

K040018

Special 510(k) Premarket Notification
Transbronchial Aspiration Needle (TBAN)

Boston Scientific Corporation
January 5, 2004

JAN 20 2004

510 (k) SUMMARY

SPONSOR: Boston Scientific Corporation
One Boston Scientific Place
Natick, MA 01760

CONTACT PERSON: James D. McMahon
Senior Regulatory Affairs Specialist

DEVICE:

Trade Name: eXcelon™ Transbronchial Aspiration Needle
Common Name: Transbronchial Aspiration Needle
Classification: Class II, per 21 CFR Part 874.4680

PREDICATE DEVICE: Boston Scientific Stifcor™ Transbronchial Aspiration Needle (K963252)

DESCRIPTION: The eXcelon™ Transbronchial Aspiration Needle is a needle catheter used for aspiration of tissue.

INTENDED USE: The eXcelon™ Transbronchial Aspiration Needle is intended for use in aspiration in carinal, paratracheal and hilar lesions of the bronchial tree where biopsy forceps cannot obtain a submucosal sample.

COMPARISON OF CHARACTERISTICS: The modified device is substantially equivalent to the predicate device, as they have the same operating principal and intended use. In addition, the results of design control activities do not raise any new issues of safety or effectiveness.

PERFORMANCE DATA: FDA's "Guidance for the Content of Premarket Notifications", and the results of physical comparison and functional testing support a determination of substantial equivalence for the modified device when compared to the predicate device. The modified device is substantially equivalent to the currently marketed Boston Scientific Stifcor™ Transbronchial Aspiration Needle in terms of performance characteristics, biocompatibility, and intended use.



JAN 20 2004

Food and Drug Administration
9200 Corporate Boulevard
Rockville MD 20850

Boston Scientific Corp.
c/o James D. McMahon
Senior Regulatory Affairs Specialist
One Boston Scientific Place
Mail Stop A1, Endo Regulatory
Natick, MA 01760-1537

Re: K040018
Trade/Device Name: eXcelon™ Transbronchial Aspiration Needle
Regulation Number: 21 CFR 874.4680
Regulation Name: Bronchoscope (flexible or rigid) and accessories
Regulatory Class: Class II
Product Code: EOQ
Dated: January 5, 2004
Received: January 6, 2004

Dear Mr. McMahon:

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 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); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

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 advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (301) 594-4613. 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,

A handwritten signature in cursive script that reads "A. Ralph Rosenthal".

A. Ralph Rosenthal, M.D.
Director
Division of Ophthalmic and Ear,
Nose and Throat Devices
Office of Device Evaluation
Center for Devices and
Radiological Health

Enclosure

INDICATIONS FOR USE STATEMENT

510(k) Number To be determined


Device Name eXcelon™ Transbronchial Aspiration Needle

Indications For Use Indicated for use in aspiration in carinal, paratracheal and hilar lesions of the bronchial tree where biopsy forceps cannot obtain a submucosal sample.

PLEASE DO NOT WRITE BELOW THIS LINE – CONTINUE ON ANOTHER PAGE IF NEEDED

Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use ✓ OR Over the Counter Use _____
(Per 21 CFR 801.109)



(Division Sign-Off)
Division of Ophthalmic Ear,
Nose and Throat Devices

510(k) Number 2040018