



Step Up Skin Laser, LLC  
% Irving Wiesen  
Official Correspondent  
Law Offices of Irving L. Wiesen, P.C.  
420 Lexington Avenue  
Suite 2400  
New York, New York 10170

November 14, 2018

Re: K182604  
Trade/Device Name: New Era  
Regulation Number: 21 CFR 878.4810  
Regulation Name: Laser Surgical Instrument For Use In General And Plastic Surgery And In  
Dermatology  
Regulatory Class: Class II  
Product Code: GEX  
Dated: September 20, 2018  
Received: September 21, 2018

Dear Irving Wiesen:

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. Although this letter refers to your product as a device, please be aware that some cleared products may instead be combination products. The 510(k) Premarket Notification Database located at <https://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfpmn/pmn.cfm> identifies combination product submissions. 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) for devices or postmarketing safety reporting (21 CFR 4, Subpart B) for combination products (see <https://www.fda.gov/CombinationProducts/GuidanceRegulatoryInformation/ucm597488.htm>); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820) for devices or current good manufacturing practices (21 CFR 4, Subpart A) for combination products; and, if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

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 comprehensive regulatory information about medical devices and radiation-emitting products, including information about labeling regulations, please see Device Advice (<https://www.fda.gov/MedicalDevices/DeviceRegulationandGuidance/>) and CDRH Learn (<http://www.fda.gov/Training/CDRHLearn>). Additionally, you may contact the Division of Industry and Consumer Education (DICE) to ask a question about a specific regulatory topic. See the DICE website (<http://www.fda.gov/DICE>) for more information or contact DICE by email ([DICE@fda.hhs.gov](mailto:DICE@fda.hhs.gov)) or phone (1-800-638-2041 or 301-796-7100).

Sincerely,

Neil R.P.  
Ogden

Digitally signed by  
Neil R.P. Ogden  
Date: 2018.11.14  
16:24:31 -05'00'

For Binita S. Ashar, M.D., M.B.A., F.A.C.S.  
Director  
Division of Surgical Devices  
Office of Device Evaluation  
Center for Devices and Radiological Health

Enclosure

## Indications for Use

510(k) Number (if known)

K182604

Device Name

New Era Laser

Indications for Use (Describe)

The New Era Laser is intended for hair removal, permanent hair reduction on all skin types (Fitzpatrick skin type I-VI), including tanned skin.

Permanent hair reduction is defined as the long-term, stable reduction in the number of hairs regrowing when measured at 6, 9, and 12 months after the completion of a treatment regime.

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.

This section applies only to requirements of the Paperwork Reduction Act of 1995.

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## **Tab #7 510(k) Summary**

This 510(k) Summary of 510(k) safety and effectiveness information is being submitted in accordance with requirements of SMDA 1990 and Title 21, CFR Section 807.92.

The assigned 510(k) Number:

### **1. Date of Preparation**

September 6, 2018

### **2. Sponsor**

Step Up Skin Laser LLC  
433 5th Ave, 6th floor ,  
New York, NY 10016

Contact person: Michelle Hokama President  
[michellehokama911@gmail.com](mailto:michellehokama911@gmail.com)  
cell number :347-642-2982  
company: [646-577-3333](tel:646-577-3333) , [646-882-8479](tel:646-882-8479)

Establishment Registration Number: Not yet registered

### **3. Submission Correspondent**

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#### 4. Identification of Proposed Device

Trade Name: New Era

Common Name: Powered Laser Surgical Instrument

Regulatory Information:

Classification Name: Powered Laser Surgical Instrument

Classification: II; Product Code: GEX;

Regulation Number: 21 CFR 878.4810; Review Panel: General & Plastic Surgery

Intended Use:

The New Era is intended for hair removal, permanent hair reduction on all skin types (Fitzpatrick skin type I-VI), including tanned skin.

Permanent hair reduction is defined as the long-term, stable reduction in the number of hairs regrowing when measured at 6, 9, and 12 months after the completion of a treatment regime.

#### 5. Device Description

The proposed device, New Era, is a surgical device, which is intended for hair removal, permanent hair reduction on all skin types (Fitzpatrick skin type I-VI);

There is one model, FG 2000.

