INFORMED CONSENT DOCUMENT
AGREEMENT TO BE IN A RESEARCH STUDY

Sponsor / Study Title:	**Pfizer Inc / "A PHASE 1, RANDOMIZED, OPEN-LABEL, SINGLE DOSE STUDY IN HEALTHY PARTICIPANTS TO INVESTIGATE THE RELATIVE BIOAVAILABILITY OF MULTIPLE TABLET FORMULATIONS OF PF-07220060, AND TO INVESTIGATE THE EFFECT OF FOOD AND A PROTON PUMP INHIBITOR ON THE RELATIVE BIOAVAILABILITY OF PF-07220060"**
Protocol Number:	**C4391007**
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INTRODUCTION

You are here today as a possible participant in a drug research study sponsored by Pfizer Inc. Taking part in this study is voluntary (your choice). The study staff will be available to answer questions before, during, and after the study.

The sponsoring company (the company paying for this study), Pfizer Inc, employs the study investigator conducting this study.

If you are not completely honest about your health history, you may be harmed by being in this study.

PURPOSE OF THE STUDY

PF-07220060 will be referred to as the "study drug" in the rest of this consent document.

The purposes of this study are:

- To see how a new drug under study is tolerated, if there are significant side effects, and how people feel after taking it under fasted (without food) and fed (with food) conditions
- To measure the amount of study drug in your blood after a single 100 mg dose of 1 of 2 different tablet formulations under fasted conditions
    - Water-dispersible granule (WG) tablet
    - Material Sparing Tablet (MST)
- To measure the amount of study drug in your blood after a single 300 mg dose of either the WG or the MST tablet formulation under fasted conditions
- To measure the amount of study drug in your blood after a single 300 mg dose of the MST tablet formulation, given as either three 100 mg tablets or two 150 mg tablets, under fasted conditions

- To see if a high-fat, high-calorie meal has an effect on the amount of study drug in the blood after a single 300 mg dose of the MST tablet formulation compared to dosing under fasted conditions, if done
- To see if rabeprazole (a medication used to reduce stomach acid) has an effect on the amount of study drug in your blood after a single 300 mg dose of the MST tablet formulation under fasted conditions, if done
- To see if rabeprazole has an effect on the amount of study drug in your blood after a single 300 mg dose of the MST tablet formulation under fed conditions, if done
- To compare the amount of study drug in the blood after dosing with the WG or MST tablet formulation under fasted conditions across dose levels
- To determine the renal clearance (how quickly the study drug is removed by the kidneys) of the study drug after a single 100 mg and 300 mg dose under fasted conditions

The study drug is an investigational drug being studied to treat people with metastatic (late stage cancer that has spread to other organ[s]) or advanced solid tumors. "Investigational" means that the drug has not been approved by the United States (US) Food and Drug Administration (FDA). Study Drug will be given orally (by mouth) as tablet(s) which you will swallow.

Rabeprazole will also be given in this study. It is an approved marketed drug used to treat certain stomach and esophagus problems such as ulcers and acid reflux. However, the use of rabeprazole in this study is investigational. It will be given as tablets which you will swallow.

ABOUT THE STUDY

Number of Study Participants

There will be up to about 112 people taking part in this study if all dosing groups are done.

Length of Study for Participants

You will be in this study for up to about 30 days (Groups 1 – 5), 39 days (Groups 6 and 7), or 35 days (Group 8). This does not include the time between screening and dosing, which can be up to 28 days.

This study involves:
Groups 1-5

- 1 dosing period with a single admission. The admission has 4 overnight stays at the Clinical research Unit (CRU). You will not be able to leave the CRU during that time

Groups 6 and 7

- 2 dosing periods during 1 continuous admission
- 13 overnight stays at the CRU. You will not be able to leave the CRU during that time.

Group 8

- 2 dosing periods during one continuous admission
- 11 overnight stays at the CRU. You will be unable to leave the CRU during that time.

All Groups

- 1 follow-up visit about 4 weeks after the last dose of study drug for female participants able to have children

- 1 follow-up phone call about 4 weeks after the last dose of study drug for male participants and female participants unable to have children

Eligibility to Participate in Another Drug Study

Your eligibility to take part in another study depends on information from previous studies. You may be eligible to receive a different study drug in another study as early as 30 days after your last dose of study drug in this study. This is true for most drugs. Some drugs may stay in your body longer which means that you may have to wait longer before joining another study. These results are usually known after your last blood sample is tested. We will tell you this as soon as possible. We will also tell you if there is a longer than usual period of time that you should not be in another drug study after this one. Our goal is to keep you from doing anything that might potentially harm you.

Dosing Plan

The dose of the study drug that will be used to treat people is not yet known

Up to 7 groups of participants are planned.

Dosing is planned as follows:

DOSING GROUP	NUMBER OF PARTICIPANTS	STUDY DAY 1
		STUDY TREATMENT
1	14	A
2	14	B
3	14	C
4	14	D
5	14	E

Study Treatment A: Single 100 mg dose (one 100 mg tablet) of immediate release (IR – study drug released quickly in the body) MST formulation under fasting conditions
Study Treatment B: Single 100 mg dose (one 100 mg tablet) of the WG formulation under fasting conditions
Study Treatment C: Single 300 mg dose (three 100 mg tablets) of the IR MST formulation under fasting conditions
Study Treatment D: Single 300 mg dose (three 100 mg tablets) of the WG formulation under fasting conditions
Study Treatment E: Single 300 mg dose (three 100 mg tablets) of the IR MST formulation under fed conditions (high-fat, high-calorie meal)

DOSING GROUP	NUMBER OF PARTICIPANTS	STUDY PERIOD		
		1	2	
		STUDY DAY		
		1	-6 to -1	1
		STUDY TREATMENT		
6	7 to 14	C	Rabeprazole, 40 mg daily	F
7	7 to 14	I	Rabeprazole, 40 mg daily	G

Study Treatment C: Single 300 mg (three 100 mg tablets) of the IR MST tablet formulation under fasting conditions
Study Treatment F: Single 300 mg (three 100 mg tablets) of the IR MST tablet formulation under fasting conditions. Rabeprazole (two 20 mg tablets) will be given about 4 hours before study drug
Study Treatment I: Single 300 mg (three 100 mg tablets) of the IR MST tablet formulation under fed conditions (moderate-fat, standard calorie meal)
Study Treatment G: Single 300 mg (three 100 mg tablets) of the IR MST tablet formulation under fed conditions (moderate-fat, standard-calorie meal). Rabeprazole (two 20 mg tablets) will be given about 4 hours before study drug

			STUDY PERIOD	
			1	2
			STUDY DAY 1	
DOSING GROUP	**DOSING SEQUENCE**	**NUMBER OF PARTICIPANTS**	**STUDY TREATMENT**	
8	1	7	C	H
	2	7	H	C

Study Treatment C: Single 300 mg (three 100 mg tablets) of the IR MST tablet formulation under fasting conditions
Study Treatment H: Single 300 mg (two 150 mg tablets) of the IR MST tablet formulation (alternative strength) under fasting conditions

There will be at least 6 days between doses for dosing Group 8.

