Dear Ms. Callahan:

On February 4, 2020, as amended on March 15, 2023, pursuant to Section 564(b)(1)(C) of the Federal Food, Drug, and Cosmetic Act (the FD&C Act or the Act), the Secretary of the Department of Health and Human Services (HHS) determined that there is a public health emergency, or a significant potential for a public health emergency, that affects, or has a significant potential to affect national security or the health and security of United States citizens living abroad, and that involves the virus that causes Coronavirus Disease 2019 (COVID-19).1 On the basis of such determination, the Secretary of HHS on March 27, 2020, declared that circumstances exist justifying the authorization of emergency use of drugs and biological products during the COVID-19 pandemic, pursuant to Section 564 of the Act (21 U.S.C. 360bbb-3), subject to the terms of any authorization issued under that section.2

On July 13, 2022, the Food and Drug Administration (FDA or the Agency) issued an Emergency Use Authorization (EUA) for emergency use of the Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent)3 for the prevention of COVID-19 for individuals 18 years of age and older pursuant to Section 564 of the Act. FDA reissued the letter of authorization on:


2 U.S. Department of Health and Human Services, Declaration that Circumstances Exist Justifying Authorizations Pursuant to Section 564(b) of the Federal Food, Drug, and Cosmetic Act, 21 U.S.C. § 360bbb-3, 85 FR 18250 (April 1, 2020). See Amended Determination (“The declarations issued pursuant to section 564(b)(1) of the FD&C Act that circumstances exist justifying the authorization of emergency use of certain in vitro diagnostics, personal respiratory protective devices, other medical devices and drugs and biological products, as set forth in those declarations, and that are based on the February 4, 2020 determination, remain in effect until those declarations are terminated in accordance with section 564 of the FD&C Act.”).

3 For purposes of this letter, Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) refers to the vaccine that contains the spike protein of only the Original SARS-CoV-2.
August 19, 2022,4 September 12, 2022,5 October 19, 2022,6 and May 11, 2023.7

On October 3, 2023, having concluded that revising this EUA is appropriate to protect the public health or safety under section 564(g)(2) of the Act, FDA is reissuing the May 11, 2023 letter of authorization in its entirety with revisions to:

1. Authorize the following uses of Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula)8 to prevent COVID-19 in individuals 12 years of age and older:
   a. A single 0.5 mL dose at least 2 months after receipt of the last previous dose of COVID-19 vaccine9 in individuals previously vaccinated with any COVID-19 vaccine.
   b. A series of two doses (0.5 mL each) 3 weeks apart in individuals not previously vaccinated with any COVID-19 vaccine.
   c. An additional dose of Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) may be administered at least 2 months following the last dose of a COVID-19 vaccine (2023-2024 Formula)10 in individuals with certain kinds of

4 In the August 19, 2022 revision, FDA authorized the use of Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) for individuals 12 through 17 years of age.

5 In the September 12, 2022 revision, FDA revised the conditions of authorization related to Vaccine Adverse Event Reporting System (VAERS) reporting requirements for vaccination providers and Novavax, Inc. to include myocarditis and pericarditis. Because some cases of myocarditis or pericarditis following vaccine administration may not meet the definition of serious adverse events, this helps to ensure that cases are reported by Novavax, Inc. and vaccination providers.

6 In the October 19, 2022 revision, FDA authorized the use of Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) as a first booster dose (0.5 mL) to the following individuals at least at 6 months after completion of primary vaccination with an authorized or approved COVID-19 vaccine: 1) individuals 18 years of age and older for whom an FDA authorized mRNA bivalent COVID-19 booster vaccine is not accessible or clinically appropriate, and 2) individuals 18 years of age and older who elect to receive the Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) because they would otherwise not receive a booster dose of a COVID-19 vaccine. FDA also revised the Fact Sheets for Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) to reflect these changes. (For the purposes of this letter, bivalent refers to any authorized COVID-19 vaccine that encodes the spike protein of the Original SARS-CoV-2 and the Omicron BA.4/BA.5 SARS-CoV-2. FDA-authorized mRNA bivalent COVID-19 vaccines are: Pfizer-BioNTech COVID-19 Vaccine, Bivalent (Original and Omicron BA.4/BA.5) and Moderna COVID-19 Vaccine, Bivalent (Original and Omicron BA.4/BA.5.).)

7 In the May 11, 2023 revision, FDA revised Condition G to require the inclusion of distribution data for Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) in the monthly periodic safety reports. In addition, the product description set forth in the Scope of Authorization (Section II) was revised to reflect the previous authorization of multiple dose vials of the Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) that contain 5 doses of 0.5 mL each, as well as multiple dose vials of the Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) that contain 10 doses of 0.5 mL each.

8 Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) contains the spike protein of SARS-CoV-2 Omicron variant lineage XBB.1.5 (Omicron XBB.1.5).

9 COVID-19 vaccine refers to the monovalent COVID-19 vaccines (original) and the bivalent COVID-19 vaccines (Original and Omicron BA.4/BA.5).

immunocompromise. Additional doses may be administered at the discretion of the healthcare provider, taking into consideration the individual’s clinical circumstances. The timing of the additional doses may be based on the individual’s clinical circumstances.

2. Revise the conditions related to printed matter, advertising, and promotion to add additional requirements;

3. Remove the requirement that distribution of vaccines authorized under this EUA must be distributed to emergency response stakeholders as directed by the U.S. Government and make corresponding changes to the Conditions of Authorization;

4. Remove the requirement that vaccines authorized under this EUA be administered only by vaccination providers enrolled in the CDC COVID-19 Vaccination Program and make corresponding changes to the Conditions of Authorization;

5. Revise Condition G to provide flexibility to determine a different reporting interval for periodic safety reports, if appropriate;

6. No longer authorize the use of the Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) in the United States; and

7. Clarify the terms and conditions that relate to export of Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) from the United States.

