



April 21, 2023

Medtronic MiniMed, Inc.
Christina Rowe
Senior Manager, Regulatory Affairs
18000 Devonshire Street
Northridge, CA 91325-1219

Re: P160017/S091

Trade/Device Name: MiniMed 780G System

Product Code: OZP

Filed: May 10, 2021

Amended: May 10, 2021; June 30, 2021; August 18, 2021; February 16, 2022; October 3, 2022

Dear Christina Rowe:

The Center for Devices and Radiological Health (CDRH) of the Food and Drug Administration (FDA) has completed its review of your premarket approval application (PMA) supplement for the MiniMed 780G System for modifications to the SmartGuard Technology and for expanding the indications for use to include the Guardian 4 Sensor. This device is indicated for the following:

780G System with Guardian Sensor (3) & Guardian Link (3) Transmitter

The MiniMed 780G system is intended for continuous delivery of basal insulin at selectable rates, and the administration of insulin boluses at selectable amount for the management of type 1 diabetes mellitus in persons seven years of age and older requiring insulin. The system is also intended to continuously monitor glucose values in the fluid under the skin. The MiniMed 780G system includes SmartGuard (SG) technology, which can be programmed to automatically adjust insulin delivery based on continuous glucose monitoring (CGM) sensor glucose values and can suspend delivery of insulin when the SG value falls below or is predicted to fall below predefined threshold values.

The MiniMed 780G system consists of the following devices:

- MiniMed 780G insulin pump
- Guardian Link (3) transmitter
- Guardian Sensor (3)
- One-press serter
- Accu-Chek™ Guide Link blood glucose meter
- Accu-Chek™ Guide Test Strips

The system requires a prescription from a healthcare professional.

Guardian Sensor (3)

The Guardian Sensor (3) is intended for use with the MiniMed 780G system, MiniMed 770G system, MiniMed 670G system, MiniMed 630G system, and Guardian Connect system to continuously monitor

glucose levels in persons with diabetes. The sensor is intended for single use and requires a prescription. The Guardian Sensor (3) is indicated for seven days of continuous use.

The Guardian Sensor (3) is not intended to be used directly to make therapy adjustments while the MiniMed 780G system is operating in manual mode. All therapy adjustments in manual mode should be based on measurements obtained using a blood glucose meter and not on values provided by the Guardian Sensor (3).

The Guardian Sensor (3) has been studied and is approved for use in the systems, insertion sites, and ages listed in the following table:

System	Approved Age	Sensor Insertion Site
MiniMed 780G system	7- 13 14 and older	Abdomen and Buttocks Abdomen and Arm
MiniMed 770G system	2-13 14 and older	Abdomen and Buttocks Abdomen and Arm
MiniMed 670G system	7-13 14 and older	Abdomen and Buttocks Abdomen and Arm
MiniMed 630G system	14 and older	Abdomen and Arm
Guardian Connect system	14 and older	Abdomen and Arm

One-press Serter

The serter is used as an aid for inserting the sensor. It is indicated for single-patient use and is not intended for multiple patient use.

Guardian Link (3) Transmitter

The Guardian Link (3) transmitter is intended for use with the MiniMed 780G system. The Guardian Link (3) transmitter powers the glucose sensor, collects, and calculates sensor data, and wirelessly sends the data to the MiniMed 780G insulin pump. The transmitter is intended for single-patient multi-use.

Accu-Chek™ Guide Link Blood Glucose Monitoring System

The Acc-Chek™ Guide Link Blood Glucose Monitoring System is comprised of the Accu-Chek™ Guide Link meter and the Accu-Chek™ Guide test strips. The Accu-Chek™ Guide Link Blood Glucose Monitoring System is intended to quantitatively measure glucose in fresh capillary whole blood from the fingertip, palm, and upper arm as an aid in monitoring the effectiveness of glucose control. The Accu-Chek™ Guide Link Blood Glucose Monitoring System is intended for in vitro diagnostic single-patient use by people with diabetes. The Accu-Chek™ Guide Link Blood Glucose Monitoring System is intended to be used by a single person and should not be shared. This system is not for use in diagnosing or screening for diabetes mellitus and not for neonatal use. Alternative site testing should be done only during steady-state times (when glucose is not changing rapidly). The Accu-Chek™ Guide Link Blood Glucose Monitoring System is intended to be used to wirelessly transmit glucose values to the MiniMed 780G system and MiniMed 770G system with Bluetooth wireless technology through the use of Bluetooth low energy communication.