All dosing groups will receive a single dose of study drug on Day 1 of every period, under fasting or fed conditions.

Dosing Groups 1 through 4, 6 (Period 1 only) and 8 will receive study drug after an overnight fast of at least 10 hours.

Dosing Groups 5 and 7 (Period 1 only) will receive breakfast after an overnight fast of at least 10 hours. Dosing Group 5 will receive a high-fat, high-calorie breakfast and Group 7 a moderate-fat, standard-calorie breakfast. Breakfast will be given about 30 minutes before dosing and should be completely eaten within 20 minutes. Study drug will be given within 10 minutes after completion of breakfast.

An example of a standard high-fat, high-calorie breakfast: 2 eggs fried in butter, 2 strips of pork bacon, 2 slices of toast with butter, 4 oz. of hash brown potatoes, and 8 oz of whole milk.

Dosing Groups 6 and 7 will receive a single dose of 40 mg of rabeprazole in the evening of Day -6, and in the morning of Days -5 to -1. Rabeprazole will be given about 30 minutes before a meal on days -5 to -1. On Day 1, rabeprazole will be given about 4 hours before study drug dosing, after an overnight fast of at least 10 hours. Dosing Group 7 will receive a moderate-fat, standard-calorie breakfast about 30 minutes before study drug dosing. The meal should be completely eaten within 20 minutes. Dosing with the study drug will be within 10 minutes after completion of the meal.

All doses will be taken with about 8 oz of water. Tablet(s) must be swallowed whole. We will check your mouth to make sure the study drug and rabeprazole (if given) have been swallowed.

Your dosing group and dosing sequence (Group 8 only) will be randomly assigned, like pulling a number out of a hat.

Both you and the study staff will know which study treatment you are receiving.

This is a research study. The study drug and rabeprazole will be given to you only during this study and not after the study is over.

Study Process

Before any study procedures begin, you will be asked to read, sign, and date this consent document.

Screening

After you sign and date the consent document, you will begin screening. The purpose of the screening is to find out if you meet all of the requirements to take part in the study. Procedures that will be completed during the study (including screening) are described below. If you do not meet the requirements, you will not be able to take part in the study. The study investigator or study staff will explain why.

As part of screening, you must complete all of the items listed below:

- Give your race, age, gender, and ethnicity
- Give your medical history
    - You must review and confirm the information in your medical history questionnaire
- Give your drug, alcohol, and tobacco use history
- Give your past and current medication and treatment history. This includes any over-the-counter or prescription drugs, such as vitamins, dietary supplements, or herbal supplements, taken in the past 28 days
- Height and weight will be measured
- Physical exam will be done
    - This may be done at screening or when you check-in for the study
- Vital signs (blood pressure and heart rate) will be measured
- Electrocardiogram (ECG) will be collected. An ECG measures the electrical activity of the heart
- Safety lab tests will be done from blood and urine samples. This includes:
    - Blood tests for human immunodeficiency virus (HIV), hepatitis B, and hepatitis C
    - Urine to test for drugs of abuse (illegal and prescription)
    - Females able to have children will have a blood pregnancy test
    - Females who have not had a period for at least 12 months in a row will have a blood hormone test to confirm they cannot have children
- The study investigator may decide to do an alcohol breath test
- The use of proper birth control will be reviewed
- You will be asked “How do you feel?”

HIV and Hepatitis Testing

HIV, hepatitis B, and hepatitis C will be tested at screening. If anyone is exposed to your blood during the study, you will have these tests done again. If you have a positive test, you cannot be in or remain in the study.

HIV is the virus that causes acquired immunodeficiency syndrome (AIDS). If your HIV test is positive, you will be told about the results.

It may take weeks or months after being infected with HIV for the test to be positive. The HIV test is not always right.

Having certain infections or positive test results may have to be reported to the State Department of Health. This includes results for HIV, hepatitis, and other infections. If you have any questions about what information is required to be reported, please ask the study investigator or study staff.

Although this testing is meant to be private, complete privacy cannot be guaranteed. For example, it is possible for a court of law to get health or study records without your permission.

During the Study

The events below will take place throughout the study. If you would like to know when exactly these will take place, please ask the study staff.

- You will be asked about any updates to your medical history. This includes medication, drug, alcohol, and tobacco use
- Physical exam(s), will be done
- The use of proper birth control will be confirmed/reviewed
- Vital signs will be measured. Your oral temperature may also be measured
- You will be asked: "How do you feel?" each day
- An intravenous (IV) catheter may be placed in a vein in one of your arms for blood collection
- The study investigator may decide to do an alcohol breath test at any time
- Blood and urine samples will be collected at various times throughout the study
    - Safety Labs: The blood and urine samples will be used for safety labs including:
        - Blood samples for pregnancy testing (females able to have children). Pregnancy tests may be done at the discretion of the study investigator in all females
    - Any leftover serum or plasma (components of blood) from the safety lab samples may be stored and used to assess exploratory biomarkers or unexpected safety findings
        - Biomarkers are natural substances in your body that can show how the body works
        - Samples to be used for this purpose will be kept for up to 1 year following completion of the study
    - Study Drug Levels: Blood and urine samples (Dosing Groups 1 – 4 and Period 1 of Group 6 only) will also be used to measure the levels of study drug
        - As part of understanding how your body absorbs, distributes, and gets rid of the study drug, the blood samples may also be used for the following:
            - Metabolite identification (by-products or end products of a drug produced as the body processes a drug)
            - Endogenous (within the body) biomarkers
            - Evaluate safety or efficacy (ability to produce a desired effect) aspects related to any concerns during or after the study
            - Check the laboratory test which measures the study drug
            - Other internal exploratory purposes
        - All of your urine will be collected for 72 hours after study drug dosing (Dosing Groups 1 – 4 and Period 1 of Group 6 only)
            - As part of understanding how your body gets rids of the study drug in the urine, samples may also be used to check the laboratory test which measures the study drug as well as other exploratory purposes

