Dear Ms. Raukete:

Please refer to your Biologics License Application (BLA) submitted May 30, 2020, received June 5, 2020, under section 351(a) of the Public Health Service Act (PHS Act) for allogeneic cultured keratinocytes and dermal fibroblasts in murine collagen-dsat.

**LICENSING**

We are issuing Department of Health and Human Services U.S. License No. 2144 to Stratatech Corporation, Madison, WI, under the provisions of section 351(a) of the PHS Act controlling the manufacture and sale of biological products. The license authorizes you to introduce or deliver for introduction into interstate commerce, those products for which your company has demonstrated compliance with establishment and product standards.

Under this license, you are authorized to manufacture the product allogeneic cultured keratinocytes and dermal fibroblasts in murine collagen-dsat, which is indicated for the treatment of adults with thermal burns containing intact dermal elements for which surgical intervention is clinically indicated (deep partial-thickness burns).

The review of this product was associated with the following National Clinical Trial (NCT) numbers: NCT 03005106, NCT 01437852, NCT 03005054, and NCT 00618839.

**MANUFACTURING LOCATIONS**

Under this license, you are approved to manufacture allogeneic cultured keratinocytes and dermal fibroblasts in murine collagen-dsat at your facility located at Madison, WI. You may label your product with the proprietary name STRATAGRAFT and market it in rectangular sheets of approximately 100 cm² (approximately 8 cm by 12.5 cm).

We did not refer your application to the Cellular, Tissue, and Gene Therapies Advisory Committee because our review of information submitted in your BLA, including the...
clinical study design and trial results, do not raise concerns or controversial issues that would have benefited from an advisory committee discussion.

**DATING PERIOD**

The dating period for allogeneic cultured keratinocytes and dermal fibroblasts in murine collagen-dsat shall be twelve months from the date of manufacture when stored between -70°C and -90°C. The date of manufacture shall be defined as the date of sealing of the formulated product into its final container for cryopreservation. The dating period for STRATAGRAFT Hold Solution supplied for the STRATAGRAFT final product shall be twelve months from the date of manufacture when stored at 2° to 8°C. The date of manufacture shall be defined as the date the Hold Solution container is filled.

**FDA LOT RELEASE**

You are not currently required to submit samples or protocols of future lots of allogeneic cultured keratinocytes and dermal fibroblasts in murine collagen-dsat to the Center for Biologics Evaluation and Research (CBER) for release by the Director, CBER, under 21 CFR 610.2(a). We will continue to monitor compliance with 21 CFR 610.1 requiring completion of tests for conformity with standards applicable to each product prior to release of each lot.

**BIOLOGICAL PRODUCT DEVIATIONS**

You must submit reports of biological product deviations under 21 CFR 600.14. You should identify and investigate all manufacturing deviations promptly, including those associated with processing, testing, packaging, labeling, storage, holding and distribution. If the deviation involves a distributed product, may affect the safety, purity, or potency of the product, and meets the other criteria in the regulation, you must submit a report on Form FDA 3486 to the Director, Office of Compliance and Biologics Quality, at the following address:

Food and Drug Administration  
Center for Biologics Evaluation and Research  
Document Control Center  
10903 New Hampshire Ave.  
WO71-G112  
Silver Spring, MD 20993-0002

**MANUFACTURING CHANGES**

You must submit information to your BLA for our review and written approval under 21 CFR 601.12 for any changes in, including but not limited to, the manufacturing, testing, packaging or labeling of allogeneic cultured keratinocytes and dermal fibroblasts in murine collagen-dsat, or in the manufacturing facilities.
LABELING

We hereby approve the draft content of labeling including Package Insert submitted under amendment 50, dated May 20, 2021; the Patient Information Sheet, submitted under amendment 52, dated May 27, 2021; and the draft carton and container labels submitted on April 30, 2021 under amendment 49, May 25, 2021 under amendment 51, and June 10, 2021 under amendment 56.

CONTENT OF LABELING

As soon as possible, but no later than 14 days from the date of this letter, please submit the final content of labeling (21 CFR 601.14) in Structured Product Labeling (SPL) format via the FDA automated drug registration and listing system, (eLIST) as described at http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm. Content of labeling must be identical to the Package Insert submitted on May 20, 2021 and Patient Information Sheet, submitted on May 27, 2021. Information on submitting SPL files using eLIST may be found in the guidance for industry SPL Standard for Content of Labeling Technical Qs and As at http://www.fda.gov/downloads/Drugs/GuidanceComplianceRegulatoryInformation/Guidances/UCM072392.pdf.

The SPL will be accessible via publicly available labeling repositories.

CARTON AND CONTAINER LABELS


All final labeling should be submitted as Product Correspondence to this BLA, STN BL 125730/0 at the time of use and include implementation information on Form FDA 356h.

ADVERTISING AND PROMOTIONAL LABELING

You may submit two draft copies of the proposed introductory advertising and promotional labeling with Form FDA 2253 to the Advertising and Promotional Labeling Branch at the following address:
You must submit copies of your final advertising and promotional labeling at the time of
initial dissemination or publication, accompanied by Form FDA 2253 (21 CFR
601.12(f)(4)).

