510(k) Summary - Tina-quant CRP (Latex)

Introduction

According to the requirements of 21 CFR 807.92, the following information provides sufficient detail to understand the basis for a determination of substantial equivalence

Submitter name, address, contact

Roche Diagnostics Corporation 9115 Hague Rd

Indianapolis IN 46250

(317) 521-3831

Contact person: Sherri L. Coenen

Date prepared: July 25, 2003

Device Name

Proprietary name: Roche Diagnostics Tina-quant CRP (Latex)

Common name: Tina-quant CRP (Latex)

Classification name: C-reactive protein immunological test system

Device description

The Tina-quant CRP (Latex) is a particle-enhanced immunoturbidimetric assay. Anti-CRP antibodies coupled to latex microparticles react with antigen in the sample to form an antigen/antibody complex which is measured turbidimetrically.

Intended use

Immunoturbidimetric assay for the in vitro quantitative determination of CRP in human serum and plasma on automated clinical chemistry analyzers.

Predicate Device

We claim substantial equivalence to the currently marketed Roche Diagnostics Tina-quant CRP (Latex) HS assay. (K003400).

510(k) Summary - COBAS Integra Creatinine plus ver.2,

continued

Reagent Summary The following table describes the similarities and differences between the Tina-quant CRP (Latex) and the predicate device.

Topic	Tina-quant CRP (Latex) HS (K003400)	Tina-quant CRP (Latex) (Modified Device)
Intended Use	Immunoturbidimetric assay for the in vitro quantitative determination of CRP in human serum and plasma on automated clinical chemistry analyzers.	Same
Method	Particle-enhanced immunoturbidimetric assay	Same
Sample type	Serum Plasma: Li-/Na-heparin, Na-/K ₃ - EDTA, citrate plasma	Serum Plasma: Li-/Na-heparin, Na-/K ₂ -/K ₃ - EDTA
Measuring range	 Roche/Hitachi 902: 0.1 - 20 mg/L Roche/Hitachi 904/911/912/917/Modular P: 0.2 - 20 mg/L 0.1 - 300 mg/L with rerun 	 Roche/Hitachi 902: 265 mg/L Roche/Hitachi 717/Modular D: 265 mg/L 398 mg/L with rerun Roche/Hitachi 904/911/912: 260 mg/L 520 mg/L with rerun Roche/Hitachi 917/Modular P: 280 mg/L 560 mg/L with rerun
Expected values	< 0.5 mg/dl	Same



AUG - 5 2003

Food and Drug Administration 2098 Gaither Road Rockville MD 20850

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Regulatory Affairs Consultant
Regulatory Submissions, Centralized Diagnostics
Roche Diagnostics Corporation
9115 Hague Road
P.O. Box 50457
Indianapolis, IN 46250-0457

Re: k032336

Trade/Device Name: Tina-quant CRP (Latex)

Regulation Number: 21 CFR 866.5270

Regulation Name: C. reactive protein immunological test system

Regulatory Class: Class II Product Code: DCN Dated: July 25, 2003

Received: July 29, 2003

Dear Ms. Coenen:

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 <u>Federal Register</u>.

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).

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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). Other general information on your responsibilities under the Act may be obtained 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 I. Gutman, M.D., M.B.A.

Director

Office of In Vitro Diagnostic Device

Steven Butman

Evaluation and Safety

Center for Devices and

Radiological Health

Enclosure

Indications for Use Statement

510(k) Number (if known): <u>N/A</u>	K032336
Device Name: Tina-quant CRP (Latex	<u>c)</u>
Indications For Use:	
Immunoturbidimetric assay for the in vand plasma on automated clinical chem	vitro quantitative determination of CRP in human serum nistry analyzers.
Measurement of C-reactive protein aids	ls in evaluation of the amount of injury to body tissues.
(PLEASE DO NOT WRITE BELO	W THIS LINE - CONTINUE ON ANOTHER PAGE IF NEEDED)
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Concurrence of CF	DRH, Office of Device Evaluation (ODE)
Prescription Use (Per 21 CFR 801.109)	OR Over-The-Counter Use
•	(Optional Format 1-2-96)
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Office of in Vitto Diagnostic Device Office of in Vitto Diagnostic Device Evaluation and Safety

510(k) 632336