In addition, FDA is authorizing Fact Sheets for Novavax COVID‑19 Vaccine, Adjuvanted (2023-20234 Formula) that reflect the relevant changes.

For the July 13, 2022 authorization of Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) for individuals 18 years of age and older, FDA reviewed safety and efficacy data from an ongoing phase 3 trial (Study 1) in which participants 18 years of age and older were randomized 2:1 to receive two doses of Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) or placebo, 3 weeks apart. This study includes pre-crossover and post-crossover periods. In the pre-crossover period, 19,735 participants received Novavax COVID‑19 Vaccine, Adjuvanted (Original monovalent) and 9,847 received saline placebo. In the post-crossover period, 6,416 participants received Novavax COVID‑19 Vaccine, Adjuvanted (Original monovalent) and 15,298 received saline placebo. Of participants who received two doses of Novavax COVID‑19 Vaccine, Adjuvanted (Original monovalent) in the pre-crossover period (n=19,111), 78% had a follow-up duration of at least 2 months (median = 2.5 months) after Dose 2. Of the participants who received two doses of Novavax COVID‑19 Vaccine, Adjuvanted (Original monovalent) in the post-crossover period (n= 6,346), 99% had a follow-up duration of at least 2 months (median = 4.4 months) after the last dose. FDA’s review considered the safety and effectiveness data as they relate to the request for emergency use authorization, and did not identify specific safety concerns that would preclude issuance of an EUA. FDA’s analysis of the efficacy data from 25,657 participants 18 years of age and older who did not have evidence of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) infection through 6 days after the second dose and who had a median follow-up of 2.5 months after Dose 2 during the pre-crossover period shows that the vaccine was 90.4% effective (95% confidence interval (CI): 83.8%, 94.3%) in preventing PCR-confirmed symptomatic mild, moderate, or severe COVID-19 occurring at least 7 days after Dose 2. Based on these data, and the review of manufacturing

11 Certain kinds of immunocompromise refers to individuals who have undergone solid organ transplantation, or who are diagnosed with conditions that are considered to have an equivalent level of immunocompromise.
information regarding product quality and consistency, FDA concluded that it is reasonable to believe that the Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) may be effective. Additionally, FDA determined it is reasonable to conclude, based on the totality of the scientific evidence available, that the known and potential benefits of the Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) outweigh its known and potential risks for the prevention of COVID-19 in individuals 18 years of age and older. Finally, on June 7, 2022, the Vaccines and Related Biological Products Advisory Committee voted in agreement with this conclusion.

For the August 19, 2022 authorization of Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) for individuals 12 years through 17 years of age, FDA reviewed safety and effectiveness data from the adolescent primary series expansion of Study 1, an ongoing phase 3 trial described above. In the primary series expansion, 2,232 individuals 12 to 17 years of age received at least one dose of the Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) (n=1,487) or saline placebo (n=745). Of participants who received two doses of the Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) in the pre-crossover period (n=1,468), 86% had a follow-up duration of at least 2 months (median = 71 days) after Dose 2. Of participants who received two doses of the Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) in the post-crossover period (n=638), 43% had a follow-up duration of at least 1 month (median = 30 days) after the last dose. FDA’s review considered the safety and effectiveness data as they relate to the request for EUA and did not identify specific safety concerns that would preclude issuance of an EUA. Effectiveness in adolescents 12 years through 17 years of age is based on a comparison of SARS-CoV-2 neutralizing antibody titers 14 days after dose 2 in a subset of individuals in that age group to SARS-CoV-2 neutralizing antibody titers 14 days after dose 2 in a subset of adults 18 years through 25 years of age from the main adult study. Noninferior immune responses in the subset of adolescents compared to the subset of adults, as assessed by geometric mean titers and seroconversion rates were demonstrated. FDA’s analysis of available descriptive efficacy data from 1,799 participants 12 years through 17 years of age without evidence of SARS-CoV-2 infection through 6 days after the second dose and who had a median follow-up of 67 days after Dose 2 during the pre-crossover period shows that the vaccine was 78.29% effective (95% confidence interval 37.55, 92.45) in preventing PCR-confirmed symptomatic mild, moderate, or severe COVID-19 occurring at least 7 days after Dose 2. In this analysis, no cases of moderate or severe COVID-19 were reported in participants who had received the Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) or placebo. Based on these data, FDA concluded that it is reasonable to believe that the Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) may be effective in individuals 12 through 17 years of age. Additionally, FDA determined it is reasonable to conclude, based on the totality of the scientific evidence available, that the known and potential benefits of the Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) outweigh its known and potential risks for the prevention of COVID-19 in individuals 12 through 17 years of age.

