November 26, 2019

Intuitive Surgical, Inc.
Jennifer Siu
Sr. Regulatory Affairs Specialist
1266 Kifer Rd.
Sunnyvale, California 94086

Re: K192367
Trade/Device Name: Ion Endoluminal System
Regulation Number: 21 CFR 874.4680
Regulation Name: Bronchoscope (Flexible or Rigid) and Accessories
Regulatory Class: Class II
Product Code: EOQ
Dated: August 29, 2019
Received: August 30, 2019

Dear Jennifer Siu:

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/combination-products/guidance-regulatory-information/postmarketing-safety-reporting-combination-products); 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.


For comprehensive regulatory information about medical devices and radiation-emitting products, including information about labeling regulations, please see Device Advice (https://www.fda.gov/medical-devices/device-advice-comprehensive-regulatory-assistance) and CDRH Learn (https://www.fda.gov/training-and-continuing-education/cdrh-learn). 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 (https://www.fda.gov/medical-devices/device-advice-comprehensive-regulatory-assistance/contact-us-division-industry-and-consumer-education-dice) for more information or contact DICE by email (DICE@fda.hhs.gov) or phone (1-800-638-2041 or 301-796-7100).

Sincerely,

Vasant Dasika -S

for Mike Ryan

Director

DHT1C: Division of ENT, Sleep Disordered Breathing, Respiratory and Anesthesia Devices

OHT1: Office of Ophthalmic, Anesthesia, Respiratory, ENT and Dental Devices

Office of Product Evaluation and Quality

Center for Devices and Radiological Health

Enclosure
Indications for Use

The Ion™ Endoluminal System (Model IF1000) assists the user in navigating a catheter and endoscopic tools in the pulmonary tract using endoscopic visualization of the tracheobronchial tree for diagnostic and therapeutic procedures. The Ion™ Endoluminal System enables fiducial marker placement. It does not make a diagnosis and is not for pediatric use.

The Flexision™ Biopsy Needle is used with the Ion™ Endoluminal System to biopsy tissue from a target area in the lung.

The PlanPoint™ Software uses patient CT scans to create a 3D plan of the lung and navigation pathways for use with the Ion™ Endoluminal System.

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

- [x] 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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510(k) Summary

1. submitter

510(k) Owner: Intuitive Surgical, Inc.
1266 Kifer Road
Sunnyvale, CA 94086

Contact: Jennifer Siu
Senior Regulatory Affairs Specialist
Tel: (408) 523-5372
Email: jennifer.siu@intusurg.com

Date of Submission: August 29, 2019

2. Device Information

Trade Name: Ion™ Endoluminal System
Common Name: Bronchoscope (flexible or rigid) and accessories
Classification: Class II
21 CFR §874.4680
Bronchoscope (flexible or rigid) and accessories
Product Code: EOQ
Review Panel: Ear, Nose, and Throat

3. Predicate Device

The predicate device for this submission is the Ion™ Endoluminal System (K182188), cleared on February 14, 2019.

4. Device Description

The Ion™ Endoluminal System (Model IF1000) is a software-controlled, electromechanical system designed to assist qualified physicians to navigate a catheter and endoscopic tools in the pulmonary tract using endoscopic visualization of the tracheobronchial tree for diagnostic and therapeutic procedures. It consists of a Planning Laptop with PlanPoint™ Software, a System Cart with System Software, a Controller, Instruments, and Accessories. The Model IF1000 Instruments include the Ion™ Fully Articulating Catheter, the Ion™ Peripheral Vision Probe, and the Flexision™ Biopsy Needles. Accessories such as the Catheter Guide, Vision Probe Adapter, Suction Adapter, and Swivel Connector facilitate use of the Model IF1000 Instruments.
5. Intended Use/Indications for Use

Intended Use

To provide access to and visualization of patient airways.

Indications for Use

The Ion™ Endoluminal System (Model IF1000) assists the user in navigating a catheter and endoscopic tools in the pulmonary tract using endoscopic visualization of the tracheobronchial tree for diagnostic and therapeutic procedures. The Ion™ Endoluminal System enables fiducial marker placement. It does not make a diagnosis and is not for pediatric use.

The Flexision™ Biopsy Needle is used with the Ion™ Endoluminal System to biopsy tissue from a target area in the lung.

The PlanPoint™ Software uses patient CT scans to create a 3D plan of the lung and navigation pathways for use with the Ion™ Endoluminal System.

6. Comparison to Predicate Device

The Model IF1000 Instruments, specifically the Ion™ Fully Articulating Catheter (Catheter) and the Ion™ Peripheral Vision Probe (Vision Probe), subject to the scope of change under this submission, remain substantially equivalent to the Model IF1000 Instruments cleared under K182188. There were no design changes made to the subject device as a result of the alternative microbicidal method.

Intuitive is providing an alternative microbicidal method for the reprocessing of the Catheter and Vision Probe instruments, to allow users the choice for these instruments to be reprocessed via an automated microbicidal process instead of the current manual microbicidal process. There are no changes to the subject device compared to the predicate device with regard to indications for use, technological characteristics, device materials, clinical utility, or packaging as a result of the alternative automated microbicidal process. Table 1 provides a comparison between the subject device and predicate device.