- Pharmacogenomics: A blood sample will be taken to determine how your genes affect your response to the study drug. This sample will be used to examine specific genes, including, but not limited to CYP3A and UGT2B7, and potentially other genes, that are responsible for breaking down the study drug in your body
  - This sample may also be used to go back and test other genetic differences associated with the levels of the study drug in the blood, biomarker response, or to explore side effects
  - This sample will be kept by Pfizer for up to 3 years after the Clinical Study Report (CSR) has been finalized
  - A replacement blood sample may be requested if there are problems with this testing
- Retained Research Sample: A sample of your blood will be collected, stored, and used to learn more about the study drug
  - Biological substances in your sample, including your genes, may be studied
  - This sample may be kept by Pfizer for as long as the sample is useful for scientific research. This may be for many years (no time limit)

- You will return to the CRU for a follow-up visit about 4 weeks after study drug dosing (female participants able to have children only)
- You will receive a follow-up phone call about 4 weeks after study drug dosing (male participants and female participants unable to have children)
- For safety reasons, we may add procedures at any time during the study to check on your health status

Blood Draws

Blood samples will be taken by individual needlesticks, or by a catheter. Catheters are used when ordered by the study investigator or when required by the study plan. They are not used at the request of the participant.

There will be up to about 17 blood draws (needle stick or catheter) for Groups 1 – 5, 33 for Groups 6 and 7, and 34 for Group 8. The total amount of blood drawn during this study will be up to about 100 mL for Groups 1 – 5, 200 mL for Groups 6 and 7, and 210 for Group 8. This is equal to about a little more than 3 oz. or about a little less than ½ cup, a little more than 6 ½ oz. or a little more than ¾ of a cup, about 7 oz or a little less than 1 cup, respectively. For comparison, the standard blood donation is about 16 oz. (2 cups), once in any 56-day period.

As with all studies with blood draws, rest, and good eating habits are recommended.

Possible Risks and Discomforts

Taking part in this study has some risks. The study drug or procedure(s) may make you feel unwell or uncomfortable or could harm you. If you do not understand what any of the side effects described below mean, please let us know. The study investigator or study staff will explain them to you.

It is important that you report all side effects that you have as soon as they occur. This is regardless of whether or not you believe they are caused by the study drug or your participation in this study.

If you are not honest about any side effects that you have during the study, you may be harmed by staying in the study.

Study Drug Risks

Like all drugs, the study drug can cause side effects, although not everybody may experience them. The percentages listed below do not predict what could happen during this study. Please be aware that the side effects mentioned below could occur more or less often than indicated, and side effects not listed could occur.

As of August 4, 2023, there are data available for 205 study participants with advanced cancer, who have been treated with daily doses of study drug in the C4391001 study, the first-in-human study.

The following adverse events (side effects) were seen in C4391001 study participants who received study drug as a single agent or in combination with endocrine therapy:

Very Common (more than or equal to 10%)

- Neutropenia (low neutrophil counts, which may lead to infection)
- Nausea
- Anemia (low red blood cells that carry oxygen in the blood)
- Thrombocytopenia (low platelet counts, which may lead to bleeding)
- Increase in liver enzymes (abnormal liver function tests)
- Leukopenia (low white blood cell counts)
- Diarrhea (loose stools)
- Fatigue (tiredness)
- Hyperglycemia (high blood sugar)
- Arthralgia (joint pain)

Common (between 5-10%)

- Vomiting
- Lymphopenia (low white blood cells called lymphocytes)
- Hyperuricemia (high levels of uric acid in your blood)
- Gastroesophageal reflux disease (backflow of acid from the stomach)
- Hyponatremia (low sodium level)
- Constipation
- Peripheral edema (legs, feet, ankles or arms swelling)
- Cough
- Blood lactate dehydrogenase (LDH) increased (high LDH level)
- COVID-19
- Hypokalemia (low potassium level)
- Pruritis (itching skin)
- Dizziness

Some adverse events were serious. Those events were uncommon (less than 3%) and some were related to study drug:

- Nausea
- Acute kidney injury (sudden reduction in kidney function)
- Diarrhea (loose stool)
- Hypotension (low blood pressure)
- Anemia (low red blood cells that carry oxygen in the blood)

Other adverse events were serious but not related to study drug. Those events were also uncommon (less than 3%):

- COVID-19
- Back pain
- Biliary track infection (infection in the bile duct)
- Chest pain
- Arthralgia (joint stiffness)
- Biliary track disorder (diseases affecting the bile ducts or gall bladder)
- Cerebrovascular accident (stroke)
- Nephrolithiasis (kidney stone)
- Pulmonary embolism (blood clot in your lung)
- Pneumonia (lung infection)
- Respiratory failure (lung stops working)
- Syncope (fainting)
- Urinary tract infection
- Respiratory distress (breathing difficulties)
- Death due to disease progression
- Pleural effusion (fluid in the space surrounding the lung)
- Pneumonitis (lung inflammation)
- Sepsis (serious infection)
- Small intestinal obstruction (blockage in small intestine)
- Transient ischemic attack (temporary reduction of blood flow to the brain)
- Peripheral neuropathy (pins and needles on the hands and feet)

There was no death that was thought to be related to the study drug.

Studies to determine the effect of the study drug on fertility and unborn children have not yet occurred, but toxicity to reproductive organs was observed in animal studies conducted with the study drug in rats and dogs. Therefore, you should speak to your study investigator regarding egg donation if you are a woman and can get pregnant or sperm donation if you are a man.