For the October 19, 2022 authorization of Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) as a first booster dose at least 6 months after completion of primary vaccination with an authorized or approved COVID-19 vaccine, in individuals 18 years of age and older for whom an FDA-authorized mRNA bivalent COVID-19 booster vaccine is not accessible or clinically appropriate, and individuals 18 years of age and older who elect to receive the
Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) because they would otherwise not receive a booster dose of a COVID-19 vaccine, FDA relied on 1) safety and immunogenicity data from an open-label booster vaccination portion of Study 1 (described above), and 2) safety and immunogenicity data reported from an independent Phase 2 study conducted in the United Kingdom (UK). In the open-label booster vaccination portion of Study 1, 12,738 participants 18 years of age and older received a single booster dose of Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) (0.5 mL) at least 6 months after the two-dose primary series (median of 11.0 months between completion of primary series and booster dose). Safety analyses included evaluation of solicited local and systemic adverse reactions within 7 days after a booster dose (n=238) and nonserious unsolicited adverse events within 28 days after a booster dose (n=298). Safety analysis also included evaluation of serious adverse events and adverse events of interest after a booster dose (n=12,738) with a median follow-up of 121 days post booster dose through data extraction of August 18, 2022. In the independent Phase 2 study conducted in the UK, 114 participants aged 30 years and older with no history of laboratory-confirmed SARS-CoV-2 infection received Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) administered at least 84 days (median 105 days) after completion of the Pfizer-BioNTech COVID-19 Vaccine (Original monovalent) primary series. FDA’s review of the currently available safety data did not identify specific safety concerns that would preclude issuance of an EUA. Effectiveness of a booster dose of the Novavax COVID-19 Vaccine, Adjuvanted following a Novavax COVID-19 Vaccine, Adjuvanted primary series was based on assessment of neutralizing antibody titers (MN50) against the original SARS-CoV-2 strain. Immunogenicity analyses compared the MN50 titers following the booster dose to the MN50 titers following the primary series. In the open-label booster phase of Study 1, participants 18 years of age and older received a single booster dose of the Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) at least 6 months after completion of the primary series. A subset of 243 participants were included in the per-protocol immunogenicity analysis set, and did not have serologic or virologic evidence (if available) of SARS-CoV-2 infection up to 28 days post booster dose. Prespecified immunogenicity non-inferiority analyses included an assessment of MN50 geometric mean titer (GMT) ratio and difference in seroconversion rates. Seroconversion for a participant was defined as achieving a 4-fold rise in MN50 from baseline (before the booster dose and before the first dose of the primary series). The analysis of the GMT ratio of MN50 following the booster dose compared to the primary series met the non-inferiority criteria for a booster response and point estimate. The lower limit of the two-sided 95% CI for the difference in seroconversion rates did not meet the non-inferiority criteria for a booster response. Effectiveness of a Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) booster dose in individuals who completed primary vaccination with another authorized or approved COVID-19 vaccine is inferred from immunogenicity data reported from an independent study conducted in the United Kingdom. This multicenter, randomized, controlled Phase 2 trial investigated the immunogenicity of a single booster dose of Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) in participants who had received two doses of the Pfizer-BioNTech COVID-19 Vaccine (Original monovalent) as a primary vaccination series. Participants included adults aged 30 years and older with no history of laboratory-confirmed SARS-CoV-2 infection. The Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) was administered at least 84 days after completion of a Pfizer-BioNTech COVID-19 Vaccine (Original monovalent) primary series in 114 participants. Neutralizing antibody titers measured by a microneutralization assay were assessed prior to the booster dose and 28 days post-booster
dose. A booster response to the Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) was demonstrated. Bivalent mRNA COVID-19 vaccines were authorized to improve protection conferred by COVID-19 vaccine booster doses against the currently circulating Omicron variant of SARS-CoV-2, resulting in a more favorable anticipated benefit/risk balance compared to each of the respective monovalent mRNA COVID-19 vaccines. The Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent), a vaccine based on a non-mRNA platform, could provide an alternative for a first booster dose in individuals 18 years of age and older for whom an FDA-authorized mRNA bivalent COVID-19 booster vaccine is not accessible or clinically appropriate, and individuals 18 years of age and older who elect to receive the Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) because they would otherwise not receive a booster dose of a COVID-19 vaccine. Based on the totality of scientific evidence available, FDA concluded that it is reasonable to believe that the Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) may be effective as a first booster dose in such individuals. Additionally, FDA determined it is reasonable to conclude, based on the totality of the scientific evidence available, that the known and potential benefits of the Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) outweigh its known and potential risks as a first booster dose for the prevention of COVID-19 in such individuals.

