



August 3, 2020

Dr. Jennifer Laffin  
Sr. Laboratory Medical Director  
Exact Sciences Laboratories  
650 Forward Drive  
Madison, WI 53711

Device: SARS-CoV-2 (N gene detection) Test

Company: Exact Sciences Laboratories

Indication: Qualitative detection of nucleic acid from SARS-CoV-2 in upper respiratory specimens (such as nasal, mid-turbinate, nasopharyngeal, and oropharyngeal swab specimens) from individuals suspected of COVID-19 by their healthcare provider.

This test is also for use with nasal swab specimens that are self-collected at home or in a healthcare setting by individuals using an authorized home-collection kit specified in this EUA's authorized labeling when determined to be appropriate by a healthcare provider.

Emergency use of this test is limited to authorized laboratories.

Authorized Laboratories: Testing is limited to Exact Sciences Laboratories, located at 650 Forward Drive, Madison, WI 53711 and 145 E. Badger Road Ste. 100, Madison, WI 53713, which are certified under the Clinical Laboratory Improvement Amendments of 1988 (CLIA), 42 U.S.C. § 262a, and meet the requirements to perform high complexity tests.

Dear Dr. Laffin:

On May 22, 2020, based on your<sup>1</sup> request, the Food and Drug Administration (FDA) issued a letter determining that your product<sup>2</sup> met the criteria for issuance under section 564(c) of the Act to be eligible for authorization under the March 31, 2020, Emergency Use Authorization (EUA) for Molecular-based Laboratory Developed Tests for Detection of Nucleic Acid from

<sup>1</sup> For ease of reference, this letter will use the term “you” and related terms to refer to Exact Sciences Laboratories which are located at two locations: 650 Forward Drive, Madison, WI 53711 and 145 E. Badger Road Ste. 100, Madison, WI 53713.

<sup>2</sup> For ease of reference, this letter will use the term “your product” to refer to the SARS-CoV-2 (N gene detection) Test used for the indication identified above.

SARS-CoV-2 (High Complexity LDT Umbrella EUA) for the qualitative detection of nucleic acid from SARS-CoV-2 in respiratory specimens collected from individuals suspected of COVID-19 by their healthcare provider, pursuant to Section 564 of the Federal Food, Drug, and Cosmetic Act (the Act) (21 U.S.C. §360bbb-3). As authorized under the High Complexity LDT umbrella EUA, testing of your test was limited to the single laboratory that developed the authorized test, located at 650 Forward Drive, Madison, WI 53711, and that is certified under Clinical Laboratory Improvement Amendments of 1988 (CLIA), 42 U.S.C. §263a to perform high complexity tests pursuant to the Scope of Authorization and Conditions of Authorization of that EUA.

On July 17, 2020, FDA received a request from you to revise the Scope of Authorization, and thus the test's intended use as originally specified by the High Complexity LDT Umbrella EUA, to include self-collection of nasal swab specimens that are self-collected at home or in a healthcare setting by individuals using an authorized home-collection kit specified in this EUA's authorized labeling when determined to be appropriate by a healthcare provider, and to specify that testing is limited to Exact Sciences Laboratories at two locations, 650 Forward Drive, Madison, WI 53711 and 145 E. Badger Road Ste. 100, Madison, WI 53713, which are certified under the Clinical Laboratory Improvement Amendments of 1988 (CLIA), 42 U.S.C. § 263a, and meet the requirements to perform high complexity tests. In addition, you requested that the Scope of Authorization be revised to eliminate one of the primer probes sets used in your product and multiplex the remaining primer probes in a single reaction. In response to these requests, because the requested revisions are beyond the Scope of Authorization of the High Complexity LDT Umbrella EUA, FDA is hereby authorizing the use of the SARS-CoV-2 (N gene detection) Test used for the indication identified above pursuant to Section 564 of the Act and the Scope of Authorization (Section II) and Conditions of Authorization (Section IV) of this letter of authorization.

On February 4, 2020, pursuant to Section 564(b)(1)(C) of the Act, the Secretary of the Department of Health and Human Services (HHS) determined that there is a public health emergency that 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 COVID-19. Pursuant to Section 564 of the Act, and on the basis of such determination, the Secretary of HHS then declared that circumstances exist justifying the authorization of emergency use of in vitro diagnostics for detection and/or diagnosis of the virus that causes COVID-19 subject to the terms of any authorization issued under Section 564(a) of the Act.<sup>3</sup>

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 your product, as described in the Scope of Authorization of this letter (Section II), subject to the terms of this authorization.

## **I. Criteria for Issuance of Authorization**

---

<sup>3</sup> U.S. Department of Health and Human Services, *Determination of a Public Health Emergency and 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 7316 February 7, 2020.

