

INSTITUTIONAL BIOSAFETY COMMITTEE REVIEW

MEETING MINUTES

Meeting Date: Thursday, May 22, 2025
Time: 3:00 pm Eastern Time
Location: Zoom Teleconference
Institution: Children's Healthcare of Atlanta, Inc., Atlanta, GA
Principal Investigator: Shanmuganathan Chandrakasan, MD
Protocol: Cabaletta Bio Inc., CAB-201-002
Meeting Type: Initial Review of Protocol and Site
Title: A Phase 1/2, Open-Label Study to Evaluate the Safety and Efficacy of Autologous CD19-specific Chimeric Antigen Receptor T cells (CABA-201) in Subjects with Active Idiopathic Inflammatory Myopathy or Active Juvenile Idiopathic Inflammatory Myopathy

1. Call to order:

The Meeting was called to order at 3:01 pm Eastern Time.

2. Introductions and orientation:

Introductions were made and the Chair oriented members to the meeting procedures.

3. Declaration of quorum:

Four voting members were present, including one local member unaffiliated with the institution. Also present were three Institutional Representatives and IBC Services staff. The Chair declared that a quorum was present.

4. Conflict of Interest:

The Chair requested that voting members report any conflict of interest regarding this meeting. No conflicts of interest were reported.

5. Public posting:

An Institutional Representative confirmed that the notice of the meeting was not publicly posted per Institutional policy.

6. Review of proposed research:

The Chair provided an overview of the protocol.

The Chair provided an overview of the biosafety risk assessment for the protocol.

7. Determination for biosafety level and period of IBC oversight:

The Committee determined that **BSL-2 containment facilities and practices** are required for CABA-201 since it consists of human cells modified with a lentiviral vector.

The Committee determined that IBC oversight will continue for **3 months after the last subject's last dose of CABA-201 locally**, provided all other criteria for study closure are met.

8. Vote on the Protocol:

The Committee voted for the following determination on the Protocol:

X	APPROVED
	CONDITIONALLY APPROVED
	TABLED
	DISAPPROVED

DETERMINATION VOTE - YES: 4 NO: 0 ABSTAIN: 0

INSTITUTIONAL BIOSAFETY COMMITTEE REVIEW

9. Review of Principal Investigator qualifications:

Points of Discussion:

1. The Committee noted that some pages of the Principal Investigator's curriculum vitae did not scan in properly and are hard to read.
2. The Committee recommended that the Institution submit a clearer, digital (non-scanned) copy of the Principal Investigator's CV.

The Committee reviewed and accepted the qualifications of the Principal Investigator.

10. Review of proposed facilities and practices:

The Chair provided an overview of the arrangement for the facilities and practices.

Points of Discussion:

1. The Committee noted that all open studies currently overseen by the IBC consist of genetically modified human cells and recommended that one Biosafety SOP for Genetically Modified Human Cells be created since facilities and practices for all studies are either the same or very similar. An Institutional Representative agreed to this arrangement.
2. The Committee noted that typical personal protective equipment (PPE) used when removing items from liquid nitrogen include gloves, body protection and face protection. The Committee recommended that the Institution confirm the PPE worn when removing items from liquid nitrogen and that the Biosafety SOP be updated accordingly.
3. An Institutional Representative confirmed that all genetically modified human cell study agents are thawed outside of the Biological Safety Cabinet (BSC) in the Cellular Therapies Laboratory and then transported to the dosing room in a double-walled container.
4. The Committee recommended that the Site Inspection Checklist Table of Activities be revised to remove the red font noting protocols since the areas listed are applicable to all studies.
5. The Committee recommended that a small sharps container be made available within the BSC during dose modification preparation for immediate disposal of used needles, vials and other sharps-based preparation materials, per best biosafety practices.
6. The Committee noted that all Protocols no longer under IBC oversight be removed from the Biosafety SOP, Biohazard Sign and Site Inspection Checklist.
7. The Committee recommended that all biohazard soiled holding areas be labeled on the exterior with a biohazard symbol. An Institutional Representative agreed to follow-up with Institutional staff members about this recommendation.
8. The Committee recommended that the Institution confirm what IATA and DOT regulations are covered by the "MediaLab (LabCE) Packaging and Shipping Infectious Materials" training.

11. Site requirements:

The Chair reviewed training and communication requirements for maintaining IBC approval with the Institutional Representatives.

12. Vote on the Site:

The Committee voted for the following determination on the Site:

X	APPROVED
	CONDITIONALLY APPROVED
	TABLED
	DISAPPROVED

DETERMINATION VOTE - YES: 4

NO: 0

ABSTAIN: 0

13. Advice to the Institution: None.

14. Meeting adjourned: The meeting was adjourned at 3:21 pm Eastern Time.

15. Post-meeting notes: None

INSTITUTIONAL BIOSAFETY COMMITTEE REVIEW

Documents reviewed:

Agenda

Protocol, Version 3.0, dated 05-23-2024

Investigator's Brochure, Edition 1.0, dated 09-21-2024

Leukapheresis and Drug Product Manual, Version 5.0, dated 10-04-2024

Sponsor Memo, dated 07-16-2024

Biological Risk Assessment and Summary, updated 10-15-2024

Site Maps, dated 11-18-2024

Site Inspection Checklist, dated 01-14-2025, updated 04-22-2025

Photos, dated 05-05-2025

Biohazard Sign, dated 04-22-2025

Biological Safety Cabinet Certifications, expires 09-2025

SOP, Biosafety for CABA-201, dated 04-22-2025

Training, Shipping Certification, expires 10-2026

CV, Chandrakasan, S., signed 12-20-2024