For the October 3, 2023 authorization of Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) in individuals 12 years of age and older, FDA relied on safety and effectiveness data with Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent), including data relied upon for the August 19, 2022 and October 19, 2022 authorizations, safety and immunogenicity data with Novavax’s adjuvanted monovalent COVID-19 vaccine (Omicron BA.1) [hereafter referred to as monovalent vaccine (Omicron BA.1)], safety and immunogenicity data with Novavax’s adjuvanted monovalent COVID-19 vaccine (Omicron BA.5) [hereafter referred to as monovalent vaccine (Omicron BA.5)], safety data with Novavax’s adjuvanted bivalent vaccine (Original and Omicron BA.1) [hereafter referred to as bivalent vaccine (Original and Omicron BA.1)], and safety data with Novavax’s adjuvanted bivalent vaccine (Original and Omicron BA.5) [hereafter referred to as bivalent vaccine (Original and Omicron BA.5)]. The data accrued with the Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) and with monovalent vaccine (Omicron BA.1), monovalent vaccine (Omicron BA.5), bivalent vaccine (Original and Omicron BA.1) and bivalent vaccine (Original and Omicron BA.5) are relevant to Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) because these vaccines are manufactured using a similar process. In an open label portion of Study 1, participants 12 years through 17 years of age (N=1,499) received a single booster dose of Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) at least 5 months after the two-dose primary series (median of 10 months between completion of primary series and booster dose). Safety analyses included evaluation of solicited local and systemic adverse reactions within 7 days after a booster dose, nonserious unsolicited adverse events within 28 days after a booster dose, and serious adverse events for the duration of participation, with data available through a median follow-up of 6.6 months post booster dose through data extraction of November 12, 2022 (94.0% of participants had completed 6 months of safety follow-up). The safety of Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent), the monovalent vaccine (Omicron BA.1) and the bivalent vaccine (Original and Omicron BA.1) administered as a booster dose to individuals 18 through 64 years of age, previously vaccinated with three doses of an authorized or approved mRNA COVID-19 vaccine was assessed in a randomized, observer blind study (Study 5, Part 1,
described below). The safety analysis set included 274 participants in the Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) group, 286 participants in the monovalent vaccine (Omicron BA.1) group, and 269 participants in the bivalent vaccine (Original and Omicron BA.1) group. The median time since the last COVID-19 vaccination was 180.0 days. The safety of Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent), the monovalent vaccine (Omicron BA.5), and the bivalent vaccine (Original and Omicron BA.5) administered as a booster dose to individuals 18 years of age and older previously vaccinated with three or more doses of an authorized or approved mRNA COVID-19 vaccine was assessed in a randomized, observer blind study (Study 5, Part 2 as described below). The safety analysis set included 251 participants in the Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) group, 254 participants in the monovalent vaccine (Omicron BA.5) group and 259 participants in the bivalent vaccine (Original and Omicron BA.5) group. The median time since the last COVID-19 vaccination was 352.5 days. FDA’s review of the currently available safety data did not identify specific safety concerns that would preclude issuance of an EUA. Effectiveness of a booster dose of Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) in participants 12 through 17 years of age was based on assessment of neutralizing antibody titers (MN₅₀) against the original SARS-CoV-2 strain (SARS-CoV-2 hCoV-19/Australia/VIC01/2020) in the open-label booster phase of Study 1. In this portion of the study, participants received a single booster dose of the Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) at least 5 months after completion of the primary series. A subset of 58 participants were included in the per-protocol immunogenicity (PP-IMM) analysis set, had immunogenicity blood samples collected at 14 days after the second dose of the Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) and at 28 days after the booster dose, and did not have serologic or virologic evidence of SARS-CoV-2 infection on or before the booster dose. Immunogenicity analyses compared the MN₅₀ titers following the booster dose to the MN₅₀ titers following the primary series in participants who had data at both time points. Prespecified immunogenicity non-inferiority analyses included an assessment of MN₅₀ GMT ratio and percentage difference in seroconversion rates. Seroconversion for a participant was defined as achieving a 4-fold rise in MN₅₀ from baseline (before the first dose of the primary series). The analysis of the GMT ratio of MN₅₀ following the booster dose compared to the primary series met the non-inferiority criteria for a booster response (lower limit of the 95% CI > 0.67 and point estimate > 0.83). The lower limit of the two-sided 95% CI for the difference in seroconversion rates (percentage) was -6.8%, which did meet the non-inferiority criteria for a booster response (lower limit of 95% CI for the percentage difference of ≥ -10%). In Study 5 Part 1, a subgroup of participants 18 to 64 years of age who previously received 3 doses of the Pfizer-BioNTech COVID-19 Vaccine or the Moderna COVID-19 Vaccine, received one of the following as a booster dose: Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) or monovalent vaccine (Omicron BA.1). The booster doses were administered a median of 182 and 177 days after the last vaccination, respectively. Neutralizing antibody titers for the Omicron BA.1 virus, measured by a microneutralization assay [MN₅₀], were evaluated at 14 days after vaccination. Participants included in the day 14 per protocol analysis set population (n=240) had no serologic or virologic evidence of SARS-CoV-2 infection prior to the booster dose. Prespecified immunogenicity analyses included an assessment of MN₅₀ GMT ratio and difference in seroresponse rates. Seroresponse rate was defined as the percentage of participants achieving a 4-fold rise in MN₅₀ from baseline (before the first dose of the study vaccine). The analysis of the GMT ratio following the booster dose with monovalent vaccine (Omicron BA.1) compared to the booster
dose with Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) met the superiority criterion for success (lower limit of the 95% CI > 1.0). The lower limit of the two-sided 95% CI for the difference in seroresponse rates (percentage) was 10.3%, which met the non-inferiority criterion for success (lower limit of 95% CI for the percentage difference of ≥ -5%). In sensitivity analyses using a per protocol analysis set that did not exclude participants with serologic evidence of SARS-CoV-2 infection (PP2 Analysis Subset, n= 491), neutralizing antibody responses against the Omicron BA.1 virus induced by the monovalent vaccine (Omicron BA.1) were compared with neutralizing antibody responses against the Omicron BA.1 virus induced by the Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) 14 days after study vaccination. The GMTs were 318.2 (95% CI: 269.8, 375.3) in the monovalent vaccine (Omicron BA.1) group (n= 247) and 218.1 (95% CI: 186.0, 255.7) in the Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) group (n= 244), resulting in an estimated GMT ratio of the monovalent vaccine (Omicron BA.1) versus the Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) of 1.5 (95% CI: 1.36, 1.77). The seroresponse rates (percentage) were 54.3% in the monovalent vaccine (Omicron BA.1) group and 32.0% in the Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) group, resulting in a difference in seroresponse rates (percentage) of 22.3% (95% CIs: 13.6%, 30.6%). In Study 5 Part 2, a subgroup of participants 18 years of age and older who previously received at least 3 doses of the Pfizer-BioNTech COVID-19 Vaccine or the Moderna COVID-19 Vaccine, received one of the following as a booster dose: Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) or monovalent vaccine (Omicron BA.5). The booster doses were administered a median of 389 and 328 days after the last vaccination, respectively. Neutralizing antibody titers against a pseudovirus expressing the SARS-CoV-2 Spike protein from the Omicron BA.5 virus, measured by pseudovirus neutralization assay [ID50], were evaluated at 28 days after vaccination. Participants included in the day 28 per protocol analysis set population (n=462) had no virologic evidence of SARS-CoV-2 infection at time of the booster dose. Exploratory immunogenicity analyses included an assessment of the ID50 GMT ratio and difference in seroresponse rates. Seroresponse rate was defined as the percentage of participants achieving a 4-fold rise in ID50 from baseline (before the first dose of the study vaccine). The GMT ratio following the booster dose with monovalent vaccine (Omicron BA.5) compared with the booster dose with Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) was 2.5 (two-sided 95% confidence interval: 2.10, 2.94). The difference in seroresponse rates (percentage) between the booster dose with monovalent vaccine (Omicron BA.5) and the booster dose with Novavax Vaccine, Adjuvanted (Original monovalent) was 33.2% (two-sided 95% confidence interval: 25.4%, 40.7%). Based on the totality of scientific evidence available, FDA concluded that it is reasonable to believe that the Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) may be effective in individuals 12 years and older for the prevention of COVID-19 when administered in accordance with the dosing regimen and schedule as outlined in Section II. Additionally, FDA determined it is reasonable to conclude, based on the totality of the scientific evidence available, that the known and potential benefits of the Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) outweigh its known and potential risks for the prevention of COVID-19 in individuals 12 years and older when administered in accordance with the authorized dosing regimen and schedule.

