse. The potential benefit of VIGIV is that it may help to cure or prevent illness.

WHAT ARE THE RISKS OF VIGIV?
VIGIV contains sugars (maltose) and may interfere with some glucose testing methods. If you have diabetes, this may lead to false tests results which could be life threatening. To correctly monitor your glucose levels, use test methods that are not affected by the presence of maltose. For more information, please talk to your doctor.

VIGIV may cause allergic reactions that can be mild. Sometimes they may be serious and cause life-threatening breathing and heart problems, especially in people with previous reactions to human immune globulin and people lacking immunoglobulin A (IgA), which is a specific type of antibody in the blood (also known as selective IgA deficiency). Allergic reactions that cause death are rare. We will give you medical care and drugs to help if you have a serious or life-threatening reaction. We will give VIGIV slowly so that we can watch you carefully.

Most problems are mild and do not last for very long. You may have:

• Back pain
• Joint pain
• Fever
• Flushing
• Dizziness
• Chills
• Itching
• Nausea
• Tightness of chest
• Paleness
• Headache
• Hives
• Vomiting
• Sweating
• Shortness of breath, and wheezing
• Muscle pain
• Weakness
• Abdominal cramps
• Changes in blood pressure
• Severe rashes (rare)
Some people have pain, stiffness and soreness at or near the site where the immune globulin is given. This is unpleasant but not serious. We can treat it with common pain killers such as acetaminophen (Tylenol and other brands).

The fluid we give you child with VIGIV could cause fluid in the lungs or swelling. This happens in people with heart problems. You will be closely monitored while you receive VIGIV. If problems occur, you will be treated and the VIGIV infusion may be slowed or stopped.

The following have happened rarely in people treated with products similar to VIGIV:

- Kidney problems (problems in how well your kidneys work. These lead to problems urinating, sudden weight gain or swelling, or problems breathing); or
- Formation of blood clots; or
- Hemolysis (breakage of red blood cells); or
- Transfusion-Related Acute Lung Injury (serious blood transfusion complication); or
- Aseptic meningitis (swelling of the covering of the brain. This may come on as a severe headache, neck stiffness, drowsiness, fever, eye pain with light, painful eye movements, nausea, and vomiting)

This usually only happened when large doses of the antibody product were given.

VIGIV could increase the risk of scarring of the covering of the eye, which could lead to vision loss, if you have a certain type of eye infection (keratitis). Symptoms of an eye infection may include eye redness, eye pain, difficulty opening eyelid, blurred vision, and sensitivity to light. Ask your doctor if you have an eye infection to get more information.

VIGIV is made from human blood. Products made from human blood may contain infectious agents, such as viruses that can cause disease. To avoid this:

- We check blood donors for prior contact with some viruses.
- We test the donated blood for some viruses, and
- The processing of the blood kills viruses or avoid including them.

There is still a chance that the VIGIV may give you a disease even though these things are done.

VIGIV may reduce the efficacy of certain live virus vaccines such as measles, rubella (i.e. German measles), mumps, and varicella (i.e. chickenpox). Notify your doctor, if you’re recently vaccinated with these vaccines.

**WHO SHOULD NOT GET VIGIV?**

People with a history of anaphylaxis (a life-threatening allergic reaction) after getting human immune globulin products or any ingredients in VIGIV and people with selective IgA deficiency should not be treated with VIGIV.

**ARE THERE RISKS RELATED TO PREGNANCY OR NURSING?**

VIGIV has not been studied in pregnant or nursing people or animals. We do not know if VIGIV has a bad effect on pregnancy. But poxvirus infections during pregnancy can harm the unborn baby. Drugs that contain antibodies have been widely used during pregnancy for many years without bad effects on pregnancy. You should carefully discuss the risks and benefits of VIGIV and other treatment choices with your doctor if you are pregnant.

**WHAT OTHER CHOICES DO YOU HAVE INSTEAD OF VIGIV?**

VIGIV is the first choice for treating problems from exposure to vaccinia virus (smallpox vaccine). TPOXX (tecovirimat) is FDA-approved only for treatment of smallpox in adults and children. Another drug, Vistide (cidofovir), is licensed for use in treating certain infections of the eye. Either therapy can be available to treat mpox or some problems from smallpox vaccination.
or exposure. However, these uses are investigational, and are available under separate IND programs for the treatment of both vaccinia and non-vaccinia orthopoxvirus infections.

There are two vaccines (Jynneos and ACAM2000), approved by the FDA, for prevention of smallpox and/or mpox disease. The vaccines can help protect people against smallpox, mpox or some other poxvirus infections when given before exposure to the virus. It may also help even after exposure to virus if the vaccine is given soon after exposure (within 4 days) or may lessen the symptoms of disease when given between 4-14 days after exposure. But it is not known how well the vaccine may protect after exposure and whether the way a person was exposed affects how protective the vaccine is. The vaccines will not treat or get rid of the poxvirus infection or disease, if you have them. There is no proven way to treat poxviruses, but research is ongoing. You may benefit from supportive therapy (such as IV fluids, or medicine to control fever or pain) and antibiotics for any bacterial infections you may have. There may be other medications that your doctor may consider using to treat your infection. There may also be research studies looking at other new treatments for poxviruses. You should discuss any questions you have and other choices you may have with your doctor.