All drugs have a potential risk of an allergic reaction, which if not treated promptly, could become life threatening. You should get medical help and contact the study doctor right away if you think you have any of the following symptoms of a serious allergic reaction: trouble breathing, or swelling of the face, mouth, lips, gums, tongue, or neck. Other allergic reactions may include rash, hives, or blisters.

Rabeprazole Risks (to be given in Dosing Group 6 and 7)

The most common side effects (greater than or equal to 2% of clinical trial participants) include:

- Pain
- Sore throat
- Gas
- Infection
- Constipation

Less common side effects (less than 2% of clinical trial participants) include:

- Headache
- Abdominal pain
- Diarrhea
- Dry mouth
- Dizziness
- Peripheral edema (swelling of the lower limbs caused by fluid buildup)
- Increase in liver enzymes (indicates how the liver is working)
- Hepatitis
- Hepatic encephalopathy (liver dysfunction that causes neuropsychiatric changes [mental or emotional disturbances])
- Myalgia (muscle pain)
- Arthralgia (joint pain)

The following side effects have been identified after rabeprazole was approved for use. Because these events were reported voluntarily from a population of an uncertain size, it is not always possible to estimate their frequency or if they were caused by rabeprazole:

- Sudden death
- Coma
- Hyperammonemia (excess of ammonia in the blood)
- Jaundice
- Rhabdomyolysis (release of proteins and electrolytes into the blood from damaged muscles)
- Disorientation
- Delirium (confusion, anxiety, incoherent speech, hallucinations)
- Anaphylaxis (life-threatening allergic reaction)
- Angioedema (swelling under the surface of the skin due to an allergic reaction)
- Drug eruptions of the skin
- Severe skin reactions, including toxic epidermal necrolysis (rare, life-threatening skin reaction usually caused by an allergic reaction to a medication)
- Stevens-Johnson syndrome (a rare, serious, and life-threatening disorder that affects the skin, mucous membranes, genitals, and eyes that causes flu like symptoms along with a painful rash that spreads and blisters)
- Erythema multiforme (skin reaction that can be triggered by an infection or medication)
- Interstitial pneumonia (progressive scarring of the lungs)
- Interstitial nephritis (inflammation of the kidney[s])
- Thyroid stimulating hormone (TSH) elevations
- Bone fracture
- Hypomagnesemia (low blood magnesium)
- Clostridium difficile (C-diff, a bacterial infection)-associated diarrhea
- Agranulocytosis (decrease in a certain type of white blood cells)
- Hemolytic anemia (decrease in red blood cells due to early destruction of the cells)
- Leukopenia (decrease in a certain type of white blood cells)
- Pancytopenia (low levels of all types of white blood cells)
- Thrombocytopenia (decrease in the number of platelets [cells that help the blood to clot])

When you take more than one study drug at a time, the side effects can be worse or different than if you take either study drug by itself.

Until you know how the study drugs will affect you, you should use caution by:

- Avoiding stairs
- Not driving a car
- Not swimming or bathing in a tub
- Not working with machinery or at heights

Other Risks

There may be rare and unknown side effects. These include reactions that may be life-threatening.

All drugs have a potential risk of an allergic reaction. If an allergic reaction is not treated quickly, it could become life-threatening. You should get medical help right away (by calling 911 or immediately going to an emergency room) if you think you have any of the following symptoms:

- Trouble breathing
- Wheezing
- Difficulty swallowing
- Swelling of the face, mouth, lips, gums, tongue, or neck

Other allergic reactions may include:

- Itchiness
- Rash
- Hives
- Blisters
- Palpitations (racing heart)
- Chest discomfort/tightness
- Muscle pains/stiffness

At times, the following may also be symptoms of an allergic reaction:

- Diarrhea
- Nausea
- Vomiting
- Abdominal pain

If a significant side effect occurs, the following may be done:

- Tests or treatment may be given as needed for your safety
- Depending on how severe your symptoms are, you may be seen by outside medical providers or a hospital. This would be for further evaluation and/or treatment
- The study investigator may notify your emergency contact as appropriate in the event of an emergency while you are taking part in the study

Additional Risks or Discomforts

Blood Samples and IV Catheters (if used)

Possible side effects of having your blood drawn or an IV catheter inserted include:

- Bleeding at the site of the needle puncture
- Bruising
- Feeling faint
- Rarely, infection or blood clot
- Redness of the vein
- Inflammation of the vein
- Swelling
- Pain
- Nerve damage
- Vein irritation from the fluid or medication being given
- Local swelling due to IV fluid accidentally entering the tissue rather than the vein
- Scarring

If you feel faint, tell one of the study staff immediately.

ECG

Possible side effects from having an ECG:

- Irritation or rash from the adhesive on the patches

A rash may result in a long-lasting discoloration of your skin. If it is necessary to shave the area where the patches need to be, irritation from shaving may occur.

Use of Birth Control

Female Participants

You must not be pregnant or breastfeeding. You must agree not to donate eggs for the purpose of reproduction for at least 34 days after the dose of study drug.

Female Participants unable to have children

You may participate in this study provided that you meet one of the following:

- Have had your uterus removed (documented)
- Have had both fallopian tubes removed (documented)
- Have had both ovaries removed (documented)
- Have not had a period for at least 12 months in a row with no other medical cause. You must have a blood hormone level confirming that you cannot get pregnant

Females permanently unable to have children due to a medical cause not listed above may be allowed to participate in the study at the discretion of the study investigator.

Female Participants able to have children

If you are sexually active, you must use a highly effective method of birth control that is an acceptable method listed below. The birth control must be used consistently and correctly from the start of dosing, during the study, and for at least 34 days after dosing. The use of hormonal birth control is not allowed in this study for female participants able to have children.