Having concluded that the criteria for issuance of this authorization under Section 564(c) of the Act are met, I am authorizing the emergency use of the Novavax COVID-19 Vaccine,
Adjuvanted (2023-2024 Formula) and the Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) for the prevention of COVID-19 as described in the Scope of Authorization section of this letter (Section II) and subject to the terms of this authorization.

I. Criteria for Issuance of Authorization

I have concluded that the emergency use of the Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula)\(^\text{12}\), for the prevention of COVID-19 when administered as described in the Scope of Authorization (Section II) meets the criteria for issuance of an authorization under Section 564(c) of the Act, because:

A. SARS-CoV-2 can cause a serious or life-threatening disease or condition, including severe respiratory illness, to humans infected by this virus;

B. Based on the totality of scientific evidence available to FDA, it is reasonable to believe that the Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) may be effective in preventing COVID-19, and that, when used under the conditions described in this authorization, the known and potential benefits of the Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) when used to prevent COVID-19 outweigh its known and potential risks; and

C. There is no adequate, approved, and available alternative\(^\text{13}\) to the emergency use of the Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) to prevent COVID-19.\(^\text{14}\)

II. Scope of Authorization

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

- Novavax, Inc. will supply the Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) and Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) either directly or through authorized distributor(s)\(^\text{15}\) for use consistent with the terms and conditions of this EUA;

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\(^{12}\) In this section (Section I), references to Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) also apply to Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent).

\(^{13}\) Although SPIKEVAX (COVID-19 Vaccine, mRNA) and Comirnaty (COVID-19 Vaccine, mRNA) are approved to prevent COVID-19 in certain individuals, available information indicates that availability of alternative COVID-19 vaccines is needed for individuals who might not receive the approved vaccines. In addition, Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) may be an alternative for individuals for whom the approved mRNA COVID-19 vaccines are contraindicated, and there are no COVID-19 vaccines that are approved to provide additional doses to certain immunocompromised populations as described in this EUA.

\(^{14}\) No other criteria of issuance have been prescribed by regulation under Section 564(c)(4) of the Act.

\(^{15}\) “Authorized Distributor(s)” are identified by Novavax, Inc, as an entity or entities allowed to distribute authorized Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) or Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula).
- Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) and Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) covered by this authorization may be administered by vaccination providers\(^{16}\) without an individual prescription for each vaccine recipient; and
- The presentations of the Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) and Novavax COVID-19 Vaccine, Adjuvanted, as described under Product Description, will be administered by vaccination providers in accordance with the uses described in this Scope of Authorization (Section II).

Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula)

Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) is authorized for active immunization to prevent COVID-19 as 1) a single 0.5 mL dose in individuals ages 12 years of age and older who have been previously vaccinated with any COVID-19 vaccine at least 2 months after receipt of the last previous dose of COVID-19 vaccine,\(^{17}\) and 2) a series of two doses (0.5 mL each) 3 weeks apart in individuals ages 12 years and older who were not previously vaccinated with any COVID-19 vaccine.

Individuals 12 Years and Older with Certain Kinds of Immunocompromise

For individuals with certain kinds of immunocompromise, an additional dose of Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) may be administered at least 2 months following the last dose of a COVID-19 vaccine (2023-2024 Formula).\(^{18}\) Additional doses of Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) may be administered at the discretion of the healthcare provider, taking into consideration the individual’s clinical circumstances. The timing of the additional doses may be based on the individual’s clinical circumstances.