I have concluded that the emergency use of your product meets the criteria for issuance of an authorization under Section 564(c) of the Act, because I have concluded that:

1. The SARS-CoV-2 can cause a serious or life-threatening disease or condition, including severe respiratory illness, to humans infected by this virus;
2. Based on the totality of scientific evidence available to FDA, it is reasonable to believe that your product may be effective in diagnosing COVID-19, and that the known and potential benefits of your product when used for diagnosing COVID-19, outweigh the known and potential risks of your product; and
3. There is no adequate, approved, and available alternative to the emergency use of your product.<sup>4</sup>

## II. Scope of Authorization

I have concluded, pursuant to Section 564(d)(1) of the Act, that the scope of this authorization is limited to the indication above.

### Authorized Product Details

Your product is a qualitative test for the detection of nucleic acid from SARS-CoV-2 in upper respiratory specimens (such as nasal, mid-turbinate, nasopharyngeal, and oropharyngeal swab specimens), from individuals suspected of COVID-19 by their healthcare provider.

This test is also for use with nasal swab specimens that are self-collected at home or in a healthcare setting by individuals using an authorized home-collection kit specified in this EUA's authorized labeling when determined to be appropriate by a healthcare provider. Testing is limited to Exact Sciences Laboratories, located at 650 Forward Drive, Madison, WI 53711 and 145 E. Badger Road Ste. 100, Madison, WI 53713, which are certified under CLIA and meet the requirements to perform high complexity tests.

The SARS-CoV-2 nucleic acid is generally detectable in respiratory specimens during the acute phase of infection. Positive results are indicative of the presence of SARS-CoV-2 nucleic acid; clinical correlation with patient history and other diagnostic information is necessary to determine patient infection status. Positive results do not rule out bacterial infection or co-infection with other viruses. Negative results do not preclude SARS-CoV-2 infection and should not be used as the sole basis for patient management decisions. Negative results must be combined with clinical observations, patient history, and epidemiological information.

To use your product, SARS-CoV-2 nucleic acid is first extracted, isolated and purified from upper respiratory specimens. The purified nucleic acid is then reverse transcribed into cDNA followed by PCR amplification and detection using an authorized real-time (RT) PCR instrument.

Your product requires the following control materials, or other authorized control materials (refer

---

<sup>4</sup> No other criteria of issuance have been prescribed by regulation under Section 564(c)(4) of the Act.

to Condition X), that are to be run as outlined in the authorized labeling. All controls listed below must generate expected results in order for a test to be considered valid, as outlined in the authorized labeling:

- Internal Control - RNase P (RP) control in clinical samples: The RP primer and probe set is included in each run to test for human RP, which controls for specimen quality and demonstrates that nucleic acid was generated by the extraction process.
- Extraction No Target (ENT) serves both as an extraction control to monitor for any Reagent contamination and sample carryover that could occur during the extraction process. The ENT consists of Saline (ESL specimen collection media) and is run once for every batch of extracted specimens.
- A no template control (NTC) is used to monitor the possibility of sample contamination in the assay run and is used once on every PCR assay plate. The control is DNA suspension buffer (TE buffer).
- A Positive Control (POC) (nCoVPC) is used to verify that the assay run is performing as intended. The nCoVPC contains targets for N1, and RP and consists of Hs\_RPP30 Positive Control (IDT) and 2019-nCoV\_N\_Positive Control (IDT) in DNA suspension buffer (TE buffer). The positive control is used once on every PCR plate.

Your product also requires the use of additional authorized materials and authorized ancillary reagents that are not included with your product and are described in the Instructions for Use.

The above described product, is authorized to be accompanied with labeling submitted as part of the EUA request (listed below), and as described in the EUA Summary (available at <https://www.fda.gov/medical-devices/coronavirus-disease-2019-covid-19-emergency-use-authorizations-medical-devices/vitro-diagnostics-euas>), and the following product-specific information pertaining to the emergency use, which is required to be made available to healthcare providers and patients:

- Fact Sheet for Healthcare Providers: Exact Sciences Laboratories - SARS-CoV-2 (N gene detection) Test
- Fact Sheet for Patients: Exact Sciences Laboratories - SARS-CoV-2 (N gene detection) Test

The above described product, when accompanied by the EUA Summary, Fact Sheet for Healthcare Providers, Fact Sheet for Patients, and the following Exact Sciences Laboratories Procedure for SARS-CoV-2 (N gene detection) - standard operating procedures (SOPs): SOP-2066 Reagent Preparation, SOP-2067 LIS Accessioning and Specimen Handling, SOP-2068 Specimen Lysis, SOP-2080 Total Nucleic Acid Extraction, SOP-2071 PCR Plate Setup, SOP-2072 ABI 7500 Workflow, and SOP-2073 Run Release (collectively referenced to as “authorized labeling”) is authorized to be used by the authorized laboratories, despite the fact that it does not meet certain requirements otherwise required by applicable federal law.