Acceptable methods of birth control include:

- Intrauterine device (IUD)
- Bilateral tubal occlusion (both tubes blocked) which includes bilateral tubal ligation (both tubes tied)
- Partner has a vasectomy (absence of sperm confirmed)
- Sexual abstinence – defined as refraining from heterosexual intercourse and is the preferred and usual lifestyle of the participant

Male Participants

You must agree to the following during the study and for at least 94 days after the dose of study drug:

- Refrain from donating sperm

PLUS either

- Be abstinent from heterosexual or homosexual intercourse as your preferred and usual lifestyle (abstinent on a long-term and persistent basis) and agree to remain abstinent

OR

- Must agree to use a male condom when engaging in any activity that allows for passage of ejaculate to another person

- Male participants should be advised of the benefit for a female partner able to have children to use a highly effective method of birth control (**see below**) as a condom may break or leak when having sexual intercourse

Highly effective methods of birth control include:

- Implantable progestogen-only hormone birth control
- Intrauterine device (IUD)
- Intrauterine hormone-releasing system
- Bilateral tubal occlusion (both tubes blocked) which includes tubal ligation (both tubes tied)
- Partner has a vasectomy (absence of sperm confirmed)
- Hormonal birth control ***(See Note below)**
- Sexual abstinence – defined as refraining from heterosexual intercourse during the entire study period through 94 days after dosing and is the preferred and usual lifestyle of the participant

***Note:** One of the following barrier methods must be used in addition to the **hormonal birth control methods** detailed above:

- Male or female condom with or without spermicide
- Cervical cap, diaphragm, or sponge with spermicide
- A combination of male condom with either cervical cap, diaphragm, or sponge with spermicide (double-barrier methods)

In addition to male condom use, female partners able to have children may consider a highly effective method of birth control such as the methods detailed above.

Pregnancy-Related Risks

The effects of the study drug on the following are not known and may involve unforeseeable risks:

- Sperm
- Pregnancy
- Unborn child
- Breastfeeding child

In animal studies (rat and dog), toxicity (harmful effects) to reproductive organs was observed.

Even if you use birth control during the study, there is a chance that you or your partner could become pregnant. If you or your partner is pregnant or becomes pregnant during the study, the study drug or procedures may involve unforeseeable risks to the unborn child. A pregnancy test is not always right, especially in the early stages of pregnancy.

You cannot participate in this study if:

- You are currently pregnant, planning to become pregnant, or are breastfeeding a child
- You are a man whose female partner is currently pregnant or planning to become pregnant

If you want to stop your required birth control during the study, you should tell the study investigator **immediately**. You will be taken out of the study if you stop using birth control.

Pregnancy Follow-Up

If you or your partner becomes pregnant during the study or within 34 days or 94 days, respectively, after your last dose of study drug, please:

- Tell the study investigator **right away**
- Tell the health care provider(s) taking care of you or your partner during the pregnancy that you took part in this study

The study investigator will ask if you or your partner or your/her health care provider(s) are willing to provide updates on the progress of the pregnancy and its outcome. This information will be collected for safety monitoring follow-up.

PARTICIPANT RESPONSIBILITIES AND RIGHTS

Participant Responsibilities

- You must tell the study investigator if you previously took part in this study, have been in any other study in the past year, or are currently involved in any other study. This includes being in the follow-up visit period of another study
- You must agree to the scheduled visits, the study plan, lab tests, study procedures, and diet and activity restrictions (details listed later in this document)
- You must not have any significant medical or psychiatric condition, as determined by the study investigator, that may put your safety at risk or could have an effect on the study results
- You may be asked to provide documentation of your childbearing status
- You must not take any prescription or nonprescription medications (including over-the-counter medications such as medications for colds or allergies, antacids, dietary and herbal supplements within 7 days or 5 half-lives (drug dependent), whichever is longer, before dosing
    - You must not take any medications or substances that are strong inducers or inhibitors of CYP3A4 or UGT2B7 within 5 half-lives plus 14 days (up to 28 days) before dosing
    - A member of the study staff will review a list of these types of medications and substances with you
- You must not take hormone replacement therapy (HRT) or hormonal methods of birth control within at least 28 days before dosing and at any time during the study. Depo-Provera® must be discontinued at least 6 months before dosing
- Before taking any drugs other than the study drug, you must call the CRU for approval. It must first be approved by the study investigator
    - You must tell the study staff about any drugs taken during the study
- You must not have taken any investigational product (drug or vaccine) within 30 days or 5 half-lives before dosing
- You must not have been in a previous study with this study drug
- You must not have a history of excessive alcohol use or binge drinking and/or other illicit drug use within 6 months before screening
    - Binge drinking is defined as a pattern of 5 (male) or 4 (female) or more alcoholic drinks in about 2 hours
    - You should not drink more than 14 alcoholic drinks a week
    - A drink is defined as 8 oz. of beer, 3 oz. of wine, or 1 oz. of hard liquor
- You must not be using/taking any drugs of abuse (such as marijuana, cocaine, opioids, etc.). Urine tests will be done to check for such drugs and cotinine (a byproduct of nicotine)
    - If a test is positive, you will not be allowed in the study
    - Urine collection may be monitored by a study staff member of the same sex
    - You have the right to refuse to be monitored, but may be disqualified from the study
    - While in this study, please do not eat anything that contains poppy seeds. They may cause a positive drug test
- You must not use tobacco- or nicotine-containing products within 3 months of screening. You cannot use these products, including vaping, while in the CRU
- You must not have donated blood for at least 60 days before dosing. Plasma (a component of blood) donation may be allowed
- Please let us know if you or a relative are a staff member of Pfizer. If so, you may not take part in this study if you or your relative are supervised by the study investigator or are directly involved with the study

Activity Restrictions

- You will need to stay in the CRU for 5 days (Groups 1 – 5) or 13 days (Groups 6 and 7) or 11 days (Group 8) starting with check-in
    - You may need to stay in the CRU longer if you experience a longer study drug effect. This is for safety reasons
    - The study investigator or study staff will decide when it is safe for you to leave the CRU
- You must not do any strenuous exercise for at least 48 hours before each blood draw for safety labs. Examples of this include heavy lifting, weight training, or aerobics
    - Walking at a normal pace is allowed
- You cannot lie down for 4 hours after study drug dosing unless needed for any study procedures
- You may be asked to wear a device (similar to a wristwatch) that can be used to alert study staff in case of an emergency

