

**FEB 27 2013****Section V 510(k) Summary**

This 510(k) Summary of 510(k) safety and effectiveness information is being submitted in accordance with requirements of SMDA 1990 and 21 CFR 807.92.

The assigned 510(k) Number: \_\_\_\_\_

1. Date of prepared: Dec. 7, 2012

2. Sponsor

Shenzhen Biocare Electronics Co., Ltd  
5/F, Taohuayuan High-Tech Innovation Park, Baoan  
Shenzhen, Guangdong, 518102, China

Establishment Registration Number: 3008457078

Contact Person: Mr. HongboZhong

Position: Director

Tel: +86-755-27960888

Fax: +86-755-27960643

Email: hb-zhong@tom.com

3. Submission Correspondent

Ms. Diana Hong & Mr. Tarzan Wang

Mid-Link Consulting Co., Ltd

P.O. Box 237-023, Shanghai, 200237, China

Tel: +86-21-22815850

Fax: 240-238-7587

Email: info@mid-link.net

4. Proposed Device Identification

Proposed Device Trade Name: Digital Electrocardiographs

Proposed Device Common Name: Electrocardiographs

Proposed Device Model: iE 12A / iE 15 / iE 15S

Classification: Class II

Product Code: DPS

Regulation Number: 21 CFR 870.2340

Review Panel: Cardiovascular

**Intended Use Statement:**

Digital Electrocardiographs, iE 12A / iE 15 / iE 15S, are intended to acquire ECG signals from adult and pediatric patients through body surface ECG electrodes. The obtained ECG records can help users to analyze and diagnose heart disease. Digital Electrocardiographs shall be used in healthcare facilities by doctors and/or trained healthcare professionals.

**5. Predicate Device Identification**

510(k) Number: K122712

Product Name: Digital Electrocardiograph / iE 12

Manufacturer: Shenzhen Biocare Electronics Co., Ltd

**6. Device Description**

Digital Electrocardiographs, iE 12A / iE 15 / iE 15S, are designed to acquire, display and record ECG signals from patient body surface by ECG electrodes. After been amplified and filtered, the ECG signals waveforms are displayed in the LCD and recorded in the paper through thermal printer. ECG data result and patient information could be stored in the memory of the device.

All the models, iE 12A / iE 15 / iE 15S, of the proposed device, Digital Electrocardiographs, follow the same design principle and similar technical specifications.

**7. Non-Clinical Test Conclusion**

Bench tests were conducted to verify that the proposed device met all design specifications as was Substantially Equivalent (SE) to the predicate device. The test results demonstrated that the proposed device complies with the following standards:

EN 60601-1:1990+A1:1993+A11:1993+A12:1993+A2:1995+A13:1996, Medical electrical equipment – Part 1: General requirements for safety.

EN 60601-2-25:1999, Medical electrical equipment – Part 2: Particular requirements for the safety of electrocardiographs.

EN 60601-1-2:2007, Medical electrical equipment – Part 1-2: General requirements for safety – Collateral standard: Electromagnetic compatibility – Requirements and tests.

IEC60601-2-51:2003, Medical electrical equipment – Part 2: Particular requirements for the safety, including essential performance, of recording and analysing single channel and multi-channel electrocardiographs.

