Dear Dr. Nguyen:

Please refer to your supplemental biologics license application (sBLA), received March 11, 2020, and your amendments, submitted under section 351(a) of the Public Health Service Act for Tecentriq (atezolizumab) injection.

This Prior Approval supplemental biologics application provides for a new indication for Tecentriq, in combination with Cotellic and Zelboraf for the treatment of patients with unresectable or metastatic BRAF V600 mutation positive melanoma.

APPROVAL & LABELING

We have completed our review of this application, as amended. It is approved, effective on the date of this letter, for use as recommended in the enclosed agreed-upon labeling.

WAIVER OF HIGHLIGHTS ½ PAGE LENGTH REQUIREMENT FOR HIGHLIGHTS

Please note that we have previously granted a waiver of the requirements of 21 CFR 201.57(d)(8) regarding the length of Highlights of Prescribing Information.

CONTENT OF LABELING

As soon as possible, but no later than 14 days from the date of this letter, submit, via the FDA automated drug registration and listing system (eLIST), the content of labeling [21 CFR 601.14(b)] in structured product labeling (SPL) format, as described at FDA.gov,¹ that is identical to the enclosed labeling (text for the Prescribing Information, and Medication Guide) and include the labeling changes proposed in any pending “Changes Being Effected” (CBE) supplements.

¹ http://www.fda.gov/ForIndustry/DataStandards/StructuredProductLabeling/default.htm
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*.²

The SPL will be accessible via publicly available labeling repositories.

Also within 14 days, amend all pending supplemental applications that include labeling changes for this BLA, including pending "Changes Being Effected" (CBE) supplements, for which FDA has not yet issued an action letter, with the content of labeling [21 CFR 601.12(f)] in Microsoft Word format that includes the changes approved in this supplemental application, as well as annual reportable changes. To facilitate review of your submission(s), provide a highlighted or marked-up copy that shows all changes, as well as a clean Microsoft Word version. The marked-up copy should provide appropriate annotations, including supplement number(s) and annual report date(s).

**REQUIRED PEDIATRIC ASSESSMENTS**

Under the Pediatric Research Equity Act (PREA) (21 U.S.C. 355c), all applications for new active ingredients (which includes new salts and new fixed combinations), 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(s) in pediatric patients unless this requirement is waived, deferred, or inapplicable.

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

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² We update guidances periodically. For the most recent version of a guidance, check the FDA Guidance Documents Database [https://www.fda.gov/RegulatoryInformation/Guidances/default.htm](https://www.fda.gov/RegulatoryInformation/Guidances/default.htm).
POSTMARKETING COMMITMENTS SUBJECT TO REPORTING REQUIREMENTS UNDER SECTION 506B

We remind you of your postmarketing commitments:

3908-1 Submit the final overall survival analysis and datasets with the final report from Trial CO39262 (IMspire150): “A phase III, double-blinded, randomized, placebo-controlled study of atezolizumab plus cobimetinib and vemurafenib versus placebo plus cobimetinib and vemurafenib in previously untreated BRAF V600 mutation-positive patients with unresectable locally advanced or metastatic melanoma” to further characterize the clinical benefit of atezolizumab in combination with cobimetinib and vemurafenib. The results from this report may inform product labeling.

The timetable you submitted on July 28, 2020, states that you will conduct this study according to the following schedule:

- **Trial Completion:** 07/2026
- **Final Report Submission:** 07/2027

3908-2 In consultation with CDRH, commit to providing evidence of the accuracy of detection of the non-V600E/K variants (i.e., D, R, etc.) in the clinical trial, supplemented with additional representation of the accurate detection of these alleles when compared to a validated comparator method, if necessary, to identify unresectable or metastatic melanoma patients who may benefit from the use of atezolizumab administered with cobimetinib and vemurafenib.

The timetable you submitted on July 29, 2020, states that you will conduct this study according to the following schedule:

- **Final Report Submission:** 07/2021

Submit clinical protocols to your IND 111271 for this product. Submit nonclinical and chemistry, manufacturing, and controls protocols and all postmarketing final reports to this BLA. In addition, under 21 CFR 601.70 you should include a status summary of each commitment in your annual progress report of postmarketing studies to this BLA. The status summary should include expected summary completion and final report submission dates, any changes in plans since the last annual report, and, for clinical studies/trials, number of patients entered into each study/trial. All submissions, including supplements, relating to these postmarketing commitments should be prominently labeled “Postmarketing Commitment Protocol,” “Postmarketing Commitment Final Report,” or “Postmarketing Commitment Correspondence.”

U.S. Food and Drug Administration
Silver Spring, MD 20993
www.fda.gov

Reference ID: 4649463
PROMOTIONAL MATERIALS

You may request advisory comments on proposed introductory advertising and promotional labeling. For information about submitting promotional materials, see the final guidance for industry Providing Regulatory Submissions in Electronic and Non-Electronic Format—Promotional Labeling and Advertising Materials for Human Prescription Drugs.3

As required under 21 CFR 601.12(f)(4), you must submit final promotional materials, and the Prescribing Information, at the time of initial dissemination or publication, accompanied by a Form FDA 2253. Form FDA 2253 is available at FDA.gov.4 Information and Instructions for completing the form can be found at FDA.gov.5

All promotional materials for your drug product that include representations about your drug product must be promptly revised to make it consistent with the labeling changes approved in this supplement, including any new safety information [21 CFR 601.12(a)(4)]. The revisions to your promotional materials should include prominent disclosure of the important new safety information that appears in the revised labeling. Within 7 days of receipt of this letter, submit your statement of intent to comply with 21 CFR 601.12(a)(4).

REPORTING REQUIREMENTS

We remind you that you must comply with reporting requirements for an approved BLA (in 21 CFR 600.80 and in 21 CFR 600.81).

If you have any questions, call Autumn Zack-Taylor, M.S., Regulatory Health Project Manager, at (240) 402-5913.

Sincerely,

{See appended electronic signature page}

Lola Fashoyin-Aje, M.D., M.P.H.
Deputy Director (Acting)
Division of Oncology 3
Office of Oncologic Diseases
Center for Drug Evaluation and Research

3 For the most recent version of a guidance, check the FDA guidance web page athttps://www.fda.gov/media/128163/download.
4 http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM083570.pdf
5 http://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM375154.pdf

U.S. Food and Drug Administration
Silver Spring, MD 20993
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ENCLOSURE(S):
- Content of Labeling
  - Prescribing Information
  - Medication Guide
This is a representation of an electronic record that was signed electronically. Following this are manifestations of any and all electronic signatures for this electronic record.

/s/

IBILOLA A FASHOYIN-AJE
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