Diet Restrictions

- You must not eat or drink anything (except water) for at least 4 hours before each safety lab test
- You must not eat or drink anything (except water) for at least 10 hours before the collection of the pre-dose blood sample for study drug on Day 1 and for at least 4 hours after study drug dosing except for the fed treatments (Groups 5 and 7 before both doses)
    - Except for 1 hour before and 1 hour after study drug dosing, you may drink water freely
    - There will be no water restrictions for fed dosing (Groups 5 and 7) or for rabeprazole dosing
- When dosing under fed conditions (Groups 5 and 7), you will receive a high-fat, high calorie (Group 5) or medium-fat, standard-calorie (Group 7) breakfast after an overnight fast of at least 10 hours
    - Breakfast should be completely within about 20 minutes. Study drug will be given about 10 minutes after completion of breakfast
- Rabeprazole (Groups 6 and 7) will be given about 30 minutes before a meal except for Day 1
    - Rabeprazole will be given after an overnight fast of at least 10 hours on Day 1
    - Study drug will be given about 4 hours after rabeprazole dosing
        - Group 7 will receive a medium-fat, standard-calorie breakfast about 30 minutes before study drug dosing. Breakfast should be completely eaten within 20 minutes. Study drug will be given about 10 minutes after completion of breakfast
- Lunch will be provided about 4 hours after study drug dosing
- Dinner will be provided about 9 to 10 hours after study drug dosing
- An evening snack may be allowed
- Meals (breakfast, lunch, dinner, and evening snack) will be provided at appropriate times on all other study days
- You must not drink red wine for 7 days before the first dose. Red wine is not allowed through the collection of the last blood sample for study drug
- You must not eat or drink anything with alcohol for 24 hours (or as stated above for red wine) before check-in. Alcohol is not allowed through the collection of the last blood sample for study drug
    - Study staff may check your breath for alcohol. If alcohol is found, you will not be allowed in the study
- You must not eat or drink anything with caffeine for 24 hours before dosing. Caffeine is not allowed through the collection of the last blood sample for study drug
    - Caffeine can be found in different foods and drinks. Some examples include chocolate, coffee, tea, cola, Dr. Pepper®, and Mountain Dew®

- You must not eat or drink anything that has grapefruit or grapefruit-related citrus fruits for 7 days before dosing. These are not allowed through collection of the last blood sample for study drug
    - Examples of citrus fruits that are not allowed are Seville oranges and pomelos
    - Fruit juices and smoothies may also contain grapefruit or these citrus fruits

Possible Benefits of the Study

This study is for research purposes only. There is no direct benefit to you from taking part. However, information learned from this study may benefit other people in the future.

Alternatives to Participating in this Study

This study is for research purposes only. Your alternative is to not take part in the study.

Confidentiality

This section describes how we will collect, use, and share your personal information.

What personal information may we collect about you during this study?

The study staff will collect information about you. This information may include:

- **Information that directly identifies you** such as your name, address, telephone number, date of birth, and Social Security Number
- **Personal information** such as your medical history, data from this study (including study results from tests and procedures), demographics (for example, age and gender) and other sensitive information that is needed for this study such as race, ethnicity, sexuality, substance use disorders, mental health disorders, diagnoses and treatment, and HIV status
- **Data from testing and analysis of biological samples** (such as blood or urine). This may also include genetic information
- **Data captured from electronic devices** if you complete the consent process using the eConsent tablet. This information may include:
    - The length of time it takes you to complete the consent process
    - The number of times you scroll between pages or click hyperlinked items
    - Your electronic signature

Who will use my personal information, how will they use it, and where will it be stored?

Any personal information collected during this study will be stored by the study staff at the CRU. The study staff must keep your personal information confidential. While every effort will be made to protect the confidentiality of your information, absolute confidentiality cannot be guaranteed.

Your personal information will be accessed by:

- The study investigator and other study staff members
- Pfizer and its representatives (including its affiliated companies)
- People or organizations providing services for, or collaborating with, Pfizer
- Government or regulatory authorities (including the U.S. FDA and authorities in other countries)
- Advarra Institutional Review Board (IRB), the IRB that reviewed this study and any other committees responsible for overseeing the research

The individuals and groups listed above will use your personal information to conduct this study, and to comply with legal or regulatory requirements, including to:

- Determine if you are eligible for this study
- Provide you with reimbursement, as allowed by the study, for your time, effort, and certain expenses related to your participation
- Verify that the study is conducted correctly and that study data are accurate
- Answer questions from IRB(s) or government or regulatory agencies
- Assess your use of electronic devices in the study, for example, to determine how long it takes you to complete any eConsent module used for the study and your comprehension of the eConsent process
- Contact you during and after the study (if necessary)
- Follow-up on your health status, including using publicly available sources (for example, public databases or the internet) should the study staff be unable to contact you using information held on file
- Protect your vital interests such as providing information to an emergency department of a hospital if you are being treated
- Answer your data protection requests (if any)

If you provide someone else's personal information, you should make them aware that you have provided the information to us. Examples of this information include:

- Emergency contact information
- Details of family medical history

We will only use such information in keeping with this informed consent and applicable law.

Text Messages

If you agree, the study staff, or a company working on behalf of Pfizer, may send text messages using an automated system to remind you of:

- Upcoming study appointments
- Other study-related information
    - Standard text messaging rates apply to all text messages. Message rates differ from carrier to carrier. Please contact your wireless phone provider to ask about the details of your plan
    - The contact information you have provided will be used for the sole purpose of communicating with you about the study
    - The text messages received through this program may appear on your mobile phone screen as soon as they are received. This may happen even when the phone is locked. These messages could be seen and read by others who are near your phone when the message is received
    - To discontinue receiving text messages, please contact the Pfizer New Haven CRU at 800-254-6398

You will be asked to make your choice at the end of this document.

What happens to my personal information that is sent outside the CRU?

Before the study staff transfers your personal information outside the CRU, the study staff will:

- Replace your name with a unique code

- Remove information that directly identifies you

This is called "**Coded Information**". The link between the code and your personal information will be kept confidential by the study staff.