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\(^{16}\) For purposes of this letter, “vaccination provider” refers to the facility, organization, or healthcare provider (e.g., non-physician healthcare professionals, such as nurses, pharmacists) licensed or otherwise authorized to administer or provide vaccination services pursuant to State law. If the vaccine is exported from the United States, a “vaccination provider” is a provider that is authorized to administer this vaccine in accordance with the laws of the country in which it is administered. For purposes of this letter, “vaccination provider” also includes a person authorized by the U.S. Department of Health and Human Services (e.g., under the PREP Act Declaration for Medical Countermeasures against COVID-19) to administer FDA-authorized COVID-19 vaccine (e.g., qualified pharmacy technicians and State-authorized pharmacy interns acting under the supervision of a qualified pharmacist). See, e.g., HHS, Eleventh Amendment to the Declaration Under the Public Readiness and Emergency Preparedness Act for Medical Countermeasures Against COVID-19 and Republication of the Declaration. (88 FR 30769, May 12, 2023). In addition, for purposes of this letter, the term “State” includes any State or Territory of the United States, the District of Columbia, and the Commonwealth of Puerto Rico. See Section 201(a)(1) of the Act.

\(^{17}\) COVID-19 vaccine refers to the monovalent COVID-19 vaccines (original) and the bivalent COVID-19 vaccines (Original and Omicron BA.4/BA.5).

Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent)

Novavax-19 Vaccine, Adjuvanted (Original monovalent) is no longer authorized for use in the United States. However, the authorized presentations of the Novavax COVID-19 Vaccine (Original monovalent) described in Section II of the May 11, 2023 reissuance of this Letter remain authorized when exported from the United States in accordance with Section III.W. Under Section III.W, the Fact Sheets for Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) that were authorized as of October 19, 2022 (Fact Sheet for Recipients and Caregivers) and March 28, 2023 (Fact Sheet for Healthcare Providers Administering Vaccine) and that describe the scope of FDA’s authorization must, upon request, be made available to the regulatory authorities of the country in which the vaccine will be used.

Product Description

The Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) is supplied as a suspension in multi-dose vials containing 5 doses of 0.5 mL each.

Each 0.5 mL dose of the Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) is formulated to contain 5 mcg of recombinant spike (rS) protein from the SARS-CoV-2 Omicron variant lineage of XBB.1.5 and 50 mcg Matrix-M adjuvant. The Matrix M adjuvant is composed of Fraction-A (42.5 mcg) and Fraction-C (7.5 mcg) of saponin extracts from the soapbark tree, *Quillaja saponaria* Molina. Each dose of the Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) also includes the following ingredients: cholesterol, phosphatidylcholine, potassium dihydrogen phosphate (3.85 mcg), potassium chloride (2.25 mcg), disodium hydrogen phosphate dihydrate (14.7 mcg), disodium hydrogen phosphate heptahydrate (2.465 mg), sodium dihydrogen phosphate monohydrate (0.445 mg), sodium chloride (8.766 mg), and polysorbate 80 (0.05 mg). The pH is adjusted with sodium hydroxide or hydrochloric acid. The Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) does not contain a preservative.

The manufacture of the authorized Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) is limited to those facilities identified and agreed upon in Novavax Inc.’s request for authorization.

For Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent), Section III.W refers to the Fact Sheets for the Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) that were authorized on October 19, 2022 (Fact Sheet for Recipients and Caregivers) and March 28, 2023 (Fact Sheet for Healthcare Providers Administering Vaccine). Those Fact Sheets describe different presentations of the vaccine that were authorized for use in the United States as of March 28, 2023 and that remain authorized for export in accordance with Section III.W.

The Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) and Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) vial label and carton labels are clearly marked for “Emergency Use Authorization.” The Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) and Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) are authorized to be distributed, stored, further redistributed, and administered when packaged in the authorized
manufacturer packaging (i.e., vials and cartons), despite the fact that the vial and carton labels may not contain information that otherwise would be required under the FD&C Act.

The Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) is authorized for emergency use with the following product-specific information required to be made available to vaccination providers and recipients, respectively (referred to as “authorized labeling”):

- Fact Sheet for Healthcare Providers Administering Vaccine: Emergency Use Authorization of Novavax COVID‑19 Vaccine, Adjuvanted (2023-2024 Formula), For Individuals 12 Years of Age and Older
- Fact Sheet for Recipients and Caregivers: Emergency Use Authorization (EUA) of the Novavax COVID‑19 Vaccine, Adjuvanted (2023-2024 Formula) to Prevent Coronavirus Disease 2019 (COVID-19) in Individuals 12 Years of Age and Older

I have concluded, pursuant to Section 564(d)(2) of the Act, that it is reasonable to believe that the known and potential benefits of the Novavax COVID‑19 Vaccine, Adjuvanted (2023-2024 Formula) and Novavax COVID‑19 Vaccine, Adjuvanted (Original monovalent), when used to prevent COVID‑19 and used in accordance with this Scope of Authorization (Section II), outweigh their known and potential risks.

I have concluded, pursuant to Section 564(d)(3) of the Act, based on the totality of scientific evidence available to FDA, that it is reasonable to believe that the Novavax COVID‑19 Vaccine, Adjuvanted (2023-2024 Formula) and Novavax COVID‑19 Vaccine, Adjuvanted (Original monovalent), may be effective in preventing COVID‑19 when used in accordance with this Scope of Authorization (Section II), pursuant to Section 564(c)(2)(A) of the Act.

Having reviewed the scientific information available to FDA, including the information supporting the conclusions described in Section I above, I have concluded that the Novavax COVID‑19 Vaccine, Adjuvanted (2023-2024 Formula), and Novavax COVID‑19 Vaccine, Adjuvanted (Original monovalent), (as described in this Scope of Authorization (Section II)) meet the criteria set forth in Section 564(c) of the Act concerning safety and potential effectiveness.

