

Study Activities Table

Activity	Screening	Cycle 1 (21-day cycle)				Cycles 2-4 (21-day cycles)			Cycle 5-6 (21-day cycles)	Cycle 7-8 (21-day cycles)	Unscheduled (as needed per Investigator's discretion)	End of Treatment Week 28 or 6 [+2] week after Cycle 8 Day 1, whichever is later	120 day Safety Follow-up	Post-Treatment Follow-up	Survival Follow-up
	Day -28 to Day +1	Day 1	Day 8	Day 15	Day 16	Day 1 (+2 days)	Day 8	Day 15	Day 1 (+2 days)	Day 1 (+2 days)				± 7 days	± 7 days
INTERVIEWS & QUESTIONNAIRES															
Informed consent	✓														
Eligibility criteria	✓	✓													
Demographics	✓														
Medical/surgical history	✓	✓													
Alcohol and nicotine use	✓														
Adverse event assessment	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Prior/concomitant therapy	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Survival Status															✓
New malignancy and new Anti-Lymphoma therapy														✓	✓
PRO															
EQ-5D-5L		✓				✓			✓	✓		✓		✓	
FACT Lym		✓				✓			✓	✓		✓		✓	
PGIC (Patients' Global Impression of Change)-Lym						✓			✓	✓		✓		✓	

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	Day -28 to Day -1	Day 1	Day 8	Day 15	Day 16	Day 1 (+ 2 days)	Day 8	Day 15	Day 1 (+ 2 days)	Day 1 (+ 2 days)				± 7 days	± 7 days
LOCAL LABS & EXAMS															
Brain MRI or CECT scan (and lumbar puncture for subjects with high-risk for CNS involvement or as clinically indicated)	✓														
Beta2-microglobulin	✓														
Hepatitis B and C screening	✓														
Clinical Tumor Lysis Syndrome chemistry panel		✓	As clinically indicated												
Disease status and subtype	✓	✓													
Molecular (e.g., PCR) test or antigen test for SARS-CoV-2 infection (<i>only if a subject has signs/symptoms suggestive of SARS-CoV-2 to rule out infection</i>), details in Protocol Section 5.1	✓														
Quantitative CMV DNA - PCR	✓					C3			C6		✓	✓	✓		
CMV serology (IgM and IgG)	✓														
Echocardiogram or MUGA	✓										As indicated				
12-lead ECG	✓										✓				
Height (screening only) and weight	✓	✓				✓			✓	✓	✓	✓			

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Vital signs	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
ECOG performance status	✓	✓				✓			✓	✓	✓	✓			
Constitutional symptoms (B symptoms)	✓	✓				✓			✓	✓	✓	✓		✓	
Physical examination	✓	✓	Targeted									✓		Targeted	
Lymph node examination	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓		✓	
Neurologic (ICANS) assessment (investigational arm)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
Clinical requirements for administration of epcoritamab assessment (if applicable, investigational arm)		✓	✓	✓		✓	✓	✓	✓	✓					
Serum Pregnancy test	✓														
Pregnancy test (urine)		✓				✓			✓	✓	✓	✓	✓	✓	
Urinalysis	✓	✓				✓			✓	✓	✓	✓			
Immunoglobulins (IgA, IgG, and IgM)	✓	✓				✓			✓	✓	✓	✓			
Hematology	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓	
Clinical chemistry	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓	
Coagulation	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			
Tuberculosis screening (IGRA) if clinically indicated	✓														

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TUMOR ASSESSMENTS															
Fresh/archival tumor biopsy sample	✓	After screening, fresh tumor biopsy sample to be collected at C2D15 (optional sample) and at time of tumor progression (optional).													
PET/CT scan with contrast enhancement (CT must be of diagnostic quality), CECT or MRI (if CT component of PET/CT is not of diagnostic quality) details in Operations Manual Section 3.24)	✓							End of C4			✓	✓		✓	
PET/CT scan with contrast enhancement (CT must be of diagnostic quality), CECT or MRI (if CT component of PET/CT is not of diagnostic quality) for exploratory biomarkers (select sites only)								End of C2							
CECT or MRI (details in Operations manual Section 3.24)														✓	
Bone marrow biopsy and/or aspirate for local analysis of lymphoma involvement	✓	Bone marrow exam is needed to confirm CR in subjects who had bone marrow involvement at screening. Sample to be collected upon detection of CR by PET-CT scan.													
CENTRAL LABS															
Pharmacokinetic samples (investigational arm)		✓	✓	✓	✓	✓	✓	✓	✓	✓					

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CSF sample (only for subjects who require Lumbar Puncture)	✓								Prior to any intrathecal MTX (on or after C5D1)		✓				
ADA/nAb		✓		✓		✓			✓	✓					
Cytokine (soluble factors) (control arm)		✓				C2, C3									
Cytokine (soluble factors) (investigational arm)		✓	✓	✓	✓	C2, C3	C2D8	C2D15							
TBNK (by flow cytometry) (control arm)		✓				✓			✓	✓		✓		✓	
TBNK (by flow cytometry) (investigational arm)		✓	✓	✓		✓			✓	✓		✓		✓	
Immuno-phenotyping (by flow cytometry) (control arm)		✓				✓			✓	✓		✓		✓	
Immuno-phenotyping (by flow cytometry) (investigational arm)		✓	✓	✓		✓			✓	✓		✓		✓	
Immuno-phenotyping (exploratory) (control arm)		✓				✓			✓	✓		✓		✓	
Immuno-phenotyping (exploratory) (investigational arm)		✓	✓	✓		✓			✓	✓		✓		✓	
T-cell receptor clonality		✓				C2, C3						✓			
Whole blood PG DNA Sample		✓													
Whole blood MRD (details in Operations Manual Section 3.9)		✓				C2, C3			C5	✓		✓		✓	

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Whole blood ctDNA (details in Operations Manual Section 3.9)		✓				C2, C3			C5	✓		✓		✓	
Whole blood for exploratory biomarkers (cfDNA and EV-miRNA, etc, details in Operations Manual Section 3.9)		✓				C2, C3			C5	✓		✓		✓	
Bone marrow aspirate MRD						<ul style="list-style-type: none"> For subjects with confirmed bone marrow involvement at screening, if a subject is in CR by FDG-PET a portion of the aspirate collected to confirm CR will be used to assess MRD. For subjects with no bone marrow involvement at baseline, no bone marrow examination for MRD is required. 									
Rx TREATMENT															
Randomization/drug assignment		✓													
Hospitalization (at investigator's discretion or if clinically indicated)				✓											
CRS prophylaxis and temperature monitoring (investigational arm)		✓	✓	✓	✓	✓	✓	✓	✓	✓					
Epcoritamab		✓	✓	✓		✓	✓	✓	✓	✓					
Vincristine		✓				✓			✓						
Rituximab		✓				✓			✓	✓					
Cyclophosphamide		✓				✓			✓						
Doxorubicin HCL		✓				✓			✓						
Prednisone		D1-D5				D1-D5			D1-D5						

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Dispense Subject Diary		✓				✓			✓	✓					
Collect and Review Subject Diary						✓			✓	✓		✓			