

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

September 17, 2016

KARL STORZ Endoscopy-America, Inc. Ms. Nozomi Yagi Regulatory Affairs Specialist 2151 E. Grand Avenue El Segundo, California 90245

Re: K161112

Trade/Device Name: KARL STORZ Flexible Video-Neuro-Endoscope System Regulation Number: 21 CFR 882.1480 Regulation Name: Neurological Endoscope Regulatory Class: Class II Product Code: GWG Dated: August 18, 2016 Received: August 19, 2016

Dear Ms. Yagi:

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 <u>Federal Register</u>.

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 contact the Division of Industry and Consumer Education 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. 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

<u>http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm</u> 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 Industry and Consumer Education 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,

Carlos L. Pena -S

Carlos L. Peña, PhD, MS Director Division of Neurological and Physical Medicine Devices Office of Device Evaluation Center for Devices and Radiological Health

Enclosure

Indications for Use

510(k) Number *(if known)* K161112

Device Name

KARL STORZ Flexible Video-Neuro-Endoscope System

Indications for Use (Describe)

The KARL STORZ Flexible Video-Neuro-Endoscope System is indicated to provide visualization and access during cranial diagnostic and therapeutic procedures such as tumor biopsy and resection, hydrocephalus treatment, endoscopic third ventriculostomy with choroid plexus cauterization (ETV/CPC), endoscopic third ventriculostomy, cyst fenestration, and aqueduct exploration.

| Type of Use (Select one or both, as applicable) | |
|---|---|
| ➢ Prescription Use (Part 21 CFR 801 Subpart D) | Over-The-Counter Use (21 CFR 801 Subpart C) |

CONTINUE ON A SEPARATE PAGE IF NEEDED.

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510(k) Summary

This 510(k) Summary is being submitted in accordance with the requirements of the Safe Medical Devices Act (SMDA) of 1990 and 21 CFR 807.92. All data included in this document is accurate and complete to the best of KSEA's knowledge.

| Submitter: | KARL STORZ Endoscopy-America, Inc. | | |
|---------------------------------------|--|--|--|
| | EI Segundo, CA 90245 | | |
| Contact: | Nozomi Yagi Regulatory Affairs Specialist Phone: (424) 218-8351 Fax: (424) 218-8519 | | |
| Date of Preparation: | September 15, 2016 | | |
| Type of 510(k) Submission: | Traditional | | |
| Device Identification: | Trade Name: KARL STORZ Flexible Video-Neuro-Endoscope System Classification Name: Endoscope, Neurological (21 CFR Part 882, 1480) | | |
| Regulatory Class: | II | | |
| Product Code: | GWG | | |
| Guidance Document: | Not Applicable for GWG product code | | |
| Recognized Consensus Standards: | Not Applicable for GWG product code | | |
| Predicate Device(s): | Predicate Device: KARL STORZ Endoscopy-America's KSEA Neuro-Fiberscope (K002788) | | |
| | The predicate device has not been subject to a design-related recall. | | |
| Device Description: | The Flexible Video-Neuro-Endoscope System is a videoscope indicated for viewing and providing access during cranial diagnostic and therapeutic procedures. The system consists of the KARL STORZ Flexible Video-Neuro-Endoscope (Model Number: 11161V) and the IMAGE1 SPIES Camera Control Unit (CCU), which has been cleared in K160044.KARL STORZ Flexible Video- Neuro-Endoscope's working shaft is 350 mm long with 8.5 Fr | | |



| Intended Use- | elliptical shaped distal tip (minor diameter is 2.4 mm and major diameter is 3.2 mm). The shaft has a Pellathane (polyurethane) cover and contains a PTFE working channel with an I.D. of 1.2 mm. The working channel length is 519 mm. Both instrument and irrigation ports have stopcocks, and there are no check valves or other restrictions to prevent the back flow within any point of the fluid path. The Video Neuroscope's direction of view is 0° and the direction of view is 90°. The distal tip houses the CMOS (complementary metal oxide semiconductor) imaging sensor, and the illumination is provided by two glass fiber light bundles, whose LED light source is located in the handpiece. In the handpiece of the KARL STORZ Flexible Neuro-endoscope, the user will find a deflection lever, which allows the distal tip to deflect 270 degrees in the UP/DOWN direction. Next to the deflection lever is three control buttons ("Select", "Left (Up)", and "Right (Down)") that provide a remote means for the user to interact with the IMAGE1 SPIES CCU and can be programmed to initiate specific functions such as white balance, image capture, zoom, and access to CCU setup menu. Once set by user, the control button assignment is retained after the system being switched on and off. LED (Light Emitting Diode) is integrated in the handpiece, and it is used to provide illumination of the anatomy under examination. The light is transmitted from the LED to the distal tip via two glass fiber light bundles. The raw data captured at the distal tip CMOS imaging sensor is converted to a standard NTSC (National Television System Committee) video signal by the printed circuit board (PCB), also housed in the handpiece. |
|-------------------------|--|
| Intended Use: | The KARL STORZ Flexible Video-Neuro-Endoscope System is intended for providing visualization and access during cranial diagnostic and therapeutic procedures. |
| Indications For Use: | The KARL STORZ Flexible Video-Neuro-Endoscope System is indicated to provide visualization and access during cranial diagnostic and therapeutic procedures such as tumor biopsy and resection, hydrocephalus treatment, endoscopic third ventriculostomy with choroid plexus cauterization (ETV/CPC), endoscopic third ventriculostomy, cyst fenestration, and aqueduct exploration. |