<table>
<thead>
<tr>
<th>Predicate Device: Model IF1000 Catheter &amp; Vision Probe (K182188)</th>
<th>Subject Device: Model IF1000 Catheter &amp; Vision Probe (This Submission)</th>
</tr>
</thead>
<tbody>
<tr>
<td>FDA Product Code</td>
<td>FDA Product Code</td>
</tr>
<tr>
<td>EOQ</td>
<td>SAME as predicate</td>
</tr>
<tr>
<td>Classification</td>
<td>Classification</td>
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<tr>
<td>Class II - 21 CFR §874.4680</td>
<td>SAME as predicate</td>
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<tr>
<td>Classification Name</td>
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</tr>
<tr>
<td>Bronchoscope (flexible or rigid) and accessories</td>
<td>SAME as predicate</td>
</tr>
</tbody>
</table>

Table 1. Comparison of Predicate and Subject Devices
Intuitive Surgical, Inc.  

Predicate Device:  
Model IF1000  
Catheter & Vision Probe  
(K182188)  

Subject Device:  
Model IF1000  
Catheter & Vision Probe  
(This Submission)  

<table>
<thead>
<tr>
<th><strong>Intended Use</strong></th>
<th>To provide visualization of patient airways</th>
<th>SAME as predicate</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Indications for Use</strong></td>
<td>The Ion™ Endoluminal System (Model IF1000) assists the user in navigating a catheter and endoscopic tools in the pulmonary tract using endoscopic visualization of the tracheobronchial tree for diagnostic and therapeutic procedures. The Ion™ Endoluminal System enables fiducial marker placement. It does not make a diagnosis and is not for pediatric use</td>
<td>SAME as predicate</td>
</tr>
</tbody>
</table>
| **Principles of Operation** | Visualization of endoluminal spaces via light delivery and video  
Navigation through endoluminal spaces via tip deflection capabilities  
Provides a working channel through which other instruments can be delivered to target sites within the airways | SAME as predicate |
| **Method of Distal Tip Movement** | Electromechanically (servo/stepper motors and software) controlled pull wires | SAME as predicate |
| **Tool Channel Diameter** | 2 mm | SAME as predicate |
| **Patient Contact Materials** | Stainless Steel  
Silicone  
Pellethane plastic  
PTFE plastic  
Glass  
Polyamide resin  
Pebax elastomer (TPE)  
Polyamide | SAME as predicate |
| **Reusable** | Yes | SAME as predicate |
| **Requires Reprocessing** | Yes | SAME as predicate |
| **Reprocessing - Microbicidal Method** | Manual microbicidal process  
Manual microbicidal process or Automated microbicidal process | 

Verification and validation testing results demonstrate that the subject device reprocessed via the automated microbicidal process is substantially equivalent to the predicate device.
reprocessed via the manual microbicidal process. Furthermore, the testing did not raise any new risks or any new questions in terms of safety and effectiveness for the subject device.

7. Performance Data

The following performance data has been provided in support of the substantial equivalence determination. Testing included reprocessing, biocompatibility, bench testing, and usability testing.

Reprocessing Validation
3 automated reprocessing equipment were validated to support the automated microbicidal process of the Catheter and Vision Probe, to demonstrate the efficacy of the automated reprocessing equipment in disinfecting/sterilizing the Model IF1000 devices. Testing was performed in accordance with AAMI TIR12:2010 Designing, testing, and labeling reusable medical devices for reprocessing in health care facilities: A guide for medical device manufacturers. All testing passed the predetermined acceptance criteria.

Biocompatibility
In order to assess the biological responses to patient contact of the Catheter and Vision Probe from chemical residuals used during the automated microbicidal process, Cytotoxicity testing was performed. Testing was performed on the Model IF1000 devices subjected to each representative automated reprocessing equipment in accordance with ISO 10993-5:2009 Biological evaluation of medical devices - Part 5: Tests for in vitro cytotoxicity. All testing passed the predetermined acceptance criteria.

Bench Testing
A series of bench testing was performed to verify and validate that the Model IF1000 devices continue to meet the existing functional requirements following the automated microbicidal process. The series of testing is outlined below. All testing passed the predetermined acceptance criteria.

<table>
<thead>
<tr>
<th>Performance Bench Test Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>Test</td>
</tr>
<tr>
<td>Design Verification Testing for Catheter</td>
</tr>
<tr>
<td>Design Verification Testing for Vision Probe</td>
</tr>
<tr>
<td>Reliability Testing for Catheter</td>
</tr>
<tr>
<td>Reliability Testing for Vision Probe</td>
</tr>
</tbody>
</table>

Usability Testing
A human factors study was performed to validate the additional instructions added to support the alternative automated microbicidal process. The study was conducted in accordance with FDA guidances Applying Human Factors and Usability Engineering to Medical Devices, issued February 3, 2016, and Reprocessing Medical Devices in Health Care Settings: Validation Methods and Labeling, issued March 17, 2015. The study demonstrates the intended users can successfully understand and perform the intended reprocessing procedure.
safely and effectively while following the reprocessing instructions manuals, and therefore successfully validates the added instructions.

Animal Testing
No animal studies were performed as appropriate verification and validation for the subject device were achieved in accordance with the acceptance criteria for the predicate device and from the results of the bench and usability testing.

Clinical Testing
No clinical studies were performed as appropriate verification and validation for the subject device were achieved in accordance with the acceptance criteria for the predicate device and from the results of the bench and usability testing.

8. Conclusion

Based upon the intended use, design, operating principles, comparison to the predicate device, and conducted testing, it is concluded that the subject device reprocessed via an automated microbicidal process is substantially equivalent to the predicate device reprocessed via a manual microbicidal process. Testing also supports that the subject device reprocessed via an automated microbicidal process does not raise any new risks or any new questions in safety or effectiveness compared to the predicate device.