780G System with Guardian 4 Sensor & Guardian 4 Transmitter

The MiniMed 780G system is intended for continuous delivery of basal insulin at selectable rates, and the administration of insulin boluses at selectable amount for the management of type 1 diabetes mellitus in persons seven years of age and older requiring insulin. The system is also intended to continuously monitor glucose values in the fluid under the skin. The MiniMed 780G system includes SmartGuard (SG) technology, which can be programmed to automatically adjust insulin delivery based on continuous glucose monitoring (CGM) sensor glucose values and can suspend delivery of insulin when the SG value falls below or is predicted to fall below predefined threshold values.

The MiniMed 780G system consists of the following devices:

- MiniMed 780G insulin pump
- Guardian 4 transmitter
- Guardian 4 sensor
- One-press serter
- Accu-Chek™ Guide Link blood glucose meter
- Accu-Chek™ Guide Test Strips

The system requires a prescription from a healthcare professional.

Guardian 4 Sensor

The Guardian 4 Sensor is intended for use with the MiniMed 780G system and the Guardian 4 transmitter to continuously monitor glucose levels for the management of diabetes. The sensor is intended for single use and requires a prescription. The Guardian 4 sensor is indicated for up to seven days of continuous use.

The Guardian 4 sensor is not intended to be used directly to make therapy adjustments while the MiniMed 780G is operating in manual mode. All therapy adjustments in manual mode should be based on measurements obtained using a blood glucose meter and not on values provided by the Guardian 4 sensor.

The Guardian 4 sensor has been studied and is approved for use in the systems, insertion sites, and ages listed in the following table.

System	Age	Sensor Insertion Site
MiniMed 780G system	7 years and older	Arm

One-press Serter

The serter is used as an aid for inserting the sensor. It is indicated for single-patient use and is not intended for multiple patient use.

Guardian 4 Transmitter

The Guardian 4 transmitter is intended for use with the MiniMed 780G system and Guardian 4 sensor to monitor glucose levels for the management of diabetes.

Accu-Chek™ Guide Link Blood Glucose Monitoring System

The Acc-Chek™ Guide Link Blood Glucose Monitoring System is comprised of the Accu-Chek™ Guide Link meter and the Accu-Chek™ Guide test strips. The Acc-Chek™ Guide Link Blood Glucose Monitoring System is intended to quantitatively measure glucose in fresh capillary whole blood from the fingertip, palm,

and upper arm as an aid in monitoring the effectiveness of glucose control. The Accu-Chek™ Guide Link Blood Glucose Monitoring System is intended for in vitro diagnostic single-patient use by people with diabetes. The Accu-Chek™ Guide Link Blood Glucose Monitoring System is intended to be used by a single person and should not be shared. This system is not for use in diagnosing or screening for diabetes mellitus and not for neonatal use. Alternative site testing should be done only during steady-state times (when glucose is not changing rapidly). The Accu-Chek™ Guide Link Blood Glucose Monitoring System is intended to be used to wirelessly transmit glucose values to the MiniMed 780G system and MiniMed 770G system with Bluetooth wireless technology through the use of Bluetooth low energy communication.

We are pleased to inform you that the PMA supplement is approved. You may begin commercial distribution of the device in accordance with the conditions of approval described below. Although this letter refers to your product as a device, please be aware that some approved products may instead be combination products. The Premarket Approval Database located at <https://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfPMA/pma.cfm> identifies combination product submissions.

The sale and distribution of this device are restricted to prescription use in accordance with 21 CFR 801.109 and under section 515(d)(1)(B)(ii) of the Federal Food, Drug, and Cosmetic Act (the act). The device is further restricted under section 515(d)(1)(B)(ii) of the act insofar as the labeling must specify the specific training or experience practitioners need in order to use the device. In addition, the device is restricted under section 515(d)(1)(B)(ii) of the act in that the following statement must appear prominently and conspicuously in all advertising and promotional materials for this device, as well as prominently and conspicuously immediately following the Indications for Use statement in the Operators Manual that is to be distributed with the device:

WARNING: Do not use the SmartGuard feature for people who require less than eight units or more than 250 units of total daily insulin per day. A total daily dose of at least eight units, but no more than 250 units, is required to use the SmartGuard feature.

FDA has determined that these restrictions on sale and distribution are necessary to provide reasonable assurance of the safety and effectiveness of the device. Your device is therefore a restricted device subject to the requirements in sections 502(q) and (r) of the act, in addition to the many other FDA requirements governing the manufacture, distribution, and marketing of devices.

Expiration dating for this device has been established and approved at 12 months at storage conditions between 36°F to 80°F. This is to advise you that the protocol you used to establish this expiration dating is considered an approved protocol for the purpose of extending the expiration dating as provided by 21 CFR 814.39(a)(7).