Your Coded Information will be used by the following:

- Pfizer and its representatives (including its affiliated companies)
- People and/or organizations providing services to or collaborating with Pfizer
- Any organization that obtains all or part of Pfizer's business or the rights to the product under study
- Other researchers
- Advarra IRB
- Government or regulatory authorities

The above parties may use your coded information for the following purposes:

- **Conducting the study**, including:
    - Examining your response to the study drug
    - Understanding the study and the study results and learning more about metastatic cancer or advanced solid tumor
    - Assessing the safety of the study drug
- **Complying with legal and regulatory duties** such as:
    - Ensuring the study is conducted according to good clinical practice
    - Making required disclosures to IRB(s), or government or regulatory authorities
    - Seeking approval from government or regulatory authorities to market the study drug
        - It is possible that these government or regulatory authorities may disclose your Coded Information to other researchers for the conduct of future scientific research
    - Sharing study data with other researchers not affiliated with the study staff or Pfizer. This includes through publication on the internet or other ways. However, information that could directly identify you will not be made available to other researchers
- **Publishing summaries of the study results:**
    - In medical journals
    - On the internet
    - At educational meetings of other researchers

  You will not be directly identified in any publication or report of the study. But some journal representatives may need access to your Coded Information to verify the study results and ensure the research meets the journal's quality standards. Also, journals may require that genetic and other information from the study that does not directly identify you be made available to other researchers for further research projects.
- **Improving the quality, design, and safety** of this study and other research studies

How are my biological samples handled?

If biological samples are taken during the study, those samples will be handled in the same way as your Coded Information. All samples will be treated as required by law.

Can my coded information and biological samples be used for other research?

Yes, your coded Information and biological samples may be used to support and advance other scientific research projects, including improving the quality, design, and safety of other research studies, research supporting public health aims, and developing medicines, vaccines, diagnostic products, and tools.

At this time, we do not know the specific details of these other research projects: however your coded Information and biological samples could be used in combination with data from other sources not related to you or this study. Reasonable safeguards will be used to protect your Coded Information and biological samples used in any future research and may include:

- Limiting access to individuals bound by duties of confidentiality
- Taking steps to minimize the risk that you could be re-identified
- Obtaining approval of ethical review boards.

Furthermore, if your Coded Information and biological samples have identifiers removed such that they can no longer readily be identified with you, they may be used for future research purposes.

Study-Related Injuries

You will receive a card with information about this study. This information includes:

- The name or number of the study
- The CRU 24-hour phone number

You should keep this card with you in case you have a medical emergency. You can give this card to any healthcare provider if they need more information about the research study to provide the best treatment for you.

If you experience a research injury, the CRU will arrange for medical treatment at no cost to you. Pfizer will cover the costs of this treatment. A research injury is any physical injury or illness caused by being in this study. There are no plans to offer you payment for such things as:

- Lost wages
- Expenses other than medical care
- Pain and suffering

To help avoid injury, it is very important to follow all study directions. You can get more information about medical treatment for research injuries from the study investigator or study staff.

You must call the study investigator immediately if you experience a research injury. The number is listed on the first page of this consent document. A 24-hour answering service is available.

If you are treated for a research injury that is paid for by Pfizer, Pfizer or its representative will collect your:

- Medicare Health Insurance Claim Number or,
- Social Security Number

This is to determine your Medicare status. If you are a Medicare beneficiary, Pfizer will report the payment and information about the study you are in to the Centers for Medicare & Medicaid Services (CMS). This is in keeping with CMS reporting requirements. Pfizer will not use this information for any other purpose.

Legal Rights

You will not lose any of your legal rights by signing and dating this consent document.

Whom To Contact About This Study

During the study, if you experience any medical problems, suffer a research-related injury, or have questions, concerns, or complaints about the study such as:

- Whom to contact in the case of a research-related injury;
- Payment or compensation for being in the study, if any;
- Your responsibilities as a research participant;
- Eligibility to participate in the study;
- The study investigator's or study site's decision to withdraw you from participation;
- Results of tests and/or procedure;

Please contact the study investigator at the telephone number listed on the first page of this consent document.

If you seek emergency care, or hospitalization is required, alert the treating physician that you are participating in this research study.
An institutional review board (IRB) is an independent committee established to help protect the rights of research participants. If you have any questions about your rights as a research participant, contact:

- By mail:
  Study Subject Adviser
  Advarra IRB
  6100 Merriweather Dr., Suite 600
  Columbia, MD 21044
- or call **toll free**: 877-992-4724
- or by **email**: adviser@advarra.com

Please reference the following number when contacting the Study Subject Adviser: Pro00072083.

Link to Additional Information

A description of this clinical trial will be available on http://www.ClinicalTrials.gov. This Web site will not include information that can identify you. At most, the Web site will include a summary of the results. You can search this Web site at any time.

Payment for Taking Part in the Study

The amount of payment is based on a number of things including the length of the study.

You may be eligible for a travel and hotel bonus payment:

- $0.20/mile per one-way trip to or from the CRU based on your home address
- For participants traveling long distances, a 1-night hotel stipend ($150.00) for the night prior to your visit(s), if needed

All payments will be in U.S. dollars. Compensation may be provided on a loadable debit card or by paper check. Pfizer New Haven CRU reserves the right to determine method of payment.

U.S. Citizens: Payments may be considered taxable income. If you receive $600.00 or more in taxable payments within a calendar year, your earnings will be reported to the Internal Revenue Service (IRS) and you may receive a tax form (1099). Personal information about you, such as your name, address, and Social Security Number (SSN) or Tax Identification Number (TIN), may be provided to the IRS and vendors working on behalf of Pfizer for tax purposes. If you do not provide your SSN or TIN, you may have taxes deducted from your payment at a rate of 24% and receive a tax form (1099). If you prefer to not receive payment for this study, you may alert your study site. In some countries, compensation may not be allowed due to immigration status.

Non-U.S. Citizens: Payments may be considered taxable income. Your earnings will be reported to the Internal Revenue Service (IRS) and you may receive a tax form (1042-S). Personal information about you, such as your name, address, and Social Security Number (SSN) or Tax Identification Number (TIN), may be provided to the IRS and vendors working on behalf of Pfizer for tax purposes. If you do not provide your SSN or TIN, you may have taxes deducted from your payment at a rate of 30% and receive a tax form (1042-S). If you prefer to not receive payment for this study, you may alert your study site. In some countries, compensation may not be allowed due to immigration status.

If at any time you test positive for drugs of abuse, you will not be paid for your visit. Further, if you test positive for drugs of abuse:

- You will not be allowed to be in this study
- You may not be allowed to be in any future studies

Screening Payments

The screening payment is listed below. You will receive this payment within 2 weeks of screening. If you termination the screening early, you will not be paid.