| Technological | Comparison Table | : Subject vs. Predicate Device | | |
|------------------|--------------------------------|---|---|--|
| Characteristics: | | Subject Device | Primary predicate Device, K002788 | |
| | | Flexible Video-Neuro- | KSEA Neuro-Fiberscope | |
| | | Endoscope System | | |
| | | Indication for Use | | |
| | Indications for Use | The KARL STORZ Flexible Video-Neuro-Endoscope System is indicated to provide visualization and access during cranial diagnostic and therapeutic procedures such as tumor biopsy and resection, hydrocephalus treatment, endoscopic third ventriculostomy with choroid plexus cauterization (ETV/CPC), endoscopic third | The Neuro-Fiberscope is indicated for use in viewing the ventricles and cavities of the brain. | |
| | | fenestration, and aqueduct | | |
| | | exploration. | | |
| | | Design | | |
| | Type of scope | Flexible | Same as the subject device | |
| | Distal Tip Diameter | 3.2 mm x 2.4 mm | 3.6 mm | |
| | Outer Shaft Diameter | 2.9 mm | 3.7 mm | |
| | Working Shaft Length | 350 mm | 340 mm | |
| | Working Channel Diameter | 1.2 mm | 1.5 mm | |
| | Deflection (°) | Up: 270 ⁰ | Up: 180 ⁰ | |
| | | Down: 270 ⁰ | Down: 100 ⁰ | |
| | Type of Imager | CMOS chip | Fiberscope | |
| | Material | | | |
| | Shaft Material | Pellethane | polyurethane | |
| | Working Channel Material | PTFE | PTFE | |
| | | Sterilization | | |
| | Sterilization | STERRAD NX "Advanced" Cycle STERRAD 100NX "Flex" or "DUO" Cycle STERIS SYSTEM 1E (SS1E) Standard Programmed Cycle V-PRO maX "Flexible" Cycle V-PRO 60 "Flexible" Cycle Ethylene Oxide (EtO) Gas | EtO Gas | |



| Non-Clinical | Bench Testing Summa | ry | | |
|--------------|--|--|--------|--|
| Performance | Verification Test | Test Method Summary | Result | |
| Data: | Ontical | The test verified optical requirements for field of | Pass | |
| | optical | view, distortion and resolution. | 1 455 | |
| | White Balance and Color Accuracy | The test verified white balance and color accuracy. | Pass | |
| | Temporal and | The test verified that the spatial noise and temporal | Pass | |
| | Spatial Noise | noise does not exceed the limit specified in the device product specification under 'maximum gain' conditions. | | |
| | Minimum Response | The test verified the minimum response | Pass | |
| | | measurement such that the sensitivity of the camera | | |
| | | and the maximum intensity of the internal light | | |
| | | source combine to ensure that the customer, under | | |
| | | bright enough scene to perform surgical functions | | |
| | AE Step Response | The test verified that when the scene changes | Pass | |
| | | suddenly from dark to light the transition does not | | |
| | | have excessive 'ringing' (overshoot and undershoot) | | |
| | | and that the transition happens in an acceptable | | |
| | | amount of time, as defined in the product | | |
| | Evnoguno | specification for the device under test. | Docc | |
| | Brightness | luminance output (brightness level) is within the | 1 488 | |
| | Digititess | acceptable limits for each of the five available | | |
| | | Brightness settings. | | |
| | Illumination | The test verified the functional performance and | Pass | |
| | | light output specification. | | |
| | Mechanical | The test verified the mechanical requirements for dimensions deflection hand radii and weight | Pass | |
| | Camera Head | The test verified that when a user presses the head | Pass | |
| | Button | buttons on an attached videoendoscope the modular | 1 455 | |
| | | system correctly responds. | | |
| | Biocompatibility Summary The biocompatibility evaluation for the patient contacting components of the neuroscope was performed according to ISO 10993-1 and FDA Guidance. The following tests were conducted on the KARL STORZ Flexible Video-Neuro-Endoscope, based contact type and duration: • Cytotoxicity (ISO 10993-5) • Sensitization (ISO 10993-11) • Irritation (ISO 10993-11) • Systemic Toxicity (ISO 10993-10) The biological-toxicological safety of the patient is not affected by the materials used in the tested items. Sterilization Validation Summary Test Test Method Summary | | | |
| | STERRAD NX/100N2 | $X \qquad SAL=10^{-6}, Half cycle method$ | Pass | |
| | V-PRO maX and V-PI | RO 60 SAL=10 ⁻⁶ , Half cycle method | Pass | |
| | STERIS SYSTEM 1E | Complete liquid chemical sterilization | Pass | |
| | 100% Ethylene Oxide | SAL=10 ⁻⁶ , Half cycle method Residuals per ANSI/AAMI/ISO 109937:2008 | Pass | |



| Clinical Performance Data: | Clinical testing was not required to demonstrate the substantial equivalence to the predicate devices. Non-clinical bench testing was sufficient to establish the substantial equivalence of the modifications. |
|----------------------------------|--|
| Conclusion: | The conclusions drawn from the nonclinical tests demonstrate that the subject device, KARL STORZ Flexible Video-Neuro- Endoscope System performs as well as or better than the legally marketed predicate devices, one of which is currently marketed for the same intended use. |