Continued approval of the PMA is contingent upon the submission of periodic reports, required under 21 CFR 814.84, at intervals of one year (unless otherwise specified) from the date of approval of the original PMA. This report, identified as "Annual Report" and bearing the applicable PMA reference number, should be submitted to the address below. The Annual Report should indicate the beginning and ending date of the period covered by the report and should include the information required by 21 CFR 814.84.

In addition to the above, and in order to provide continued reasonable assurance of the safety and effectiveness of the PMA device, the Annual Report must include, separately for each model number (if applicable), the number of devices sold and distributed during the reporting period, including those distributed to distributors. The distribution data will serve as a denominator and provide necessary context for FDA to ascertain the frequency and prevalence of adverse events, as FDA evaluates the continued safety and effectiveness of the device.

You must obtain approval of your post-approval study (PAS) protocol(s) within 60 days from the date of this order. Within 30 days of your receipt of this letter, you must submit a PMA supplement that includes a complete protocol of your post-approval study described below. Your PMA supplement should be clearly labeled as "OHT7 PMA Post-Approval Study Protocol" as noted below and submitted to the address below. Please reference the PMA number above to facilitate processing. If there are multiple protocols being finalized after PMA approval, please submit each protocol as a separate PMA supplement. In addition to the Annual Report requirements, you must provide the following data in post-approval study (PAS) reports for each PAS listed below.

1. The MiniMed 780G Post Approval Study is a new enrollment study intended to collect additional information regarding safety of the 780G system following FDA approval and commercial launch of the system within the United States (US). Information collected will include insulin delivery and glycemic control information based on data uploaded from the pump and sensor in Auto Mode, as well as adverse events, device deficiencies, and glycosylated hemoglobin (A1C) levels reported by the pump user or their parent or guardian. Your PAS program will utilize the 780G pump's Bluetooth technology that automatically uploads device data to a cloud server via the user's phone when the patient is using a compatible device. Patients must agree to the automatic uploads and have internet connectivity to participate in the study. In addition, a survey will be sent to participants (or their parents or adult guardians) every month (e.g., via an application on their phone) to collect information on adverse events, A1C and device deficiencies. You have proposed a minimum of 2,000 US participants, ages 7 and older, and to continue the program until at least one year of follow up data has been collected for study subjects. You anticipate the program to last approximately 24 months from enrollment of the first individual.

From the date of study protocol approval, you must meet the following timelines for your PAS:

- First subject enrolled within 6 months
- 20% of subjects enrolled within 12 months
- 50% of subjects enrolled within 18 months
- 100% of subjects enrolled within 24 months

In addition, you must submit separate periodic reports on the progress of your PAS as follows:

- PAS Progress Reports every six (6) months until subject enrollment has been completed, and annually thereafter, from the date of the PMA approval letter, unless otherwise specified by FDA.
- If any enrollment milestones are not met, you must begin submitting quarterly enrollment status reports every 3 months in addition to your periodic (6-month) PAS Progress Reports, until FDA notifies you otherwise.

- Submit the Final PAS Report three (3) months from study completion (i.e., last subject's last follow-up date).

Each PAS report should be submitted to the address below identified as a "PMA Post-Approval Study Report" in accordance with how the study is identified above and bearing the applicable PMA reference number.

Be advised that failure to comply with any post-approval requirement, including initiation, enrollment, and completion of the study, constitutes grounds for FDA withdrawal of approval of the PMA in accordance with 21 CFR 814.82(c) and 814.46(a)(2).

Be advised that the failure to conduct any such study in compliance with the good clinical laboratory practices in 21 CFR part 58 (if a non-clinical study subject to part 58) or the institutional review board regulations in 21 CFR part 56 and the informed consent regulations in 21 CFR part 50 (if a clinical study involving human subjects) may be grounds for FDA withdrawal of approval of the PMA in accordance with 21 CFR 814.46(a)(3)-(4).

Be advised that protocol information, interim and final results will be published on the Post-Approval Studies Program Database Webpage

https://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfPMA/pma_pas.cfm.

In addition, the results from any post approval study should be included in the labeling as these data become available. Any updated labeling must be submitted to FDA in the form of a PMA Supplement. For more information on post-approval studies, see the FDA guidance document entitled, "Procedures for Handling Post-Approval Studies Imposed by Premarket Approval Application Order"

(<https://www.fda.gov/media/71327/download>).

