

K122414

**Sponsor:** Leto Enterprises Incorporation  
**Subject Device:** AB COMMAND Dual Channel Fitness Belt  
**File No.:** 510(k) submission report, Section 9

DEC 21 2012

## Section 9 510 (k) Summary

This summary of 510(K) safety and effectiveness information is being submitted in accordance with the requirement of 21 CFR 807.92.

### 1. Submitter's Information

510(k) Owner's Name: Leto Enterprises Incorporation  
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#### ➤ Contact Person of the Submission:

Ms. Sabrina Wei  
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E-mail: [sabrinawei@hotmail.com](mailto:sabrinawei@hotmail.com)

### 2. Device Information

Trade Name:	AB COMMAND Dual Channel Fitness Belt
Common Name:	Powered muscle stimulator
Classification name:	Stimulator, Muscle, Powered, For muscle conditioning
Review Panel:	Physical Medicine
Product Code:	NGX
Regulation Class:	II
Regulation Number:	890.5850

### 3. Predicate Device Information

Submitter:	Leto Enterprises Incorporation
Device Name:	X2ABS Dual Channel Fitness Belt
510(K) Number:	K102295

#### **4. Device description**

AB COMMAND Dual Channel Fitness Belt is a two channel battery operated muscle stimulation system specifically designed to exercise the abdominal muscles. It is comprised of an electronic stimulator module for signal generation, a belt for fixation, and four electrodes for signal connection to skin. The built-in electrodes are located on the inner surface of the belts.

Power is derived from 2 batteries located in a compartment protected by a removable battery cover for the Fitness Belt. There is no current passed from side to side. The user cannot access the wiring or connectors within the belt.

The stimulator sends gentle electrical current to targeted muscle group through the electrodes placed on the skin. The parameters of the unit are controlled by the buttons. Its intensity level can be adjustable by user.

#### **5. Intended Use**

The AB COMMAND Dual Channel Fitness Belt is intended for use by healthy persons to apply trans-coetaneous electrical muscle stimulation (EMS) through skin contact electrodes for the following purposes:

- Improvement of muscle tone of the muscles in the abdomen.

#### **6. Indications for Use**

The AB COMMAND Dual Channel Fitness Belt is indicated for the improvement of muscle tone, for strengthening of muscles and for the development of firmer muscles. It is indicated for use on the abdominal muscles.

Contraindicated use on injured or otherwise impaired muscles.

Not intended for use in any therapy or for the treatment of any medical conditions or diseases.

#### **7. Performance Summary**

Testing has been carried out to assure compliance with recognized electrical safety standards:

- IEC 60601-1 and -2-10 standards for electrical safety
- IEC 60601-1-2 standard for electromagnetic compatibility
- IEC 60601-1-4 standard for the software

Performance data has been verified according to the requirements of the FDA Guidance for Pre Market Submissions and for Software Contained in Medical Devices.

The waveform test report has also been provided to verify the parameters of the device.

#### **8. Comparison to predicate device and conclusion**

The Intended Use, Indications for Use, technological characteristics, features,

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specifications, materials, operation, and software of AB COMMAND Dual Channel Fitness Belt are substantial equivalent to the predicate device X2ABS Dual Channel Fitness Belt.

The main differences between the subject device and predicate device are the trade mark, dimension and art design of belt, package bag and box. These differences will not raise new issues of safety and effectiveness.

**9. Date of the summary prepared: September 29, 2012**



Food and Drug Administration  
10903 New Hampshire Avenue  
Document Control Center – WO66-G609  
Silver Spring, MD 20993-002

21 December 2012

Leto Enterprises Incorporation  
% Ms. Sabrina Wei  
Medlab (Shenzhen) Information Service Co., Ltd.  
Suite A-2706, Zhongfang Jingyuan, Xinwen Road,  
Futian District  
Shenzhen, Guangdong 518100  
China

Re: K122414  
Trade/Device Name: AB Command Dual Channel Fitness Belt  
Regulation Number: 21 CFR 890.5850  
Regulation Name: Powered Muscle Stimulator  
Regulatory Class: Class II  
Product Code: NGX  
Dated: Undated  
Received: November 26, 2012

Dear Ms. Wei:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA).

You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must

comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please go to <http://www.fda.gov/AboutFDA/CentersOffices/CDRH/CDRHOffices/ucm115809.htm> for the Center for Devices and Radiological Health's (CDRH's) Office of Compliance. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to <http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm> for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address <http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm>.

Sincerely yours,

**Victor Krauthamer -S**

Victor Krauthamer, Ph.D.  
Acting Director  
Division of Neurological and Physical  
Medicine Devices  
Office of Device Evaluation  
Center for Devices and  
Radiological Health

Enclosure

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**3. Indications for Use**

510(k) Number (if known): K122414

Device Name: AB COMMAND Dual Channel Fitness Belt

Indications for Use:

The AB COMMAND Dual Channel Fitness Belt is indicated for the improvement of muscle tone, for strengthening of muscles and for the development of firmer muscles. It is indicated for use on the abdominal muscles.

Contraindicated use on injured or otherwise impaired muscles.

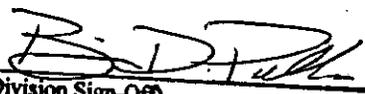
Not intended for use in any therapy or for the treatment of any medical conditions or diseases.

Prescription Use \_\_\_\_\_ AND/OR Over-The-Counter Use X  
(Part 21 CFR 801 Subpart D) (21 CFR 801 Subpart C)

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE OF NEEDED)

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Concurrence of CDRH, Office of Device Evaluation (ODE)

  
(Division Sign-Off)  
Division of Neurological and Physical  
Medicine Devices  
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