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 your product, when used consistent with the Scope of Authorization of this letter (Section II), outweigh the known and potential risks of your product.

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 your product may be effective in diagnosing COVID19, when used consistent with the Scope of Authorization of this letter (Section II), pursuant to Section 564(c)(2)(A) of the Act.

FDA has reviewed the scientific information available to FDA, including the information supporting the conclusions described in Section I above, and concludes that your product (as described in the Scope of Authorization of this letter (Section II)) meets the criteria set forth in Section 564(c) of the Act concerning safety and potential effectiveness.

The emergency use of your product under this EUA must be consistent with, and may not exceed, the terms of this letter, including the Scope of Authorization (Section II) and the Conditions of Authorization (Section IV). 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) of the Act described above and the Secretary of HHS's corresponding declaration under Section 564(b)(1) of the Act, your product is authorized for the indication above.

### **III. Waiver of Certain Requirements**

I am waiving the following requirements for your product during the duration of this EUA:

- Current good manufacturing practice requirements, including the quality system requirements under 21 CFR Part 820 with respect to the design, manufacture, packaging, labeling, and storage of your product.

### **IV. Conditions of Authorization**

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

#### **Exact Sciences Laboratories (You)**

- A. Your product must comply with the following labeling requirements under FDA regulations: the intended use statement (21 CFR 809.10(a)(2), (b)(2)); adequate directions for use (21 U.S.C. 352(f)), (21 CFR 809.10(b)(5), (7), and (8)); appropriate limitations on the use of the device including information required under 21 CFR 809.10(a)(4); and any available information regarding performance of the device, including requirements under 21 CFR 809.10(b)(12).
- B. You may request changes to the authorized labeling. Such requests will be made by you in consultation with, and require concurrence of, Division of Microbiology (DMD)/Office of Health Technology 7 (OHT7)-Office of In Vitro Diagnostics and Radiological Health (OIR)/Office of Product Evaluation and Quality (OPEQ)/Center for Devices and Radiological Health (CDRH).

- C. You will make available on your website(s) the authorized Fact Sheet for Healthcare Providers and Fact Sheet for Patients.
- D. You will inform relevant public health authorities of this EUA, including the terms and conditions herein, and any updates made to your product and authorized labeling.
- E. You are authorized to make available additional information relating to the emergency use of your product that is consistent with, and does not exceed, the terms of this letter of authorization.
- F. You may request changes to the Scope of Authorization (Section II in this letter). Such requests will be made by you in consultation with DMD/OHT7-OIR/OPEQ/CDRH, and require concurrence of, Office of Counterterrorism and Emerging Threats (OCET)/Office of the Chief Scientist (OCS)/Office of the Commissioner (OC) and DMD/OHT7-OIR/OPEQ/CDRH.
- G. You may request the addition of other instruments and associated software for use with your product. Such requests will be made by you in consultation with, and require concurrence of, DMD/OHT7-OIR/OPEQ/CDRH.
- H. You may request the addition of other extraction methods for use with your product. Such requests will be made by you in consultation with, and require concurrence of, DMD/OHT7-OIR/OPEQ/CDRH.
- I. You may request the revision of specimen types for use with your product. Such requests will be made by you in consultation with, and require concurrence of, DMD/OHT7-OIR/OPEQ/CDRH.
- J. You may request the revision of primers or probes for use with your product. Such requests will be made by you in consultation with, and require concurrence of, DMD/OHT7-OIR/OPEQ/CDRH.
- K. You may request the addition and/or substitution of control materials for use with your product. Such requests will be made by you in consultation with, and require concurrence of, DMD/OHT7-OIR/OPEQ/CDRH.
- L. You may request the addition and/or substitution of other ancillary reagents and materials for use with your product. Such requests will be made by you in consultation with, and require concurrence of, DMD/OHT7-OIR/OPEQ/CDRH.
- M. You may request the addition and/or substitution of home specimen collection kits for use with your product. Such requests will be made by you in consultation with, and require concurrence of, DMD/OHT7-OIR/OPEQ/CDRH.
- N. You may request the addition and/or substitution of the components of any home specimen collection kit authorized for use with your product. Such requests will be

made by you in consultation with, and require concurrence of, DMD/OHT7-OIR/OPEQ/CDRH.