## 8. Technological Characteristics Comparison

ITEM	Proposed Device			Predicate Device
	iE 12A	iE 15	iE 15S	iE 12
Lead	Standard 12-lead	Standard 12-lead/15-lead	Standard 12-lead/15-lead	Standard 12-lead
Acquisition mode	Simultaneous 12-lead acquisition	Simultaneous 12-lead/15-lead acquisition	Simultaneous 12-lead/15-lead acquisition	Simultaneous 12-lead acquisition
Recording format	Automatic / Manual / Rhythm			
Frequency response	0.05 Hz~150 Hz	0.05 Hz~250 Hz	0.05 Hz~250 Hz	0.05~150Hz
Noise level	<15 $\mu$ Vp-p	<15 $\mu$ Vp-p	<15 $\mu$ Vp-p	<15 $\mu$ Vp-p
CMRR	>60dB >100dB with AC filter			
Recording Speed	Six levels as 5, 6.25, 10, 12.5, 25, 50mm/s	Six levels as 5, 6.25, 10, 12.5, 25, 50mm/s	Six levels as 5, 6.25, 10, 12.5, 25, 50mm/s	Six levels as 5, 6.25, 10, 12.5, 25, 50mm/s
Input CIR current	$\leq 0.1\mu$ A	$\leq 0.1\mu$ A	$\leq 0.1\mu$ A	$\leq 0.1\mu$ A
Input impedance	>50M $\Omega$	>50M $\Omega$	>50M $\Omega$	>50M $\Omega$
External Input	Input impedance: $\geq 100k \Omega$ Sensitivity: 10mm/V $\pm 5\%$	Input impedance: $\geq 100k \Omega$ Sensitivity: 10mm/V $\pm 5\%$	Input impedance: $\geq 100k \Omega$ Sensitivity: 10mm/V $\pm 5\%$	Input impedance: $\geq 100k \Omega$ Sensitivity: 10mm/V $\pm 5\%$
External Output	Output impedance: $\leq 100 \Omega$ Sensitivity: 1V/mV $\pm 5\%$ (at 10mm/mV)	Output impedance: $\leq 100 \Omega$ Sensitivity: 1V/mV $\pm 5\%$ (at 10mm/mV)	Output impedance: $\leq 100 \Omega$ Sensitivity: 1V/mV $\pm 5\%$ (at 10mm/mV)	Output impedance: $\leq 100 \Omega$ Sensitivity: 1V/mV $\pm 5\%$ (at 10mm/mV)

## 9. Substantially Equivalent Conclusion

We compared the proposed device with predicate device in product code, regulation number, class, intended use, performance, safety and EMC, the differences are frequency response and lead, for such differences we conducted relative standard to demonstrate such performance meet the

requirements, the test result shown so.

The proposed device, Digital Electrocardiograph, is determined to be Substantially Equivalent (SE) to the predicate device, Digital Electrocardiograph (K122712), in respect of safety and effectiveness.



Food and Drug Administration  
10903 New Hampshire Avenue  
Document Control Center – WO66-G609  
Silver Spring, MD 20993-0002

February 27, 2013

Shenzhen Biocare Electronics Co., Ltd  
c/o Ms. Diana Hong  
Submission Correspondent  
P.O. Box 237-023  
Shanghai, 200237, China

Re: K123816

Trade Name: Digital Electrocardiographs Models iE 12A, iE 15 and iE 15S  
Regulation Number: 21 CFR 870.2340  
Regulation Name: Electrocardiographs  
Regulatory Class: Class II  
Product Code: DPS  
Dated: February 1, 2013  
Received: February 5, 2013

Dear Ms. Hong,

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/CDRHOices/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,

Owen P. Faris -S

for Bram D. Zuckerman, M.D.  
Director  
Division of Cardiovascular Devices  
Office of Device Evaluation  
Center for Devices and  
Radiological Health

Enclosure

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## Section II Indications for Use

510(k) Number:

Device Name: Digital Electrocardiographs

Indications for Use:

Digital Electrocardiographs, iE 12A / iE 15/ iE 15S, are intended to acquire ECG signals from adult and pediatric patients through body surface ECG electrodes. The obtained ECG records can help users to analyze and diagnose heart disease. Digital Electrocardiographs shall be used in healthcare facilities by doctors and/or trained healthcare professionals.

PRESCRIPTION USE  
(Part 21 CFR 801 Subpart D)

OVER-THE-COUNTER USE  
(21 CFR 801 Subpart C)

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

Concurrence of CDRH, Office of Device Evaluation (ODE)

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Owen P. Faris -S