

PREMARKET NOTIFICATION

Cordis Corporation

Vista Brite Tip® Catheter

JUL 14 1997

Summary Of Safety And Effectiveness**General Provisions**

The name of the device is:

Proprietary Name	Common or Usual Name
Cordis Vista Brite Tip® Guiding Catheter	Percutaneous Catheter

Predicate Device

The names of the predicate devices are:

- Cordis Vista Brite Tip
- Cordis Endovascular Systems, ENVOY Guiding Catheters
- DVI, Devices for Vascular Intervention

Classification

The FDA has classified guiding catheters as Class II.

Performance Standards

There are no performance standards applicable under Section 514 of the Food, Drug, and Cosmetic Act for Angiographic Catheters.

Indications for Use

The Vista Brite Tip Guiding Catheter is intended for use for intravascular introduction of interventional/diagnostic devices into the coronary, peripheral, and neurovasculature.

Device Description

The Vista Brite Tip Guiding Catheters are single lumen catheters which feature a nylon body with a tightly wound stainless braid wire. The braid wire extends from the hub into the Brite Tip segment. The transition segments of the catheter are designed with nylons of different durometers (stiffness) to provide a gradual decrease in material stiffness from the catheter body to the tip. The Brite Tip segment, located at the catheter's tip, is polyurethane with a radiopaque filler; this is the softest material in the catheter.

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Summary Of Safety And Effectiveness, Continued

Biocompatibility All appropriate biocompatibility tests for the guiding catheters were successfully completed.

Summary of Substantial Equivalence The Cordis Guiding Catheters are similar in design, construction, indication for use, and performance characteristics to other commercially available Cordis guiding catheters.

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¹ Any statement of substantial equivalence to another product is required by 21 CFR 807.87, and relates only to whether the present product can be marketed without prior reclassification or clinical approval. The present submission is therefore not related to the coverage of any patent, and is not to be interpreted as an admission or used as evidence in a patent infringement lawsuit. As the Commissioner of the FDA has stated, "...a determination of substantial equivalence under the federal Food, Drug, and Cosmetic Act relates to the fact that the product can lawfully be marketed without pre-market approval or reclassification. This determination is not intended to have any bearing whatever on the resolution of patent infringement suites." 42 Fed. Reg. 42,520, et seq. (1977).



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Food and Drug Administration
9200 Corporate Boulevard
Rockville MD 20850

Ms. Jacqueline Zimovan
Regulatory Affairs &
Clinical Research Associate
Cordis Corporation
P.O. Box 025700
Miami, Florida 33102-5700

JUL 14 1997

Re: K971572
Cordis Vista Brite Tip Catheters
Regulatory Class: II (two)
Product Code: DQY
Dated: April 29, 1997
Received: April 30, 1997

Dear Ms. Zimovan:

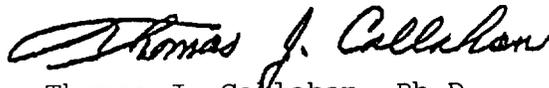
We have reviewed your Section 510(k) notification of intent to market the device referenced above and we have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to devices marketed in interstate commerce prior to May 28, 1976, the enactment date of 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). 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 (Pre-market Approval), 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 895. A substantially equivalent determination assumes compliance with the Current Good Manufacturing Practice requirement, as set forth in the Quality System Regulation (QS) for Medical Devices: General regulation (21 CFR Part 820) and that, through periodic QS inspections, the Food and Drug Administration (FDA) will verify such assumptions. Failure to comply with the GMP regulation may result in regulatory action. In addition, FDA may publish further announcements concerning your device in the Federal Register. Please note: this response to your pre-market notification submission does not affect any obligation you might have under sections 531 through 542 of the Act for devices under the Electronic Product Radiation Control provisions, or other Federal laws or regulations.

This letter will allow you to begin marketing your device as described in your 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 and additionally 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4648. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its internet address "<http://www.fda.gov/cdrh/dsmamain.html>".

Sincerely yours,



Thomas J. Callahan, Ph.D.
Director
Division of Cardiovascular, Respiratory,
and Neurological Devices
Office of Device Evaluation
Center for Devices and
Radiological Health

Enclosure

INDICATIONS FOR USE

510(K) Number (if known): [To be assigned by the FDA]

Device Name: Vista Brite Tip® Guiding Catheter

Indications for Use: The guiding catheter is intended for use for intravascular introduction of interventional/diagnostic devices into the coronary, peripheral, and neurovasculature.

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

Concurrence of CDRH, Office of Device Evaluation (ODE)

Tara A. Ryan

(Division Sign-Off)
Division of Cardiovascular, Respiratory,
and Neurological Devices

510(k) Number K971572

Prescription Use ✓
(Per 21 CFR 801.109)

OR

Over-The Counter Use _____