- O. You will evaluate the analytical limit of detection and assess traceability<sup>5</sup> of your product with any FDA-recommended reference material(s). After submission to FDA and DMD/OHT7-OIR/OPEQ/CDRH's review of and concurrence with the data, you will update the authorized labeling to reflect the additional testing. Such labeling updates will be made in consultation with, and require concurrence of, DMD/OHT7-OIR/OPEQ/CDRH.
- P. You will track adverse events, including any occurrence of false results and report to FDA pursuant to 21 CFR Part 803.
- Q. You will additionally track adverse events associated with any home specimen collection kit authorized for use with your product, including occurrences of false results and report to FDA pursuant to 21 CFR Part 803. Serious adverse events, especially unexpected biosafety concerns, should immediately be reported to DMD/OHT7-OIR/OPEQ/CDRH (via email: [CDRH-EUA-Reporting@fda.hhs.gov](mailto:CDRH-EUA-Reporting@fda.hhs.gov)).
- R. You will make available all instructions related to the self-collection of specimens using any home specimen collection kit authorized for use with your product, both in the shipped kit and on your website.
- S. You will submit to FDA a summary report within 30 calendar days of authorization summarizing the results of any testing performed using specimens collected with any new home-collection kit authorized for use with your product during that timeframe, including how many specimens were received, how many specimens had to be rejected during accession and the main reasons for rejection, and the positivity rate for specimens collected with the authorized home-collection kit.
- T. You will include with test result reports, all authorized Fact Sheets. Under exigent circumstances, other appropriate methods for disseminating these Fact Sheets may be used, which may include mass media.
- U. You will use your product as outlined in the authorized labeling. Deviations from the authorized labeling, including the authorized instruments, authorized extraction methods, authorized clinical specimen types, authorized control materials, authorized other ancillary reagents and authorized materials required to use your product are not permitted.
- V. When testing specimens self-collected using any authorized home specimen collection kits for use with your product you must follow any Specimens Accessioning protocols provided with the authorized self-collection kit and/or outlined in your Test LIS Accessioning and Specimen Handling SOP when accepting specimens for testing.

---

<sup>5</sup> Traceability refers to tracing analytical sensitivity/reactivity back to an FDA-recommended reference material.

- W. You must notify the relevant public health authorities of your intent to run the test.
- X. You will have a process in place for reporting test results to healthcare providers and relevant public health authorities, as appropriate.
- Y. You will collect information on the performance of your product and report to DMD/OHT7-OIR/OPEQ/CDRH (via email: [CDRH-EUA-Reporting@fda.hhs.gov](mailto:CDRH-EUA-Reporting@fda.hhs.gov)) any suspected occurrence of false positive or false negative results and significant deviations from the established performance characteristics of the test of which you become aware.
- Z. All laboratory personnel using the test must be appropriately trained in RT-PCR techniques and use appropriate laboratory and personal protective equipment when handling this kit, and use the test in accordance with the authorized labeling.
- AA. You will ensure that any records associated with this EUA are maintained until otherwise notified by FDA. Such records will be made available to FDA for inspection upon request.

#### **Conditions Related to Printed Materials, Advertising and Promotion**

- BB. All descriptive printed matter, including advertising and promotional materials relating to the use of your product shall be consistent with the authorized labeling, as well as the terms set forth in this EUA and the applicable requirements set forth in the Act and FDA regulations.
- CC. No descriptive printed matter, including advertising and promotional materials, relating to the use of your product may represent or suggest that this test is safe or effective for the detection of SARS-CoV-2.
- DD. All descriptive printed matter, including advertising and promotional materials relating to the use of your product shall clearly and conspicuously state that:
- This test has not been FDA cleared or approved;
  - This test has been authorized by FDA under an EUA for use by authorized laboratories;
  - This test has been authorized only for the detection of nucleic acid from SARS-CoV-2, not for any other viruses or pathogens; and,
  - This test is only authorized for the duration of the declaration that circumstances exist justifying the authorization of emergency use of in vitro diagnostics for detection and/or diagnosis of COVID-19 under Section 564(b)(1) of the Act, 21 U.S.C. § 360bbb-3(b)(1), unless the authorization is terminated or revoked sooner.

The emergency use of your product as described in this letter of authorization must comply with the conditions and all other terms of this authorization.

**V. Duration of Authorization**

This EUA will be effective until the declaration that circumstances exist justifying the authorization of the emergency use of in vitro diagnostics for detection and/or diagnosis of COVID-19 is terminated under Section 564(b)(2) of the Act or the EUA is revoked under Section 564(g) of the Act.

Sincerely,

\_\_\_\_\_  
RADM Denise M. Hinton  
Chief Scientist  
Food and Drug Administration

Enclosure

REVOKED