Screening Visit at CRU	$175.00

Additional payments are made if we ask you to return to the CRU to repeat any screening tests ($100.00 per visit).

Study Payments

The payment for completing the entire study is listed below. Please be aware that:

- If you do not follow instructions (including those listed in the New Haven CRU House Rules), if you are late for blood draws, or if you miss procedures, your payment may be reduced. You will be paid a prorated amount based on the extent of your participation if:
    - You are not able to complete the study
    - You choose to leave the study

  - You are withdrawn from the study early by the study investigator for non-safety-related issues
  - The study is stopped early
  - You are qualified but not chosen to participate
- You will not be given the study completion bonus if you drop out of the study early
- Partial payments are planned during the study. Details will be provided at screening
- A final payment will be provided to you within 2 weeks of finishing the study
- Pfizer may use information resulting from the study or samples collected in the study to develop products or processes. Pfizer may make a profit from these. There are no plans to pay you or provide you with any products developed from this research. Pfizer will own all products or processes that are developed using information or samples from the study

The decision to admit you into the study is based upon results of pre-study requirements. No one is guaranteed a place in the study until the first dose is complete. Enough numbers of participants will be brought in to be sure we fill the study.

Groups 1 - 5

STUDY PARTICIPANTS			
Type of Activity	**Payment per Activity**	**Total Number (Days)**	**Total**
Overnight Stay	$225.00	4	$900.00
Duration of Follow-Up Period (Discharge to Follow-up Call)	$15.00	26	$390.00
Follow-Up Visit (females able to have children only)	$250.00	1	$250.00
Follow-Up Phone Call (males and females unable to have children only)	$100.00	1	$100.00
Completion Bonus	$360.00		$360.00
Total Payment	Males and females unable to have children Females able to have children		$1,750.00 $1,900.00

Groups 6 & 7

STUDY PARTICIPANTS			
Type of Activity	**Payment per Activity**	**Total Number (Days)**	**Total**
Overnight Stay	$230.00	13	$2,990.00
Duration of Follow-Up Period (Discharge to Follow-up Call)	$15.00	26	$390.00
Follow-Up Visit (females able to have children only)	$250.00	1	$250.00
Follow-Up Phone Call (males and females unable to have children)	$100.00	1	$100.00
Completion Bonus	$1105.00		$1,105.00
Total Payment	Males and females unable to have children Females able to have children		$4,585.00 $4,735.00

Group 8

STUDY PARTICIPANTS			
Type of Activity	**Payment per Activity**	**Total Number (Days)**	**Total**
Overnight Stay	$230.00	11	$2,530.00
Duration of Follow-Up Period (Discharge to Follow-up Call)	$15.00	25	$375.00
Follow-Up Visit (females able to have children only)	$250.00	1	$250.00
Follow-Up Phone Call (males and females unable to have children)	$100.00	1	$100.00
Completion Bonus	$935.00		$935.00
Total Payment	Males and females unable to have children Females able to have children		$3,940.00 $4,090.00

BACK-UP PARTICIPANTS	
Type of Activity	**Payment per Activity**
Overnight Stay	$300.00
Daytime Stay	$190.00

Additional payments are made if we ask you to return to the CRU or to outside medical providers for additional tests ($250.00 per visit). During times that you need to stay in the CRU, you will not be paid more for repeat or added tests.

Costs for Study Participants

The study drug, study-related procedures, and study visits will be provided at no cost to you.

Your Decision to be in the Study

Taking part in this study is voluntary. You cannot be forced to be in this study. You may leave the study at any time without penalty or loss of any benefits. Your future medical care will not be affected. The study investigator, Pfizer Inc, or the FDA may take you out of the study without your permission at any time for the following reasons:

- You do not follow the instructions of the study investigator
- We find out you should not be in the study
- The study is stopped
- The study becomes harmful to your health
- You do not follow the New Haven CRU House Rules

If you leave the study or if you are taken out of the study for any reason, you may be asked to return to the CRU for a final visit. You may have some end of study tests at this visit. This is to make sure it is safe for you to leave the study. The data collected to the point of your withdrawal remains part of the study database and may not be removed.

If you are withdrawn from the study, or decide to stop the study, you can ask that any unused samples that were collected be destroyed. If you would like to have this done, please contact the study investigator. However, your samples may not be able to be destroyed because:

- They may no longer be traceable to you
- They may have already been used
- They may have been given to a third party

New Findings

If there is new information about the safety of the study drug or changes in the study tests, we will tell you in a timely manner. You can then decide if you still want to be in the study.

AGREEMENT TO BE IN THE STUDY PIMS # _____

This consent document contains important information to help you decide if you want to be in the study. If you have any questions that are not answered in this consent document, ask one of the study staff.

By checking each of the following, you are agreeing that the statements below are true:		Please Check
A.	This consent document is written in a language I understand	
B.	I understand the information in this consent document	
C.	I have been given enough time to ask questions and talk about the study	
D.	All of my questions have been answered completely	
E.	I have received enough information about the study	
F.	I agree that I was not pressured by the study investigator or the study staff to be in this study	
G.	I know that I can leave the study at any time without giving a reason and without affecting my health care	
H.	I know that my health records from this study may be reviewed by Pfizer Inc and by government officials	
I.	I know that I cannot be in another study while I am in this study	
J.	I have received the HIV, Hepatitis A, B, and C pamphlets and reviewed the information in them	

IF YOU DID NOT CHECK THE BOX NEXT TO ANY OF THE ABOVE QUESTIONS OR YOU ARE UNABLE TO ANSWER ANY OF THE ABOVE QUESTIONS, YOU SHOULD NOT SIGN AND DATE THIS CONSENT DOCUMENT

Text Messages:
Please check the box next to your choice.

☐ Yes, I agree that the study staff may send me text messages as described in the Confidentiality section

☐ No, I do NOT agree that the study staff may send me text messages as described in the Confidentiality section

- You will get a copy of this signed and dated informed consent document for your records
- You agree to participate in this study
- It is your responsibility to tell the study investigator about all changes in your physical or mental health during the study

Printed Name of Adult Study Participant (Name as appears on U.S./State Government-Issued ID)

Signature of Adult Study Participant Date

Printed Name or Initials of Person Explaining Informed Consent

Signature of Person Explaining Informed Consent Date