Dear Mr. Harfe:

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) for the Tula® System. This device is intended to create a myringotomy and insert a tympanostomy tube using the Tula Tube Delivery System in pediatric (aged 6 months and older) and adult patients indicated to receive tympanostomy tubes. The Tula System is used to deliver a tympanostomy tube under local anesthesia induced using the Tula Iontophoresis System and TYMBION, a combination of an amide local anesthetic and an alpha- and beta-adrenergic agonist.

TYMBION™, a combination of an amide local anesthetic and an alpha- and beta-adrenergic agonist, is indicated for the induction of local anesthesia of the tympanic membrane via iontophoresis using the Tula® Iontophoresis System in pediatric (aged 6 months and older) and adult patients undergoing tympanostomy tube placement using the Tula Tube Delivery System.

We are pleased to inform you that the PMA 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 is 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 and insofar as the sale and distribution of the device are restricted to a physician. 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 the Tula System has been established and approved as follows: Earset at 6 months, Earplug at 5 months, Control Unit at 24 months, Return Electrode at 4 months, Syringe at 60 months, Syringe cap at 60 months, Tube Delivery System at 12 months, and TYMBION drug at 18 months. 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 Earset, Earplug, Control Unit, Return Electrode, Syringe/Syringe cap, and Tube Delivery System 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.

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 postmarketing 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 postmarketing 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 postmarketing
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

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 HomePage
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 Jong Ho Won at 240-402-6592 or JongHo.Won@fda.hhs.gov.

Sincerely,

Kesia Alexander

for Malvina B. Eydelman, M.D.  
Director  
OHT1: Office of Ophthalmic, Anesthesia, Respiratory, ENT and Dental Devices  
Office of Product Evaluation and Quality  
Center for Devices and Radiological Health