K024220

Summary of Safety and Effectiveness
Liquichek™ Autoimmune Negative Control

JAN 17 2003

1.0 Submitter

Bio-Rad Laboratories
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Irvine, California 92618-2017
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Contact Person

Yvette Lloyd
Senior Regulatory Affairs Specialist
Telephone: (949) 598-1465

Date of Summary Preparation

December 20, 2002

2.0 Device Identification

Product Trade Name:	Liquichek™ Autoimmune Negative Control
Common Name:	Antinuclear Antibody, Indirect Immunofluorescent, Antigen, Control
Classifications:	Class II
Product Code:	82DHN
Regulation Number:	21 CFR 866.5100

3.0 Device to Which Substantial Equivalence is Claimed

Kallestad™ Autoantibody Negative Control
Bio-Rad Laboratories

510 (k) Number: K780899A

4.0 Description of Device

This product is prepared from human serum with added preservatives. The control is provided in liquid form for convenience.

5.0 Statement of Intended Use

The new Liquichek™ Autoimmune Negative Control is intended for use as an unassayed quality control to monitor indirect immunofluorescent testing for the analytes listed in this package insert.

6.0 Comparison of the new device with the Predicate Device

This control is substantially equivalent to the following quality control material for autoimmune analysis that is currently in the market:

Kallestad™ Autoantibody Negative Control
Bio-Rad Laboratories

510 (k) Number: K780899A

Table 1. Similarities and Differences between new and predicate device.

Characteristics	Liquichek™ Autoimmune Negative Control (New Device)	Kallestad™ Autoantibody Negative Control (Predicate Device)
	Similarities	
Intended Use	The Liquichek™ Autoimmune Negative Control is intended for use as an unassayed quality control to monitor indirect immunofluorescent testing for the analytes listed in this package insert.	The Autoantibody Negative Control is a replacement reagent in the Kallestad Fluorescent Autoantibody test with mouse kidney, mouse stomach/kidney, Hep-2 cell line, or Crithidia luciliae substrates. This test is an indirect fluorescent antibody (IFA) procedure for the detection and semi-quantitation of human antibodies.
Matrix	Human Serum	Human Serum
Storage (Unopened)	2°C to 8°C until expiration date	2°C to 8°C until expiration date
Form	Liquid	Liquid
	Differences	
Stability (Opened)	Once opened the analyte will be stable for 60 days.	No open vial claims
Analyte	Antinuclear antibodies (ANA) Speckled Pattern, Antinuclear antibodies (ANA) Centromere Pattern, Antinuclear antibodies (ANA) Homogenous Pattern, Antinuclear antibodies (ANA) Mitotic Spindle Pattern,	No claims

	Antinuclear antibodies (ANA) Nuceolar Pattern, Anti-SS-A, Anti-SS-B, Anti-RNP, Anti-Sm, Anti-nDNA, Anti-Smooth Muscle, Anti-Mitochondrial, Anti-Scl-70	

7.0 STATEMENT OF SUPPORTING DATA

Stability studies have been performed to determine the open vial stability and shelf life for the Liquichek™ Autoimmune Negative Control. Product claims are as follows:

7.1 Once the control is opened the analyte will be stable for 60 days when stored tightly capped at 2 to 8°C.

7.2 The control is stable for 2 years when stored unopened at 2 - 8°C.

Real time studies will be ongoing to support the shelf life of this product.

All supporting data is retained on file at Bio-Rad Laboratories.

DEPARTMENT OF HEALTH & HUMAN SERVICES

Food and Drug Administration
2098 Gaither Road
Rockville MD 20850

JAN 1 7 2003

Ms. Yvette Lloyd
Senior Regulatory Affairs Specialist
Bio-Rad Laboratories, QSD
9500 Jeronimo Road
Irvine, California 92618-2017

Re: k024220
Trade/Device Name: Liquichek™ Autoimmune Negative Control
Regulation Number: 21 CFR § 866.5100
Regulation Name: Antinuclear Antibody Immunological Test System
Regulatory Class: II
Product Code: DHN
Dated: December 20, 2002
Received: December 23, 2002

Dear Ms. Lloyd:

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.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in Title 21, Code of Federal Regulations (CFR), Parts 800 to 895. 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 Parts 801 and 809); and good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820). This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific information about the application of labeling requirements to your device, or questions on the promotion and advertising of your device, please contact the Office of In Vitro Diagnostic Device Evaluation and Safety at (301) 594-3084. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address http://www.fda.gov/cdrh/dsma/dsmamain.html.

Sincerely yours,

Steven Gutman

Steven I. Gutman, M.D., M.B.A.
Director
Office of In Vitro Diagnostic Device Evaluation and Safety
Center for Devices and Radiological Health

Enclosure

510 (k) Number (if known): K024220

Device Name: **Liquichek™ Autoimmune Negative Control**

Indications for Use:

The Liquichek™ Autoimmune Negative Control is intended for use as an unassayed quality control to monitor indirect immunofluorescent testing for the analytes listed in this package insert

(PLEASE DO NOT WRITE BELOW THE LINE-CONINUE ON ANOTHER PAGE IF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription use ✓ or Over-the Counter use _____

Approved for S. Bautista

(Division Sign-Off)
Division of Clinical Laboratory Devices
510(k) Number K024220