All promotional claims must be consistent with and not contrary to approved labeling.
You should not make a comparative promotional claim or claim of superiority over other
products unless you have substantial evidence or substantial clinical experience to
support such claims (21 CFR 202.1(e)(6)).

ADVERSE EVENT REPORTING

You must submit adverse experience reports in accordance with the adverse
experience reporting requirements for licensed biological products (21 CFR 600.80) and
you must submit distribution reports as described in 21 CFR 600.81. For information on
adverse experience reporting, please refer to the guidance for industry Providing
Submissions in Electronic Format —Postmarketing Safety Reports at
https://www.fda.gov/
downloads/biologicsbloodvaccines/guidancecomplianceregulatoryinformation/guidances
/vaccines/ucm458559.pdf and FDA’s Adverse Event reporting System website at
erseDrugEffects/ucm115894.htm. For information on distribution reporting, please refer
to the guidance for industry Electronic Submission of Lot Distribution Reports at
http://www.fda.gov/BiologicsBloodVaccines/GuidanceComplianceRegulatoryInformation
/Post-MarketActivities/LotReleases/ucm061966.htm.

MATERIAL THREAT MEDICAL COUNTERMEASURE PRIORITY REVIEW
VOUCHER

We also inform you that you have been granted a material threat medical
countermeasure priority review voucher (PRV), as provided under section 565A of the
FDCA. This PRV has been assigned a tracking number, PRV BLA 125730. All
correspondences related to this voucher should refer to this tracking number.

This voucher entitles you to designate a single human drug application submitted under
section 505(b)(1) of the FDCA or a single biologic application submitted under section
351 of the Public Health Service Act as qualifying for a priority review. Such an
application would not have to meet any other requirements for a priority review. The list
below describes the sponsor responsibilities and the parameters for using and
transferring a material threat medical countermeasure PRV.
The sponsor who redeems the PRV must notify FDA of its intent to submit an application with a PRV at least 90 days before submission of the application and must include the date the sponsor intends to submit the application. This notification should be prominently marked, "Notification of Intent to Submit an Application with a Material Threat Medical Countermeasure Priority Review Voucher."

This PRV may be transferred, including by sale, by you to another sponsor of a human drug or biologic application. If the PRV is transferred, the sponsor to whom the PRV has been transferred should include a copy of this letter (which will be posted on our website as are all approval letters) and proof that the PRV was transferred. When redeeming this PRV, you should refer to this letter as an official record of the voucher.

For additional information regarding the PRV, see FDA’s draft guidance, Material Threat Medical Countermeasure Priority Review Voucher Program at https://www.fda.gov/regulatory-information/search-fda-guidance-documents/material-threat-medical-countermeasure-priority-review-vouchers-draft-guidance-industry. This guidance when finalized, will represent the current thinking of FDA on this topic.

PEDIATRIC REQUIREMENTS

Under the Pediatric Research Equity Act (PREA) (21 U.S.C. 355c), all applications for new active ingredients, new indications, new dosage forms, new dosing regimens, or new routes of administration are required to contain an assessment of the safety and effectiveness of the product for the claimed indication in pediatric patients unless this requirement is waived, deferred, or inapplicable.

Because the biological product for this indication has an orphan drug designation, you are exempt from this requirement.

POSTMARKETING REQUIREMENTS UNDER SECTION 505(o)

Section 505(o) of the Federal Food, Drug, and Cosmetic Act (FDCA) authorizes FDA to require holders of approved drug and biological product applications to conduct postmarketing studies and clinical trials for certain purposes, if FDA makes certain findings required by the statute (section 505(o)(3)(A), 21 U.S.C. 355(o)(3)(A)).

We have determined that an analysis of spontaneous postmarketing adverse events reported under section 505(k)(1) of the FDCA will not be sufficient to assess a known serious risk of patient exposure to murine (rat) virus and subsequent viral infection, in association with the use of STRATAGRAFT.

Furthermore, the pharmacovigilance system that FDA is required to maintain under section 505(k)(3) of the FDCA is not sufficient to assess this serious risk.
Therefore, based on appropriate scientific data, we have determined that you are required to conduct the following study:

1. Conduct a study to assess the risk of adventitious virus by demonstrating clearance of model viruses Parainfluenza virus type 3 (PI3), Pseudorabies virus (PRV) and Murine Minute Virus (MMV) in rat tail collagen type 1. The clearance level of >6 log 10 will be demonstrated for all viruses.

We acknowledge the timetable you submitted on June 10, 2021, which states that you will conduct this study according to the following schedule:

   Draft Protocol Submission: September 30, 2021
   Final Protocol Submission: November 30, 2021
   Study Completion Date: March 31, 2022
   Final Report Submission: April 30, 2022

Please submit the protocol(s) to your IND 10113, with a cross-reference letter to this BLA, STN BL 125730/0 explaining that this protocol(s) was submitted to the IND. Please refer to the sequential number for each study/clinical trial and the submission number as shown in this letter.