The emergency use of the Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) and Novavax COVID‑19 Vaccine, Adjuvanted (Original monovalent) under this EUA must be consistent with, and may not exceed, the terms of the Authorization, including the Scope of Authorization (Section II) and the Conditions of Authorization (Section III). Subject to the terms of this EUA and under the circumstances set forth in the Secretary of HHS’s determination under Section 564(b)(1)(C) described above and the Secretary of HHS’s corresponding declaration under Section 564(b)(1), the Novavax COVID‑19 Vaccine, Adjuvanted (2023-2024 Formula) and Novavax COVID‑19 Vaccine, Adjuvanted (Original monovalent) are authorized to prevent COVID‑19 as described in the Scope of Authorization (Section II) under this EUA, despite the fact that they do not meet certain requirements otherwise required by applicable federal law.
III. Conditions of Authorization

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

Novavax, Inc. and Authorized Distributor(s)

A. Novavax, Inc. and authorized distributor(s) will ensure that for Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula), the authorized labeling (i.e., Fact Sheets) will be made available to vaccination providers, recipients, and caregivers, consistent with the terms of this letter.

B. Novavax, Inc. and authorized distributor(s) will ensure that appropriate storage and cold chain is maintained until delivered to healthcare facilities or other vaccine receipt sites.

C. Novavax, Inc. will ensure that the terms of this EUA are made available to all relevant stakeholders (e.g., authorized distributors and vaccination providers) involved in distributing or receiving the authorized Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula). Novavax, Inc. will provide to all relevant stakeholders a copy of this letter of authorization and communicate any subsequent amendments that might be made to this letter of authorization and its authorized labeling.

D. Novavax, Inc. may develop and disseminate instructional and educational materials (e.g., video regarding vaccine handling, storage/cold-chain management, preparation, disposal) that are consistent with the authorized emergency use of the Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) as described in the letter of authorization and authorized labeling, without FDA’s review and concurrence, when necessary to meet public health needs during an emergency. Any instructional and educational materials that are inconsistent with the authorized labeling are prohibited.

E. Novavax, Inc. may request changes to this authorization, including to the authorized Fact Sheets. Any request for changes to this EUA must be submitted to the Office of Vaccines Research and Review (OVRR)/Center for Biologics Evaluation and Research (CBER). Such changes require appropriate authorization prior to implementation.19

F. Novavax, Inc. will report to VAERS:
   - Serious adverse events (irrespective of attribution to vaccination);

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19 The following types of revisions may be authorized without reissuing this letter: (1) changes to the authorized labeling; (2) non-substantive editorial corrections to this letter; (3) new types of authorized labeling, including new fact sheets; (4) new carton/container labels; (5) expiration dating extensions; (6) changes to manufacturing processes, including tests or other authorized components of manufacturing; (7) new conditions of authorization to require data collection or study. All changes to the authorization require review and concurrence from OVRR. For changes to the authorization, including the authorized labeling, of the type listed in (3), (6), or (7), review and concurrence is also required from the Preparedness and Response Team (PREP)/Office of the Center Director (OD)/CBER and the Office of Counterterrorism and Emerging Threats (OCET)/Office of the Chief Scientist (OCS).
• Cases of myocarditis;
• Cases of pericarditis;
• Cases of Multisystem Inflammatory Syndrome; and
• Cases of COVID-19 that result in hospitalization or death, that are reported to Novavax, Inc.

These reports should be submitted to VAERS as soon as possible but no later than 15 calendar days from initial receipt of the information by Novavax, Inc.

G. Novavax, Inc. must submit to Investigational New Drug application (IND) number 22430 periodic safety reports monthly, or at another appropriate interval determined by Office of Biostatistics and Pharmacovigilance (OBPV)/CBER, in accordance with a due date agreed upon with OBPV/CBER, beginning after the first full calendar month after authorization. Each periodic safety report is required to contain descriptive information which includes:

• A narrative summary and analysis of adverse events submitted during the reporting interval, including interval and cumulative counts by age groups, special populations (e.g., pregnant women), and adverse events of special interest;
• A narrative summary and analysis of vaccine administration errors, whether or not associated with an adverse event, that were identified since the last reporting interval;
• Newly identified safety concerns in the interval;
• Actions taken since the last report because of adverse experiences (for example, changes made to Healthcare Providers Administering Vaccine (Vaccination Providers) Fact Sheet, changes made to studies or studies initiated); and
• Cumulative doses distributed, and doses distributed during the reporting interval, for Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula).

H. No changes will be implemented to the description of the product, manufacturing process, facilities, or equipment without notification to and concurrence by the Agency.

I. All manufacturing facilities will comply with Current Good Manufacturing Practice requirements.

J. Novavax, Inc. will submit to the EUA file Certificates of Analysis (CoA) for each drug product lot at least 48 hours prior to vaccine distribution. The CoA will include the established specifications and specific results for each quality control test performed on the final drug product lot.

K. Novavax, Inc. will submit to the EUA file quarterly manufacturing reports that include a listing of all drug substance and drug product lots produced after issuance of this authorization. This report must include lot number, manufacturing site, date of manufacture, and lot disposition, including those lots that were quarantined for investigation or those lots that were rejected. Information on the reasons for lot
quarantine or rejection must be included in the report. The first report is due October 13, 2022.

L. Novavax, Inc. and authorized distributor(s) will maintain records regarding release of Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) and Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) for distribution (i.e., lot numbers, quantity, release date).

M. Novavax, Inc. and authorized distributor(s) will make available to FDA upon request any records maintained in connection with this EUA.