This is a reminder that as of September 24, 2014, class III devices are subject to certain provisions of the final Unique Device Identification (UDI) rule. These provisions include the requirement to provide a UDI on the device label and packages (21 CFR 801.20), format dates on the device label in accordance with 21 CFR 801.18, and submit data to the Global Unique Device Identification Database (GUDID) (21 CFR 830 Subpart E). Additionally, 21 CFR 814.84 (b)(4) requires PMA annual reports submitted after September 24, 2014, to identify each device identifier currently in use for the subject device, and the device identifiers for devices that have been discontinued since the previous periodic report. It is not necessary to identify any device identifier discontinued prior to December 23, 2013. Combination Products may also be subject to UDI requirements (see 21 CFR 801.30). For more information on these requirements, please see the UDI website, <https://www.fda.gov/medical-devices/device-advice-comprehensive-regulatory-assistance/unique-device-identification-udi-system>.

Before making any change affecting the safety or effectiveness of the PMA device, you must submit a PMA supplement or an alternate submission (30-day notice) in accordance with 21 CFR 814.39. All PMA supplements and alternate submissions (30-day notice) must comply with the applicable requirements in 21 CFR 814.39. For more information, please refer to the FDA guidance document entitled, "Modifications to Devices Subject to Premarket Approval (PMA) - The PMA Supplement Decision-Making Process"

<https://www.fda.gov/media/81431/download>.

You are reminded that many FDA requirements govern the manufacture, distribution, and marketing of devices. For example, in accordance with the Medical Device Reporting (MDR) regulation, 21 CFR 803.50 and 21 CFR 803.52 for devices or post-marketing safety reporting (21 CFR 4, Subpart B) for combination products, you are required to report adverse events for this device. Manufacturers of medical devices, including in vitro diagnostic devices, are required to report to FDA no later than 30 calendar days after the day they receive or otherwise becomes aware of information, from any source, that reasonably suggests that one of their marketed devices:

1. May have caused or contributed to a death or serious injury; or
2. Has malfunctioned and such device or similar device marketed by the manufacturer would be likely to cause or contribute to a death or serious injury if the malfunction were to recur.

Additional information on MDR, including how, when, and where to report, is available at <https://www.fda.gov/medical-devices/medical-device-safety/medical-device-reporting-mdr-how-report-medical-device-problems> and on combination product post-marketing safety reporting is available at (see <https://www.fda.gov/combination-products/guidance-regulatory-information/postmarketing-safety-reporting-combination-products>).

In accordance with the recall requirements specified in 21 CFR 806.10 for devices or the post-marketing safety reporting requirements (21 CFR 4, Subpart B) for combination products, you are required to submit a written report to FDA of any correction or removal of this device initiated by you to: (1) reduce a risk to health posed by the device; or (2) remedy a violation of the act caused by the device which may present a risk to health, with certain exceptions specified in 21 CFR 806.10(a)(2). Additional information on recalls is available at <https://www.fda.gov/safety/recalls-market-withdrawals-safety-alerts/industry-guidance-recalls>.

CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading. CDRH will notify the public of its decision to approve your PMA by making available, among other information, a summary of the safety and effectiveness data upon which the approval is based. The information can be found on the FDA CDRH Internet Home Page located at <https://www.fda.gov/medical-devices/device-approvals-denials-and-clearances/pma-approvals>. Written requests for this information can also be made to the Food and Drug Administration, Dockets Management Branch, (HFA-305), 5630 Fishers Lane, Rm. 1061, Rockville, MD 20852. The written request should include the PMA number or docket number. Within 30 days from the date that this information is placed on the Internet, any interested person may seek review of this decision by submitting a petition for review under section 515(g) of the act and requesting either a hearing or review by an independent advisory committee. FDA may, for good cause, extend this 30-day filing period.

Failure to comply with any post-approval requirement constitutes a ground for withdrawal of approval of a PMA. The introduction or delivery for introduction into interstate commerce of a device that is not in compliance with its conditions of approval is a violation of law.

You are reminded that, as soon as possible and before commercial distribution of your device, you must submit an amendment to this PMA submission with a copy of all final labeling. Final labeling that is

identical to the labeling approved in draft form will not routinely be reviewed by FDA staff when accompanied by a cover letter stating that the final labeling is identical to the labeling approved in draft form. If the final labeling is not identical, any changes from the final draft labeling should be highlighted and explained in the amendment.

All required documents should be submitted, unless otherwise specified, to the address below and should reference the above PMA number to facilitate processing.

U.S. Food and Drug Administration
Center for Devices and Radiological Health
Document Control Center - WO66-G609
10903 New Hampshire Avenue
Silver Spring, MD 20993-0002

If you have any questions concerning this approval order, please contact Jessica Flynn at 240-402-9099 or Jessica.Flynn@fda.hhs.gov.

Sincerely,


Paula V. Caposino -S

for Marianela Perez-Torres, Ph.D.
Acting Director
Division of Chemistry
and Toxicology Devices
OHT7: Office of In Vitro Diagnostics
Office of Product Evaluation and Quality
Center for Devices and Radiological Health