Table 1 Specifications

|               |                 |
|---------------|-----------------|
| Model         | FG 2000-D       |
| Size          | 59*59*146 cm    |
| Weight        | 45kg            |
| Handpiece     | Refer to Fig 16 |
| Cooler Number | 1               |

The main components of proposed device shown as following:

Table 2 Main Components of Proposed Device

| Components | Function Description                    | Applied Model(s) |
|------------|-----------------------------------------|------------------|
| Handpiece  | Deliver the laser to area to be treated | FG 2000          |

Touchscreen    The user interface and for controlling of the system    FG 2000

Emergency Switch    Stop the system in case of emergency situation    FG 2000

Key Switch    Start the system    FG 2000

Connector    Connection of the device with the handpiece    FG 2000

Indicator Lamp    Indicate current working state of the appliance    FG 2000

Foot Switch    Activate the laser emission    FG 2000

The proposed system provides 36 working modes, which are six modes for men and six modes for women, the men or women mode includes Parameter one, two, three, four, five and six mode respectively for different preset parameter combination, and each particular parameter preset mode includes three submode as mode 1, mode 2 and mode 3.

The difference for each mode is only the default parameter, but all parameters for each mode can be adjustable in the parameter range.

The treatment can be applied on different Fitzpatrick skin type, including I (White), II (White with pigment), III (Yellow), IV (Yellow with pigment), V (Brown) and VI (Black);

## 6. Identification of Predicate Device

Predicate K161692  
Diode Laser Therapy Machine  
Model FG2000D

Beijing ADSS Development Co., Ltd.

## 7. Non-Clinical Test Conclusion

The proposed device, New Era, Model FG2000, is identical in all respects to the predicate device.

It is made by the same manufacturer, utilizing the same controls, components, and processes of the predicate device.

Non clinical tests were conducted to verify that the proposed device met all design specifications as was Substantially Equivalent (SE) to the predicate device. The test results demonstrated that the proposed device complies with the following standards:

IEC 60601-1:2012 Medical Electrical Equipment - Part 1: General Requirements For Basic Safety And Essential Performance;

IEC 60601-2-2:2007, Medical Electrical Equipment - Part 2-22: Particular Requirements For Basic Safety And Essential Performance Of Surgical, Cosmetic, Therapeutic And Diagnostic Laser Equipment;

IEC 60825-1: 2007, Safety of laser products - Part 1: Equipment classification and requirements.

IEC 60601-1-2:2007, Medical electrical equipment- Part 1-2: General requirements for basic safety and essential performance- Collateral standard: Electromagnetic compatibility- Requirements and tests.

ISO 10993-5:2009, Biological Evaluation of Medical Device, Part 5-Tests for Vitro cytotoxicity

ISO 10993-10:2002/Amd. 1: 2006, Biological Evaluation of Medical Device, Part 10-Test for irritation and delay-type hypersensitivity AMENDMENT 1

Performance Testing for Spot Size Accuracy and Energy Output Accuracy.

## 8. Clinical Test Conclusion

No clinical study is included in this submission.

## 9. Substantially Equivalent (SE) Comparison

|           | 21 CF         |
|-----------|---------------|
| ended for | The Diode L   |
| ment      | Removal Sy    |
| skin      | for hair ren  |
| type      | permanent     |
| skin.     | on all ski    |
| tion is   | (Fitzpatrick  |
| n, stable | VI), includi  |
| ber of    | Permanent     |
| measured  | is defined as |
| after the | stable reduc  |
| eatment   | number of     |
|           | when measu    |
|           | months afte   |
|           | of a trea     |

