

MAR 26 2008

**510(k) Summary**  
(As required by 21 CFR 807.92(c))

**510(k) Number:**     K080104    

**Date Prepared**                    January 11, 2008  
**Amended**                            March 13, 2008

**Submitter Information**

**Submitter's Name:**    Vascular Solutions, Inc.  
**Address:**                    6464 Sycamore Court  
   Minneapolis, MN 55369

**Contact Person:**        James Chapman  
   Regulatory Affairs Associate  
   Phone 763-656-4300 x308  
   Fax 763-656-4250

**Device Information**

**Trade Name:**                Vari-Lase® Endovenous Laser Console  
**Common Name:**            Laser Surgical Instrument for use in General and Plastic Surgery and  
   Dermatology  
**Classification Name:**    Laser Surgical Instrument for use in General and Plastic Surgery and  
   in Dermatology  
**Class:**                            II  
**Product Code:**                GEX  
**Regulation:**                    21 CFR 870.4810

**Predicate Devices**

The Vari-Lase 90 Watt Endovenous Laser Console (Model 7542) is substantially equivalent to the Model 430(435) Diode Laser Medart Corporation (a subsidiary of Asah Medico), described in Medart 510(k) K993815 and to the current Vascular Solutions Vari-Lase console described in K062822.

**Device Description**

The Vari-Lase 90 Watt Endovenous Laser Console (Vari-Lase Console) is a software controlled diode laser that provides an output wavelength of 810nm. It may be used in conjunction with a cooling system in certain surface treatment applications.

**Software Validation**

No changes in software were required to accommodate the revised intended use; therefore, additional software validation was not required.

**Intended Use/Indications for Use**

The Vari-Lase® 90W laser console is indicated for use in hair removal (destruction of hair follicles) in skin types I-IV, and for soft tissue applications, such as coagulation of soft tissue, e.g., vascular lesions (visible blood vessels) and in contact mode, for the vaporization, ablation, incision, and excision of soft tissue.

The Vari-Lase® procedure is indicated for the treatment of varicose veins and varicosities associated with superficial reflux in the Great Saphenous Vein and for treatment of incompetence and reflux of superficial veins in the lower extremity.

**Summary of Testing**

No additional testing was completed. MedArt has previously confirmed compliance of these products to the following standards:

Standard	Description
EN60601-1	Medical Electrical Equipment - Part 1: General Requirements For Safety
EN60601-1-1	Medical Electrical Equipment - Part 1: General Requirements For Safety 1: Collateral Standard: Safety Requirements For Medical Electrical Systems
EN60601-2	Medical Electrical Equipment - Part 1-2: General Requirements For Safety - Collateral Standard: Electromagnetic Compatibility - Requirements And Tests
EN60601-1-4	Medical Electrical Equipment - Part 1-4. General Requirements for Safety - Collateral Standard: Programmable Electrical Medical Systems
EN60601-2-22	Medical Electrical Equipment - Part 2: Particular Requirements For safety - Section 2.22: Specification for Diagnostic and Therapeutic Laser Equipment
ISO 13485:2003	Medical Devices - Quality management systems - Requirements for regulatory purposes

**Statement of Equivalence**

The Vari-Lase Endovenous Laser Console and associated cooling system are substantially equivalent to the currently marketed MedArt Model 430(435) Diode Laser (K993815) and the VSI Vari-Lase Endovenous Laser K033237, and based on comparisons of the device classification, indications for use, technological characteristics, and software.

**Conclusion**

The Vari-Lase Endovenous Laser Console and associated cooling system are substantially equivalent to the currently marketed predicate devices based on comparisons of the device classifications, indications for use, technological characteristics, and software.



Food and Drug Administration  
9200 Corporate Boulevard  
Rockville MD 20850

**MAR 26 2008**

Vascular Solutions, Inc.  
% Mr. James Chapman  
Regulatory Affairs Associate  
6464 Sycamore Court  
Minneapolis, Minnesota 55369

Re: K080104

Trade/Device Name: Vari-Lase® 90 Watt Endovenous Laser Console  
Regulation Number: 21 CFR 878.4810  
Regulation Name: Laser surgical instrument for use in general and plastic surgery  
and in dermatology  
Regulatory Class: II  
Product Code: GEX  
Dated: March 13, 2008  
Received: March 14, 2008

Dear Mr. Chapman:

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 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); good manufacturing practice requirements as set

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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 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 Center for Devices and Radiological Health's (CDRH's) Office of Compliance at (240) 276-0115. 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,



Mark N. Melkerson  
Director  
Division of General, Restorative  
and Neurological Devices  
Office of Device Evaluation  
Center for Devices and  
Radiological Health

Enclosure

**Indications for Use Statement**

510(k) Number:     K080104    

**Device Name:**

Vari-Lase® 90 Watt Endovenous Laser Console

**Indications for Use:**

The Vari-Lase® 90W laser console is indicated for use in hair removal (destruction of hair follicles) in skin types I-IV, and for soft tissue applications, such as coagulation of soft tissue, e.g., vascular lesions (visible blood vessels) and in contact mode, for the vaporization, ablation, incision, and excision of soft tissue.

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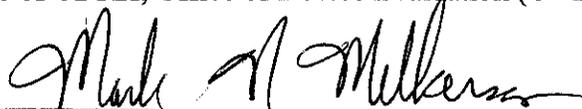
Prescription Use     X      
(Part 21 CFR 801 Subpart D)

AND/OR

Over-The-Counter Use \_\_\_\_\_  
(21 CFR 801 Subpart C)

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

Concurrence of CDRH, Office of Device Evaluation (ODE)



**(Division Sign-Off)**

**Division of General, Restorative,  
and Neurological Devices**

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