N. Novavax, Inc. will conduct post-authorization observational studies to evaluate the association between Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula), and Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) and a pre-specified list of adverse events of special interest, including myocarditis and pericarditis, along with deaths and hospitalizations, and severe COVID-19. The study population should include individuals administered the Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) (previously, but no longer authorized for use in the U.S.) as a primary series (12 years of age and older), or a booster dose (18 years of age and older), and Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) (12 years of age and older) under this EUA in the general US population and populations of interest such as healthcare workers, pregnant women, immunocompromised individuals, subpopulations with specific comorbidities. The studies should be conducted in large scale databases with an active comparator. Novavax, Inc. will provide protocols and status update reports to the IND 22430 with agreed-upon study designs and milestone dates.

Vaccination Providers

O. Vaccination providers will administer the vaccines in accordance with this authorization.

P. Vaccination providers will provide the Fact Sheet for Recipients and Caregivers to each individual receiving vaccination and provide the necessary information for receiving their dose(s).

Q. Vaccination providers administering the vaccines must report the following information associated with the administration of the vaccines of which they become aware to VAERS in accordance with the Fact Sheet for Healthcare Providers Administering Vaccine (Vaccination Providers):
- Vaccine administration errors whether or not associated with an adverse event
- Serious adverse events (irrespective of attribution to vaccination)
- Cases of myocarditis
- Cases of pericarditis
- Cases of Multisystem Inflammatory Syndrome
• Cases of COVID-19 that result in hospitalization or death
Complete and submit reports to VAERS online at https://vaers.hhs.gov/reportevent.html. The VAERS reports should include the words “Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) EUA”, or “Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) EUA”, as appropriate, in the description section of the report. More information is available at vaers.hhs.gov or by calling 1-800-822-7967. To the extent feasible, report to Novavax, Inc. by contacting 1-844-668-2829 or by providing a copy of the VAERS form to Novavax, Inc.; Fax: 1-888-988-8809.

R. Vaccination providers will conduct any follow-up requested by the U.S. government, including CDC, FDA, or other designee, regarding adverse events to the extent feasible given the emergency circumstances.

S. Vaccination providers will ensure that any records associated with this EUA are maintained until notified by FDA. Such records will be made available to CDC, and FDA for inspection upon request.

T. Vaccination providers receiving authorized Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) will ensure that appropriate storage and cold chain is maintained.

Conditions Related to Printed Matter, Advertising, and Promotion

U. All descriptive printed matter, advertising, and promotional material, relating to the use of the Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) shall be consistent with the authorized labeling, as well as the terms set forth in this EUA, and meet the requirements set forth in section 502(a) and (n), as applicable, of the FD&C Act and FDA implementing regulations. In addition, such materials shall:
• Be tailored to the intended audience.
• Present the same risk information relating to the major side effects and contraindications concurrently in the audio and visual parts of the presentation for advertising and promotional materials in audio-visual format.
• Be accompanied by the authorized labeling, if the promotional materials are not subject to Section 502(n) of the Act.

Novavax, Inc. must submit such material to FDA accompanied by Form FDA-2253 by the time of initial dissemination or first use.

V. All descriptive printed matter, advertising, and promotional material relating to the use of the Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) clearly and conspicuously shall state that:
Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) has not been approved or licensed by FDA, but has been authorized for emergency use by FDA, under an EUA to prevent Coronavirus Disease 2019 (COVID-19) for use in individuals 12 years of age and older; and

The emergency use of this product is only authorized for the duration of the declaration that circumstances exist justifying the authorization of emergency use of the medical product under Section 564(b)(1) of the FD&C Act unless the declaration is terminated or authorization revoked sooner.

If the Agency notifies Novavax Inc. that any descriptive printed matter, advertising, or promotional materials do not meet the terms set forth in Conditions U and V of this EUA, Novavax Inc. must cease distribution of such descriptive printed matter, advertising, or promotional materials in accordance with the Agency’s notification. Furthermore, as part of its notification, the Agency may also require Novavax, Inc. to issue corrective communication(s).

Condition Related to Export

W. If the Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) is exported from the United States, conditions C, D, and O through V do not apply, but export is permitted only if 1) the regulatory authorities of the country in which the vaccine will be used are fully informed that this vaccine is subject to an EUA and is not approved or licensed by FDA, 2) the intended use of the vaccine will comply in all respects with the laws of the country in which the product will be used; 3) the Fact Sheets that were authorized as of October 19, 2022 (Fact Sheet for Recipients and Caregivers) and March 28, 2023 (Fact Sheet for Healthcare Providers Administering Vaccine) for the vial presentation being exported are made available, upon request, to the regulatory authorities of the countries in which the vaccine will be used, and 5) the regulatory authorities are informed that the Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent) and associated Fact Sheets are no longer authorized for use in the United States and that FDA is not currently revising the Fact Sheets with updated information.

If the Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula) is exported from the United States, conditions C, D, and O through V do not apply, but export is permitted only if 1) the regulatory authorities of the country in which the vaccine will be used are fully informed that this vaccine is subject to an EUA and is not approved or licensed by FDA and 2) the intended use of the vaccine will comply in all respects with the laws of the country in which the product will be used. The requirement in this letter that the authorized labeling (i.e., Fact Sheets) be made available to vaccination providers, recipients, and caregivers in condition A will not apply if the authorized labeling (i.e., Fact Sheets) are made available to the regulatory authorities of the country in which the vaccine will be used.
IV. Duration of Authorization

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

Sincerely,

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Peter Marks, M.D., Ph.D.
Director
Center for Biologics Evaluation and Research

Enclosures