Table 3 General Comparison

| <b>Item</b>       | <b>Proposed Device</b>                                                                                                                                                                                                                                                                                                             | <b>Predicate Device</b>                                                                                                                                                                                                                                                                                                                                    |
|-------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Product Code      | GEX                                                                                                                                                                                                                                                                                                                                | GEX                                                                                                                                                                                                                                                                                                                                                        |
| Regulation Number | 21 CFR 878.4810                                                                                                                                                                                                                                                                                                                    | 21 CFR 878.4810                                                                                                                                                                                                                                                                                                                                            |
| Intended Use      | The New Era is intended for hair removal, permanent hair reduction on all skin types (Fitzpatrick skin type I-VI), including tanned skin. Permanent hair reduction is defined as the long-term, stable reduction in the number of hairs regrowing when measured at 6, 9, and 12 months after the completion of a treatment regime. | The Diode Laser Hair Removal System is intended for hair removal, permanent hair reduction on all skin types (Fitzpatrick skin type I-VI), including tanned skin. Permanent hair reduction is defined as the long-term, stable reduction in the number of hairs regrowing when measured at 6, 9, and 12 months after the completion of a treatment regime. |
| Configuration     | Main Unit                                                                                                                                                                                                                                                                                                                          | Main Unit                                                                                                                                                                                                                                                                                                                                                  |



|                        |              |              |              |    |
|------------------------|--------------|--------------|--------------|----|
|                        | Handpiece    | Handpiece    | Handpiece    | SE |
|                        |              |              |              |    |
|                        | Foot Control | Foot Control | Foot Control | SE |
|                        |              |              |              |    |
| Principle of Operation | Diode Laser  | Diode Laser  | Diode Laser  | SE |

Table 4 Performance Comparison

| Item                 | Proposed Device         | Predicate               | Remark |
|----------------------|-------------------------|-------------------------|--------|
| Laser Type           | Diode Laser             | Diode Laser             | SE     |
| Laser Classification | Class IV                | Class IV                | SE     |
| Laser Wavelength     | 808 nm                  | 808 nm                  | SE     |
| Spot Size            | 1.44 cm <sup>2</sup>    | 1.44 cm <sup>2</sup>    | SE     |
| Fluence              | 2-120J/ cm <sup>2</sup> | 2-120J/ cm <sup>2</sup> | SE     |

|                |                   |                  |    |
|----------------|-------------------|------------------|----|
| Frequency      | 1-10Hz            | 1-10Hz           | SE |
| Pulse Duration | 9-143ms           | 9-143ms          | SE |
| Power Supply   | AC 110V/50Hz-60Hz | AC110V/50Hz-60Hz | SE |
| Dimension      | 59*59*146cm       | 59*59*146cm      | SE |
| Weight         | 49g kg            | 49g              | SE |

#### Discussion

The proposed device, New Era, Model FG2000, is identical in all respects to the predicate device. It is made by the same manufacturer, utilizing the same controls, components, and processes of the predicate device.

Table 5 Safety Comparison

| Item                                           | Proposed Device                                              | Predicate Device                                             | Remarks |
|------------------------------------------------|--------------------------------------------------------------|--------------------------------------------------------------|---------|
| Patient Contact Materials and Biocompatibility |                                                              |                                                              |         |
| Patient Contact Materials                      | Sapphire in handpiece and handpiece tip<br>(Stainless Steel) | Sapphire in handpiece and handpiece tip<br>(Stainless Steel) | SE      |
| Cytotoxicity                                   | No Cytotoxicity                                              | No Cytotoxicity; no evidence of sensitization or irritation  | SE      |
| Sensitization                                  | No evidence of sensitization                                 |                                                              |         |
| Irritation                                     | No evidence of irritation                                    |                                                              |         |
| EMC, Electrical and Laser Safety               |                                                              |                                                              |         |
| Electrical Safety                              | Comply with IEC 60601-1, IEC 60601-2-22                      | Comply with IEC 60601-1, IEC 60601-2-22                      | SE      |

|              |                                       |                                       |    |
|--------------|---------------------------------------|---------------------------------------|----|
| EMC          | Comply with IEC 60601-1-2             | Comply with IEC 60601-1-2             | SE |
| Laser Safety | Comply with IEC 60601-2-22, IEC 60825 | Comply with IEC 60601-2-22, IEC 60825 | SE |

#### 10. Substantially Equivalent (SE) Conclusion

Based on the comparison and analysis above, the proposed device is determined to be Substantially Equivalent (SE) to the predicate device.