SUMMARY OF SAFETY AND EFFECTIVENESS

(As required by 21 CFR 807.92)

1. General Information

Classification:

Class II

Magnetic Resonance Imaging (MRI) System

Common/Usual Name:

Magnetic Resonance Imaging (MRI) Option

Proprietary Name:

iPass Bolus Tracking

Establishment Registration:

Picker International, Inc. World Headquarters

595 Miner Road Highland Heights, Ohio 44143 Contact: Elaine K. Keeler, Ph.D

Phone: (440) 473-3000

FDA Owner Number: #1580240 FDA Registration Number: #1525965

Performance Standards:

No applicable performance standards have been issued under section 514 of the Food, Drug and

Cosmetic Act.

2. Intended Uses

The iPass Bolus Tracking option does not change the existing intended use and indications for the Eclipse/Polaris systems as defined below.

The Picker International Eclipse/Polaris systems are indicated for use as a NMR device that produces images that: (1) correspond to the distribution of protons exhibiting NMR, (2) depend upon the NMR parameters (proton density, flow velocity, spin-lattice relaxation time (T1), and spin-spin relaxation time (T2)) and (3) display the soft tissue structure of the head and whole body. When interpreted by a trained physician, these images yield information that can be useful in the determination of a diagnosis.

3. Device Description

The Picker iPass Bolus Tracking option improves image quality by coordinating the arrival of the contrast agent with the collection of the data for the center of k-space. The option also includes an auto-voice feature to assist the technician in communicating with the patient.

4. Safety and Effectiveness

The Picker iPass Bolus Tracking option is similar in technological characteristics and intended use to the Picker Eclipse/Polaris system. The following table has been created to demonstrate their substantial equivalence.

Substantial Equivalence Chart

Parameter	iPass Bolus Tracking	Predicate Device - Eclipse / Polaris system (K964626)
Sequence Capabilities / Requirements	Same.	2D RF-FAST sequence, Volume contrast enhanced angio sequence.
Simulate Scan Feature	Same simulate-scan feature is now also used to improve image quality of contrast enhanced angiography scans.	Software uses a simulate-scan feature to improve image quality of single-shot EPI sequences.
ROI Analysis	Software automatically calculates average pixel intensity of the ROI and reports when a 30% increase in this value occurs.	User can draw a ROI and calculate the average pixel intensity. This manual analysis can be repeated on a series of scans to determine when an increase occurs.
Bolus Arrival Time Calculation	Software automatically calculates arrival time based on ROI analysis. Manual override is possible.	User manually determines arrival time based on ROI analysis.
Intercom Capabilities	AutoVoice feature instructs the patient and/or technician during scan.	Technician can communicate with the patient via intercom during scan.
Intended Use and Indications for Use	Same.	The Picker International Eclipse/Polaris systems are indicated for use as a NMR device that produces images that: (1) correspond to the distribution of protons exhibiting NMR, (2) depend upon the NMR parameters (proton density, flow velocity, spin-lattice relaxation time (T1), and spin-spin relaxation time (T2)) and (3) display the soft tissue structure of the head and whole body. When interpreted by a trained physician, these images yield information that can be useful in the determination of a diagnosis.



AUG 1 7 1999

Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Elaine K. Keeler, Ph.D. Manager, Clinical Science Picker International, Inc. World Headquarters 595 Miner Road Cleveland, Ohio 44143 Re: K992412

iPass Bolus Tracking MRI System

Dated: July 15, 1999 Received: July 20, 1999 Regulatory Class: II

21 CFR 892.1000/Procode: 90 LNH

Dear Dr. Keeler:

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 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). 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 (Premarket Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the <u>Code of Federal Regulations</u>, Title 21, Parts 800 to 895. A substantially equivalent determination assumes compliance with the Current Good Manufacturing Practice requirements, 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 <u>Federal Register</u>. Please note: this response to your premarket 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) 594-4613. 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/dsma/dsmamain.html".

Sincerely yours,

CAPT Daniel G. Schultz, M.D.

Acting Director, Division of Reproductive,

Abdominal, Ear, Nose and Throat,

and Radiological Devices Office of Device Evaluation Center for Devices and

Radiological Health

510(k) Number (if k	(nown):
Device Name: iP	ass Bolus Tracking
Indications for Use:	
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Co	oncurrence of CDRH, Office of Device Evaluation (ODE)
•	yound by Seaton
	(Division Sign-Off)
	Division of Reproductive, Abdominal, ENT, and Radiological Devices
	510(k) Number <u>K9924/Z</u>
Prescription Use 🗸	OR Over-The-Counter Use
(Per 21 CFR 801.109	