Please submit final study reports to the BLA. If the information in the final study report supports a change in the label, the final study report must be submitted as a supplement to this BLA, STN BL 125730/0. For administrative purposes, all submissions related to this postmarketing study required under section 505(o) must be submitted to this BLA and be clearly designated as:

   • Required Postmarketing Correspondence under Section 505(o)
   • Required Postmarketing Final Report under Section 505(o)
   • Supplement contains Required Postmarketing Final Report under Section 505(o)

Section 505(o)(3)(E)(ii) of the FDCA requires you to report periodically on the status of any study or clinical trial required under this section. This section also requires you to periodically report to FDA on the status of any study or clinical trial otherwise undertaken to investigate a safety issue. In addition, section 506B of the FDCA and 21 CFR 601.70 require you to report annually on the status of any postmarketing commitments or required studies or clinical trials.

You must describe the status in an annual report on postmarketing studies for this product. Label your annual report as an **Annual Status Report of Postmarketing Requirements/Commitments** and submit it to the FDA each year within 60 calendar days of the anniversary date of this letter until all Requirements and Commitments
subject to the reporting requirements of section 506B of the FDCA are fulfilled or released. The status report for each study should include:

- the sequential number for each study as shown in this letter;
- information to identify and describe the postmarketing requirement;
- the original milestone schedule for the requirement;
- the revised milestone schedule for the requirement, if appropriate;
- the current status of the requirement (i.e., pending, ongoing, delayed, terminated, or submitted); and,
- an explanation of the status for the study or clinical trial. The explanation should include how the study is progressing in reference to the original projected schedule, including, the patient accrual rate (i.e., number enrolled to date and the total planned enrollment).

As described in 21 CFR 601.70(e), we may publicly disclose information regarding these postmarketing studies on our website at http://www.fda.gov/Drugs/GuidanceComplianceRegulatoryInformation/Post-marketingPhaseIVCommitments/default.htm.

We will consider the submission of your annual report under section 506B of the FDCA and 21 CFR 601.70 to satisfy the periodic reporting requirement under section 505(o)(3)(E)(ii) provided that you include the elements listed in section 505(o) and 21 CFR 601.70. We remind you that to comply with section 505(o), your annual report must also include a report on the status of any study or clinical trial otherwise undertaken to investigate a safety issue. Failure to periodically report on the status of studies or clinical trials required under section 505(o) may be a violation of FDCA section 505(o)(3)(E)(ii) and could result in regulatory action.

POSTMARKETING COMMITMENTS NOT SUBJECT TO THE REPORTING REQUIREMENTS UNDER SECTION 506B

We acknowledge your written commitments as described in your letter of June 11, 2021 as outlined below:

2. Stratatech commits to implement a method that can confirm the identity of the NIKS and NHDF cell banks and detect the presence of . The method will be validated and the sensitivity of the assay to detect will be established as part of this validation. Submit the final study report as a Prior Approval Supplement by April 30, 2022.

   Final Report Submission: April 30, 2022

3. Stratatech commits to develop validated identity tests that will serve for monitoring stability and function of NIKS and NHDF cell banks. When established, these tests will be incorporated as part of ongoing stability studies. Submit the final study report as a Prior Approval Supplement will be submitted by April 30, 2022.
Final Report Submission: April 30, 2022

We request that you submit information concerning nonclinical and chemistry, manufacturing, and control postmarketing commitments and final reports to your BLA, STN BL 125730/0. Please refer to the sequential number for each commitment.

Please use the following designators to prominently label all submissions, including supplements, relating to these postmarketing study commitments as appropriate:

- Postmarketing Commitment – Status Update
- Postmarketing Commitment – Final Study Report
- Supplement contains Postmarketing Commitment – Final Study Report

For each postmarketing commitment not subject to the reporting requirements of 21 CFR 601.70, you may report the status to FDA as a Postmarketing Commitment – Status Update. The status report for each commitment should include:

- the sequential number for each study as shown in this letter;
- the submission number associated with this letter;
- describe what has been accomplished to fulfill the non-section 506B PMC; and,
- summarize any data collected or issues with fulfilling the non-section 506B PMC.

When you have fulfilled your commitment, submit your final report as Postmarketing Commitment – Final Study Report or Supplement contains Postmarketing Commitment – Final Study Report.

POST-APPROVAL FEEDBACK MEETING

New biological products qualify for a post-approval feedback meeting. Such meetings are used to discuss the quality of the application and to evaluate the communication process during drug development and marketing application review. The purpose is to learn from successful aspects of the review process and to identify areas that could benefit from improvement. If you would like to have such a meeting with us, please contact the Regulatory Project Manager for this application.

Sincerely,

Mary A. Malarkey  
Director  
Office of Compliance and Biologics Quality  
Center for Biologics Evaluation and Research

Wilson W. Bryan, MD  
Director  
Office of Tissues and Advanced Therapies  
Center for Biologics Evaluation and Research