## 510(k) Summary Prepared July 15, 2013

JAN 2 4 2014

**Sponsor:** Hospi Corporation

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**Submission Date:** July 15, 2013

Device Name: Macy Catheter

Common Name: Rectal Catheter

Classification:

Regulatory Class: II

Review Category: 21 CFR Gastrointestinal Tube and Accessories

(ref. 21 CFR 876.5980

Classification Panel: Gastroenterology/Urology

### A. Legally Marketed Predicate Devices

The Macy Catheter is substantially equivalent to the Indwelling Fecal Management System- Non-Sterile, (IFMS) manufactured by Bowel Management Systems (K023344).

#### **B.** Device Description

The Macy Catheter has been designed for comfort and safety by utilizing a flexible silicone body that enables administration of liquids/medications to the rectum. The device has two lumens, one for administering the liquids/medications and the other for inflation of the retention balloon. The catheter is inserted into the rectum and a small, soft retention balloon is inflated with water via the inflation valve. Liquids/medications are delivered via the medication valve, through the catheter, and into the rectum. The retention balloon can be easily deflated for removal of the catheter. The Macy Catheter remains in the rectum until expelled upon defecation (or removed for defecation if the patient prefers).

#### C. Intended Use

The Macy Catheter is intended to provide rectal access to administer liquids/medications.

## D. Substantial Equivalence

The submission device is substantially equivalent to the Indwelling Fecal Management System- Non-Sterile (IFMS) manufactured by Bowel Management Systems (K023344).

Feature	Predicate Device	Subject Device
reature	Indwelling Fecal Management System-	Macy Catheter
	Non-Sterile	Wacy Cameter
İ	(IFMS by Bowel Management	
T 12 C	Systems) K023344	TI M. C. I.
Indication for use	Diversion of fecal matter to minimize	The Macy Catheter is intended
	external contact with the patient, to	to provide rectal access to
	facilitate the collection of fecal matter	administer
	for patients requiring stool	liquids/medications.
•	management, and to provide access for	
	colonic irrigation to trigger a	
İ	defecatory response, and administration	
	of enemas/medication.	
Intended Users	Healthcare Professionals	Healthcare Professionals
Class	II	16
Regulation number	21CFR 876.5980	21CFR 876.5980
Code	KNT	KNT
Catheter and lumen	Silicone	Silicone,
material		Compliant with ISO 10993
Retention Balloon	35-40ml water inflated silicone	15 ml water inflated silicone
1	balloon, 2.08 inch outer diameter when	balloon, 1.1 inch outer
†	inflated. Positioned adjacent to	diameter when inflated.
1	sphineter in distal rectum.	Positioned adjacent to
		sphincter in distal rectum.
Administration of	Silicone lumen with flared caped port	Silicone lumen with valved
Liquids/	termination.	port for enteral/oral syringe.
Medications		<u></u>
Insertion Diameter	1.2 inches nominal	0.29 inches maximum
Fecal drainage	Yes	No
lumen and stop-		
flow balloon		
Safety features	Not specified in device labeling	Compliant with ISO 80369-1
		minimizing risks of
	_	misconnection. Retention
	·	balloon, smaller than most
		formed stool, can be expelled
		with defecation; meets
	1	applicable test criteria of
		Standard Test Methods for
		Enteral Feeding devices with
		Retention Balloon.
Single use	Yes	Yes
Sterile	No	No
Length	64.5 Inches	20 Inches
Lengto	UT.5 THORES	20 menes

## E. Performance Data

Bench testing was conducted on the device to verify that it met design specification established under the Design Control Process with successful results. The performance

verification test results are provided in the submission under the section on Performance Data, Section 18. Biocompatibility testing was conducted in compliance with applicable parts of ISO 10993 as determined by ISO 10993 Part 1. Biocompatibility test reports are provided in the submission under the section on Biocompatibility Testing, Section 15.

The nonclinical tests submitted, referenced, or relied on in the 510(k) for a determination of substantial equivalence include:

- Mechanical verification testing including ASTM F 2528-06 test methods (for example balloon and shaft size, balloon integrity and reliability via balloon volume maintenance and balloon burst volume tests, device tensile strength, lumen patency and flow rate, balloon and shaft mechanical properties).
- Packaging and shipping stress simulations
- Verification of design features intended to mitigate mistaken connections per ISO 80369-1.
- GLP test results for applicable biocompatibility testing. Test reports included are:
  - o Cytotoxicity—medication valve as fabricated, leveraged catheter test article of identical fabrication but slightly different geometry and sterile.
  - o Sensitization—medication valve as fabricated, leveraged catheter test article of identical fabrication but slightly different geometry and sterile.
  - o Irritation—medication valve as fabricated, leveraged catheter test article of identical fabrication but slightly different geometry and sterile.
  - o Systemic toxicity (acute)—catheter portion as fabricated.
  - o Sub-chronic toxicity (sub-acute)—leveraged catheter test article of identical fabrication but slightly different geometry and sterile.
  - o Genotoxicity—leveraged catheter test article of identical fabrication but slightly different geometry and sterile.
  - o Muscle Implantation (test for local effects after implantation, 4 week)—test coupons cut from catheter as fabricated.

The results of the tests performed demonstrate that the device is as safe, as effective, and performs at least as safely and effectively as the legally marketed device identified in Part A of this summary.



Food and Drug Administration 10903 New Hampshire Avenue Document Control Center – WO66-G609 Silver Spring, MD 20993-0002

January 24, 2014

Hospi Corporation % Mark Job Responsible Third Party Official Regulatory Technology Services LLC 1394 25<sup>th</sup> Street NW Buffalo, MN 55313

Re: K133881

Trade/Device Name: Macy Catheter Regulation Number: 21 CFR§ 876.5980

Regulation Name: Gastrointestinal tube and accessories

Regulatory Class: II
Product Code: KNT
Dated: January 8, 2014
Received: January 10, 2014

Dear Mark Job,

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. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

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>.

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); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); 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.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please go to <a href="http://www.fda.gov/AboutFDA/CentersOffices/CDRH/CDRHOffices/ucm115809.htm">http://www.fda.gov/AboutFDA/CentersOffices/CDRH/CDRHOffices/ucm115809.htm</a> for the Center for Devices and Radiological Health's (CDRH's) Office of Compliance. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to

http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

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 (301) 796-7100 or at its Internet address <a href="http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm">http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm</a>.

Sincerely yours,

# Herbert P. Lerner -S

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Benjamin R. Fisher, Ph.D.
Director
Division of Reproductive, Gastro-Renal,
and Urological Devices
Office of Device Evaluation
Center for Devices and Radiological Health

Enclosure

#### **Indications For Use**

510(k) Number (if known): K133881

Device Name: Macy Catheter

Indications for Use: The Macy Catheter is intended to provide rectal access to administer

liquids/medications.

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 OF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)

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