

**510(K) SUMMARY**

K073433

**SUBMITTED BY:** Becton, Dickinson and Company  
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Sparks, MD 21152  
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**CONTACT NAME:** Vicki K. Whitley  
Regulatory Affairs Specialist

JAN 14 2008

**DATE PREPARED:** December 4, 2007

**DEVICE TRADE NAME:** BD Phoenix™ Automated Microbiology System –  
Piperacillin 2-128 µg/mL

**DEVICE COMMON NAME:** Antimicrobial susceptibility test system-short incubation

**DEVICE CLASSIFICATION:** Fully Automated Short-Term Incubation Cycle Antimicrobial  
Susceptibility Device, 21 CFR 866.1645

**PREDICATE DEVICES:** VITEK® System (PMA No. N50510) and BD Phoenix™  
Automated Microbiology System with Gatifloxacin (K020321,  
May 23, 2002) and Piperacillin (K041572, August 12, 2004).

**INTENDED USE:** The BD Phoenix™ Automated Microbiology System is  
intended for the rapid identification and *in vitro* antimicrobial  
susceptibility testing of isolates from pure culture of most  
aerobic and facultative anaerobic Gram-negative and Gram-  
positive bacteria of human origin.

**DEVICE DESCRIPTION:**

The BD Phoenix Automated Microbiology System (Phoenix System) is an automated system for the rapid identification (ID) and antimicrobial susceptibility testing (AST) of clinically relevant bacterial isolates. The system includes the following components:

- BD Phoenix instrument and software.
- BD Phoenix panels containing biochemicals for organism ID testing and antimicrobial agents for AST determinations.
- BD Phoenix ID Broth used for performing ID tests and preparing AST Broth inoculum.
- BD Phoenix AST Broth used for performing AST tests only.
- BD Phoenix AST Indicator solution added to the AST Broth to aid in bacterial growth determination.

The Phoenix AST method is a broth based microdilution test. The Phoenix system utilizes a redox indicator for the detection of organism growth in the presence of an antimicrobial agent. Measurements of changes to the indicator as well as bacterial turbidity are used in the determination of bacterial growth. Each AST panel configuration contains several antimicrobial agents with a wide range of two-fold doubling dilution concentrations.

The Phoenix panel is a sealed and self-inoculating molded polystyrene tray with 136 micro-wells containing dried reagents. Organisms for susceptibility testing must be a pure culture and preliminarily identified as a Gram-negative or Gram-positive isolate. Phoenix panels are inoculated with a specified organism density and placed in the instrument.

The instrument houses the panels where they are continuously incubated at a nominal temperature of 35°C. The instrument takes readings of the panels every 20 minutes. The readings are interpreted to give an identification of the isolate, minimum inhibitory concentration (MIC) values and category interpretations, S, I, or R (sensitive, intermediate, or resistant).

#### **DEVICE COMPARISON:**

The BD Phoenix™ Automated Microbiology System demonstrated substantially equivalent performance when compared with the CLSI (formerly NCCLS) reference broth microdilution method. This premarket notification provides data supporting the use of the BD Phoenix™ Automated Microbiology System Gram-negative ID/AST or AST only Phoenix panels with this antimicrobial agent.

#### **SUMMARY OF SUBSTANTIAL EQUIVALENCE TESTING:**

The BD Phoenix™ Automated Microbiology System has demonstrated substantially equivalent performance when compared to the CLSI reference broth microdilution method (AST panels prepared according to CLSI M7). The system has been evaluated as defined in the FDA guidance document, “Class II Special Controls Guidance Document: Antimicrobial Susceptibility Test (AST) Systems; Guidance for Industry and FDA”, March 5, 2007.

#### **Site Reproducibility**

Intra- and inter-site reproducibility of this antimicrobial agent in the BD Phoenix System was evaluated at three sites using a panel of Gram-negative isolates. Each site tested the isolates in triplicate on three different days using one lot of Gram-negative Phoenix panels containing this antimicrobial agent and associated reagents.

The results of the study demonstrate for the this antimicrobial agent there was an overall intra-site reproducibility of greater than 90% and an overall inter-site reproducibility greater than 95% for the gram-negative isolates tested.

## **Clinical Studies**

Clinical, stock and challenge isolates were tested across multiple geographically diverse sites across the United States to demonstrate the performance of the Phoenix antimicrobial susceptibility test with the Gram-negative Phoenix panel format containing this antimicrobial agent. Phoenix System results for Challenge set isolates were compared to the expected results. Phoenix System results for clinical isolates were compared to the results obtained from the CLSI reference broth microdilution method.

The performance of the Phoenix System was assessed by calculating Essential Agreement (EA) and Category Agreement (CA) to expected/reference results for all isolates tested. Essential Agreement (EA) occurs when the BD Phoenix™ Automated Microbiology System agrees exactly or within  $\pm$  one two-fold dilution to the reference result. Category Agreement (CA) occurs when the BD Phoenix™ Automated Microbiology System agrees with the reference method with respect to the FDA categorical interpretive criteria (susceptible, intermediate, and resistant).

