DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

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

January 27, 2016

AtriCure, Inc.
Mr. Jonathan McElwee
Senior Regulatory Specialist
6217 Centre Park Drive
West Chester, Ohio 45069

Re: K153500
Trade/Device Name: AtriClip LAA Exclusion System with Preloaded Gillinov-Cosgrove Pro-V Clip
Regulation Number: 21 CFR 878.4300
Regulation Name: Implantable Clip
Regulatory Class: Class II
Product Code: FZP
Dated: December 4, 2015
Received: December 7, 2015

Dear Mr. McElwee:

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 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); 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 contact the Division of Industry and Consumer Education at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR 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 Industry and Consumer Education at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm.

Sincerely yours,

for

Bram D. Zuckerman, M.D.
Director
Division of Cardiovascular Devices
Office of Device Evaluation
Center for Devices and Radiological Health

Enclosure

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Food and Drug Administration

Indications for Use

Form Approved: OMB No. 0910-0120
Expiration Date: January 31, 2017
See PRA Statement below.

510(k) Number *(if known)*

K153500

Device Name

AtriClip LAA Exclusion System with Gillinov-Cosgrove PRO·V Clip

Indications for Use *(Describe)*

The AtriClip™ LAA Exclusion System is indicated for the occlusion of the heart's left atrial appendage, under direct visualization, in conjunction with other open cardiac surgical procedures.

Direct visualization, in this context, requires that the surgeon is able to see the heart directly, without assistance from a camera, endoscope, etc., or any other viewing technology. This includes procedures performed by sternotomy (full or partial) as well as thoracotomy (single or multiple).

Type of Use *(Select one or both, as applicable)*

☒ Prescription Use (Part 21 CFR 801 Subpart D) ☐ Over-The-Counter Use (21 CFR 801 Subpart C)

CONTINUE ON A SEPARATE PAGE IF NEEDED.

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510(k) Summary

I. Submitter

Manufacturer: AtriCure, Inc.
6217 Centre Park Dr.
West Chester, OH 45069
P: 513-755-4100
F: 513-755-4108

Contact Person: Jonathan McElwee, RAC
Senior Regulatory Specialist

Alternate Contact: Jim Taufen
Sr. Manager of Regulatory Affairs

Date Prepared: 12/4/2015

II. Device

Name of Device: AtriClip® LAA Exclusion System with Preloaded Gillinov-Cosgrove® PRO·V™ Clip

Common Name: Implantable Clip and Clip Applier

Classification Name: Implantable Clip and Clip Applier (21 CFR 878.4300)

Regulatory Class: Class II

Product Code: FZP

III. Predicate Device

The primary predicate device, AtriClip LAA Exclusion System with preloaded Gillinov-Cosgrove Clip, was cleared via 510(k) K122276 on August 29, 2012 under the Product Code FZP.

The predicate device has not been subject to a design-related recall.

The following reference devices were also used in this submission:

- K093679 AtriClip LAA Exclusion System with Preloaded Gillinov-Cosgrove Clip
- K131107 AtriClip LAA Exclusion System with Preloaded Gillinov-Cosgrove Clip
- K142120 AtriClip LAA Exclusion System with Preloaded Gillinov-Cosgrove Clip
- K150996 AtriClip LAA Exclusion System with Preloaded Gillinov-Cosgrove Clip

IV. Device Description

The AtriClip LAA Exclusion System consists of a single use, sterile, self-closing, implantable PRO·V Clip preloaded on a Single Use Clip Applier. When closed, the PRO·V Clip applies uniform pressure over the length of the clip to ensure consistent, reproducible, and secure occlusion of the left atrial appendage (LAA). The PRO·V Clip is available in the following lengths to accommodate different sizes of LAA: 35 mm (PROV35), 40 mm (PROV40), 45 mm (PROV45), and 50 mm (PROV50).

The PRO·V Clip Applier is a disposable device with a handle, shaft, suture anchors, and deployment loop which contains the PRO·V Clip.

V. Indications For Use

The AtriClip LAA Exclusion System is indicated for the occlusion of the heart's left atrial appendage, under direct visualization, in conjunction with other open cardiac surgical procedures.

Direct visualization, in this context, requires that the surgeon is able to see the heart directly, without assistance from a camera, endoscope, etc., or any other viewing technology. This includes procedures performed by sternotomy (full or partial as well as thoracotomy (single or multiple)).

VI. Comparison Of Technological Characteristics With The Predicate Device

- Same intended use
- Same operating principle
- No changes were made in operating principle, or specifications of performance
- The same force profile
- The same pressure profile
- The contact shape and appendage surface area are the same;
- The knit braided polyester is the same as that in the predicate device;
- The PRO·V Clip is made out of titanium and polyester. The predicate Clip is made of titanium, polyester, nitinol, and carbothane. Biocompatibility of the PRO·V device remains the same.
- The same Gamma sterilization parameters

VII. Performance Data

Animal Study

AtriCure conducted a preclinical chronic animal study per 21 CFR Part 58 to evaluate the safety and performance of the PRO·V System in a live cardiac tissue model and to compare performance to the predicate Clip device. Safety results demonstrated that there were no adverse events or complications associated with the use of the device or the exclusion procedure.

Additional testing per 21 CFR 820.30 and AtriCure's Quality System was performed to verify PRO·V device's conformance to design controls and specification. Testing determined that the PRO·V device conformed to design controls and product specifications.

Non-clinical Bench Testing

- Mechanical Testing
- Reliability Testing
- Leak Testing
- Corrosion Testing
- Magnetic Resonance Testing – Per FDA Guidance (December 11, 2014) Establishing Safety and Compatibility of Passive Implants in the Magnetic Resonance (MR) Environment
- Bench Testing on an Animal Model

Biocompatibility Testing

The biocompatibility evaluation for the PRO·V Clip and Clip Applier was conducted in accordance with the International Standard ISO 10993-1 "Biological Evaluation of Medical Devices – Part 1:

Evaluation and Testing Within a Risk Management Process" as recognized by FDA. The battery of testing included the following tests:

- Cytotoxicity
- Sensitization
- Irritation
- Systemic Toxicity
- Material Mediated Pyrogen
- Genotoxicity

The PRO·V Clip is categorized as an "Implant Device", contact for "Tissue/Bone" and permanent contact duration of "greater than 30 days". The PRO·V Clip Applier is categorized as an "External Communicating Device," contact for "Tissue/Bone" and contact duration for "under 24 hours."

VIII. Conclusions

Based on the indications for use, technological characteristics, and safety and performance testing, the proposed AtriClip LAA Exclusion System with Preloaded Gillinov-Cosgrove PRO·V Clip has been shown to be appropriate for its intended use and is considered to be substantially equivalent to the AtriClip LAA Exclusion System (PRO1) previously cleared via 510(k) K122276 on August 29, 2012.