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

Date Prepared: June 17, 2002

510(k) number: <u>K022008</u>

JAN 2 9 2003

Applicant Information:

Cardimal, Inc. 47266 Benicia Street Fremont, CA 94538-7330

Contact Person

Marianne Baldwin

Phone Number:

(510) 354-0330

Fax Number:

(510) 657-4476

Device Information:

Classification:

Class II

Trade Name:

Cardima® Ablation System

Classification Name:

Electrosurgical Cutting and Coagulating Device

Equivalent Device:

The subject device is substantially equivalent in intended use and/or method of operation to the Boston Scientific Electrosurgical Probe (K981981), the AtriCure Bipolar Coagulator (K011722); and the Medtronic Cardioblate Surgical Ablation Pen (K013392).

Intended Use:

The Cardima Ablation System is intended to ablate cardiac tissue during cardiac surgery using radiofrequency energy

Test Results:

Performance

Results of in-vitro testing demonstrate that the Cardima Ablation System is safe and effective for its intended use.

Biocompatibility

The materials used in the Cardima Ablation System meets the requirements of ISO 10993-

Summary: Based on the intended use, product, performance and biocompatability information provided in this notification, the subject device has been shown to be substantially equivalent to the currently marketed predicate devices.



MAR 1 1 2008

Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Cardima, Inc. c/o Robert A. Chin, Ph.D. Regulatory Consultant 25 Hartford Avenue San Carlos, CA 94070

Re: K022008

Trade/Device Name: Cardima Ablation System

Regulation Number: 21 CFR 878.4400

Regulation Name: Electrosurgical cutting and coagulating device and accessories

Regulatory Class: Class II (two)

Product Code: OCL

Dated: November 15, 2002 Received: November 19, 2002

Dear Dr. Chin:

This letter corrects our substantially equivalent letter of January 29, 2003.

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 (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.

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>.

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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); 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.

This letter will allow you to continue marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (240) 276-0120. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). 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 (240) 276-3150 or at its Internet address http://www.fda.gov/cdrh/dsma/dsmamain.html

Sincerely yours,

Bram D. Zuckerman, M.D.

Director

Division of Cardiovascular Devices Office of Device Evaluation Center for Devices and Radiological Health

Enclosure

Indications for Use

510(k) Number (if known):	K022008	
Device Name:	Cardima® Ablation System	
Indications for Use:		
	lima Ablation System is intended to abla urgery using radiofrequency energy	ate cardiac tissue during
(PLEASE DO NOT WRITE BELOW THIS LINE - CONTINUE ON ANOTHER PAGE IF NEEDED)		
Concurrence of CDRH, Office of Device Evaluation (ODE)		
-1000-	Muram C. Provost Evision Sign-Off) Evision of General, Restorative	
and Neurological Devices		
	K622008	
Prescription Use(Per 21 CFR 801 109)	OR Over-t	he Counter Use

(Optional Format 1-2-96)