Table 1 summarizes the performance for the isolates tested in this study.

**Table 1: Performance of BD Phoenix System for Gram-Negative Organisms by Drug**

<b>Antimicrobial</b>	<b>Concentration</b>	<b>EA (n)</b>	<b>EA (%)</b>	<b>CA (n)</b>	<b>CA (%)</b>
Piperacillin	2-128 $\mu$ g/mL	1151	96.1	1151	94.7

## **Conclusions Drawn from Substantial Equivalence Studies**

The data collected from the substantial equivalence studies demonstrate that testing on the BD Phoenix™ Automated Microbiology System with this antimicrobial agent is substantially equivalent as outlined in the FDA guidance document, “Class II Special Controls Guidance Document: Antimicrobial Susceptibility Test (AST) Systems; Guidance for Industry and FDA”, March 5, 2007. Technological characteristics of this system are substantially equivalent to those used in the VITEK® system, which received approval by the FDA under PMA number N50510 and BD Phoenix™ Automated Microbiology System with Gatifloxacin (K020321, May 23, 2002), and Piperacillin (K041572, August 12, 2004).



Ms. Vicki K. Whitley  
Regulatory Affairs Manager  
BD Diagnostic System  
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**JAN 14 2008**

Food and Drug Administration  
2098 Gaither Road  
Rockville MD 20850

Re: k073433  
Trade/Device Name: BD Phoenix™ Automated Microbiology System –(2-128 µg/mL) –  
Gram-Negative ID/AST or AST only Phoenix panels  
Regulation Number: 21 CFR § 866.1645  
Regulation Name: Antimicrobial Susceptibility Test System – Short Incubation  
Regulatory Class: II  
Product Code: LON  
Dated: December 4, 2007  
Received: December 6, 2007

Dear Ms. Whitley:

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.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in Title 21, Code of Federal Regulations (CFR), Parts 800 to 895. In addition, FDA may publish further announcements concerning your device in the Federal Register.

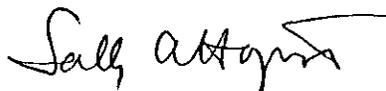
Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Parts 801 and 809); and good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820).

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This letter will allow you to begin 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 In Vitro Diagnostic Device Evaluation and Safety at 240-276-0450. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding postmarket surveillance, please contact CDRH's Office of Surveillance and Biometric's (OSB's) Division of Postmarket Surveillance at 240-276-3474. For questions regarding the reporting of device adverse events (Medical Device Reporting (MDR)), please contact the Division of Surveillance Systems at 240-276-3464. 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/industry/support/index.html>.

Sincerely yours,



Sally A. Hojvat, M.Sc., Ph.D.  
Director  
Division of Microbiology Devices  
Office of *In Vitro* Diagnostic Device  
Evaluation and Safety  
Center for Devices and  
Radiological Health

Enclosure

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Device Name: BD Phoenix™ Automated Microbiology System for use with the antimicrobial agent Piperacillin (2-128 µg/mL) - Gram-Negative ID/AST or AST only Phoenix panels with the removal of the limitations for *Proteus mirabilis*, *Providencia* species and *Stenotrophomonas maltophilia*.

Indications for Use:

The BD Phoenix™ Automated Microbiology System is intended for *in vitro* quantitative determination of antimicrobial susceptibility by minimal inhibitory concentration (MIC) of most Gram-negative aerobic and facultative anaerobic bacteria isolates from pure culture for *Enterobacteriaceae* and Non-*Enterobacteriaceae* and most Gram-positive bacteria isolates from pure culture belonging to the genera *Staphylococcus*, *Enterococcus* and *Streptococcus*.

This premarket notification is for Piperacillin at concentrations of 2-128 µg/mL to Gram-negative ID/AST or AST only Phoenix panels with the removal of the limitations for *Proteus mirabilis*, *Providencia* species and *Stenotrophomonas maltophilia*. Piperacillin has been shown to be active *in vitro* against most strains of microorganisms listed below, as described in the FDA-approved package insert for this antimicrobial agent.

**Active In Vitro and in Clinical Infections Against:**

<i>Acinetobacter</i> species	<i>Klebsiella</i> species	<i>Providencia rettgeri</i>
<i>Enterobacter</i> species	<i>Morganella morganii</i>	<i>Pseudomonas aeruginosa</i>
<i>Escherichia coli</i>	<i>Proteus mirabilis</i>	<i>Serratia</i> species

**Active In Vitro Against:**

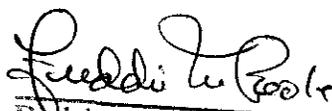
<i>Burkholderia cepacia</i>	<i>Citrobacter freundii</i>	<i>Stenotrophomonas maltophilia</i>
<i>Citrobacter diversus</i>	<i>Pseudomonas fluorescens</i>	<i>Yersinia enterocolitica</i>

Prescription Use    
(Per 21 CFR 801.109)

Over-the-Counter Use

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

Concurrence of CDRH, Office of Device Evaluation (ODE)

  
Division Sign-Off

Office of In Vitro Diagnostic Device  
Evaluation and Safety

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