**WHAT IS THE COST OF VIGIV?**

CDC is providing VIGIV for free. Other costs of the hospital and medical care will not be paid by CDC. Other costs will need to be paid by your insurer, Medicare, Medicaid, or you.

**WHAT IF YOU REFUSE VIGIV TREATMENT?**

You have the right to refuse VIGIV. Talk to the doctor if you do not want to get VIGIV. Your doctor will explain how it may affect your health and will tell you about other treatments. You also have the right to stop VIGIV at any time without penalty, especially if you have any side effects that you cannot tolerate. It will not change your regular medical care if you decide not to receive it.

**WHAT HAPPENS IF YOU ARE HARMED?**

You will get immediate medical care if you have problems when receiving VIGIV in the hospital. In the event of an injury resulting from getting VIGIV after you leave the hospital, you should seek appropriate medical care, if needed. Tell your doctor you have received VIGIV for mpox or smallpox vaccine reactions. Take precautions to prevent spread of mpox (refer to the following website for more information: Isolation and Prevention Practices for People with Mpox | Mpox | Poxvirus | CDC ). In the event of an emergency, you should go to an emergency room or call 911. CDC does not normally pay for treatment needed if a patient is harmed because of being in a program like this. Thus, you or your insurer (such as Medicare or Medicaid) will have to pay for any care that is needed. But, you are not giving up any of your rights by signing this consent form and agreeing to be treated with VIGIV in this program.

**WHAT IS THE COUNTERMEASURES INJURY COMPENSATION PROGRAM?**

The Countermeasures Injury Compensation Program (CICP) is a federal program that provides compensation to certain people as a result of serious injury or death from certain medicines or vaccines, including this medicine. You can learn more about this program by visiting www.hrsa.gov/cicp or call 1-855-266-2427.

**WHAT ABOUT PRIVACY?**

Some information from your medical records about VIGIV treatment will be collected and reported to CDC. We will keep information about you and your treatment private. However, people who work for CDC, FDA, U.S. Department of Health and Human Services, and local/state health authorities may look at your VIGIV treatment and related medical records to ensure and
monitor the proper and safe use of VIGIV. If CDC shares information about your treatment with other entities, your name or personally identifying information will not be used or listed. If we share photos, we will only use those that will not reveal your identity. This includes reports or any publications such as articles in scientific journals. But, CDC is allowed to give your name to public health authorities who, for example, need to find out how you got the infection and how to prevent other cases.

WHAT IF YOU HAVE PROBLEMS OR QUESTIONS?
If you have questions about this treatment program or feel that you have been harmed as a result of VIGIV treatment, please contact your treating physician [contact info:________________________]. If you have questions about your rights as a patient treated under this program, please call CDC’s Human Research Protection Office at 1 (800) 584-8814 and say that you are calling about CDC protocol #3744. Leave a brief message with your name and phone number. Someone will call you back as soon as possible.

WRITTEN INFORMED CONSENT FOR TREATMENT WITH VIGIV
I have read the form or it has been read to me. I have been given a chance to ask questions and may questions have been answered. I agree to get (or have my child get) VIGIV.

I also agree that any samples I/my child give can be stored for future orthopoxvirus-related testing: □ Yes   □ No

Print Patient’s Name: __________________________________________________________

Patient’s/Parent’s Signature: ________________________ Date:_______________________

Note: If patient or parent/guardian is unable to sign, a legally authorized representative may sign.
Legally Authorized Representative Signature: ______________________________________
Print Name: ____________________________ Date:______________________________

Print name of individual obtaining consent: ________________________________________

Signature of individual obtaining consent: ______________________ Date: ______________

TRANSLATOR DOCUMENTATION (if applicable)
Translator to document if patient gave informed consent through another language other than English: I have translated this form into the __________________________ language.
Print Name: ___________________________________________ Date:______________________
IF OBTAINING INFORMED CONSENT IS NOT FEASIBLE

In the event that obtaining informed consent is not feasible because the patient is unable to respond and make wishes known about VIGIV treatment and no legal guardian or next-of-kin is present the following provides for the treating physician to make a clinical determination to treat with VIGIV provided that the treating physician and an independent physician certifies to the following within 3 working days of initiating treatment with VIGIV:

1. Patient is confronted by a life-threatening situation necessitating the use of VIGIV.
2. Informed consent cannot be obtained from the patient because of an inability to communicate with, or obtain legally-effective consent from, the patient.
3. Time is not sufficient to obtain consent from the patient’s legal representative.
4. There is no available alternative method of approved or generally recognized therapy that provides an equal or greater likelihood of saving the life of the patient.

☐ Document as such in the patient’s medical record and ensure the patient or patient’s legally authorized representative is made aware that VIGIV was administered for uses for which it is not FDA-approved.

☐ Name & signature of treating physician who made the determination to administer VIGIV to patient when informed consent could not be obtained:

_________________________________  __________________________ _____________
Name                                    Signature                  Date

☐ Name & signature of second physician, who is not otherwise participating in this treatment protocol, reviewing and evaluating decision to administer VIGIV to patient:

_________________________________  __________________________ _____________
Name                                    Signature                  Date

Information in the consent form should be provided to the patient or legally authorized representative at the first available opportunity.

Notify CDC via email (regaffairs@cdc.gov) within 3 working days of VIGIV initiation when the treatment determination was made based on the above-mentioned certification by the treating physician and an independent physician.