

**510(k) Summary****Date: 08/11/2005**

OCT 18 2005

**Submitter Name and Address**

CardioNet, Inc.  
1010 2<sup>nd</sup> Avenue, Suite 700  
San Diego, CA 92101

**Contact Person:**

Jack Gaikwad  
619-243-7527

**Name of Device**

Trade/Proprietary Name: Model 1002 - CardioNet ECG Monitor with Arrhythmia Detection

Common/Usual Name: Arrhythmia detector and alarm

Classification Name: CFR §870.1025 Procode DSI 'Arrhythmia Detector and Alarm'

Class: Class II, Special Controls

**Predicate Device**

CardioNet Ambulatory ECG Monitor, (K012241)

**Substantial Equivalence**

The features and functions of the CardioNet ECG Monitor with Arrhythmia Detection, Model 1002 are substantially equivalent to the previously cleared CardioNet Ambulatory ECG Monitor with Arrhythmia Detection, (K012241).

**Intended Use**

The CardioNet ECG Monitor with Arrhythmia Detection, Model 1002 is intended to be used for ambulatory diagnostic monitoring for cardiac arrhythmias. The specific indication statements differ slightly from those of the predicate device. These changes are intended to update terminology and provide examples of clinical usage scenarios. These changes do not affect the intended use or affect the safety and effectiveness of the device.

**Device Description**

The CardioNet ECG Monitor with Arrhythmia Detection is an ambulatory ECG monitor with capability to detect cardiac arrhythmias and transmit ECG data to a CardioNet staffed monitoring center.

The subject device is comprised of three (3) main components: 1) a patient-worn Sensor, 2) a Monitor and 3) a charging Base.

A Sensor acquires the ECG signal from the patient's body and transmits the signal to PDA sized monitor where the data is stored and analyzed by an automated arrhythmia analysis algorithm. When an arrhythmic event is detected the monitor can transmit the ECG data to the monitoring center utilizing a cellular modem or telephone data line. The patient can also initiate the recording and transmission of ECG data if symptoms are felt. The data is received and reviewed by trained technicians using the Monitoring Services Application.

#### **Technological comparison to predicate device**

The CardioNet ECG Monitor with Arrhythmia Detection differs from the predicate device only with respect to the arrhythmia analysis algorithm. The predicate device included an arrhythmia analysis algorithm licensed from Mortara Instrument. The new algorithm was developed by CardioNet and includes the same functions supplied by the previous algorithm.

#### **Summary of Performance Testing**

Performance testing was performed in accordance with FDA Class II Special Controls Guidance Document: Arrhythmia Detector and Alarm. The CardioNet Ambulatory ECG Monitor meets or intends to conform to the applicable standards suggested in the guidance document including:

- ANSI/AAMI EC 38: 1998 – Ambulatory Electrocardiographs
- ANSI/AAMI EC 57: 1998 – Testing and Reporting Performance Results of Cardiac Rhythm and ST Segment Measurement Algorithms
- International Electrotechnical Commission (IEC) 60601-1 Medical Electrical Equipment - Part 1: General Requirements for Safety

#### **Conclusions**

As stated above, CardioNet's conclusion is that the CardioNet ECG Monitor with Arrhythmia Detection, Model 1002 is safe, effective, is substantially equivalent to the predicate device and will comply with appropriate medical device standards and FDA special controls guidance prior to market release.



Food and Drug Administration  
9200 Corporate Boulevard  
Rockville MD 20850

OCT 19 2005

Cardionet, Inc.  
c/o Mr. Jack Gaikwad  
Director, Quality and Regulatory  
1010 2<sup>nd</sup> Avenue, Suite 700  
San Diego, CA 92101

Re: K052240

Trade Name: Cardionet Ambulatory ECG Monitor with Arrhythmia Detection  
Regulation Number: 21 CFR 870.1025  
Regulation Name: Arrhythmia Detector and Alarm  
Regulatory Class: II (two)  
Product Code: DSI  
Dated: August 11, 2005  
Received: August 17, 2005

Dear Mr. Gaikwad:

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.

Page 2 – Mr. Jack Gaikwad

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 (240) 276-0120. 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/industry/support/index.html>.

Sincerely yours,



Bram D. Zuckerman, M.D.  
Director  
Division of Cardiovascular Devices  
Office of Device Evaluation  
Center for Devices and  
Radiological Health

Enclosure

## Indications for Use

510(k) Number (if known): K052240

Device Name: CardioNet Ambulatory ECG Monitor with Arrhythmia Detection

### Indications for Use:

The CardioNet Ambulatory ECG Monitor with Arrhythmia Detection intended use is for:

1. Patients who have a demonstrated need for cardiac monitoring. These may include but are not limited to patients who require monitoring for: a) non-life threatening arrhythmias such as supraventricular tachycardias (e.g. atrial fibrillation, atrial flutter, PACs, PSVT) and ventricular ectopy; b) evaluation of bradyarrhythmias and intermittent bundle branch block, including after cardiovascular surgery and myocardial infarction; and c) arrhythmias associated with co-morbid conditions such as hyperthyroidism or chronic lung disease
2. Patients with symptoms that may be due to cardiac arrhythmias. These may include but are not limited to symptoms such as: a) dizziness or lightheadedness; b) syncope of unknown etiology in which arrhythmias are suspected or need to be excluded; and c) dyspnea (shortness of breath).
3. Patients with palpitations with or without known arrhythmias to obtain correlation of rhythm with symptoms.

Prescription Use    
 (Part 21 CFR 801 Subpart D)

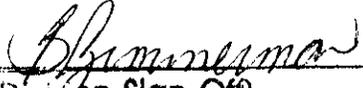
AND/OR

Over-The-Counter Use    
 (21 CFR 801 Subpart C)

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED)

---

Concurrence of CDRH, Office of Device Evaluation (ODE)

  
\_\_\_\_\_  
(Division Sign-Off)  
Division of Cardiovascular Devices  
510(k) Number K052240

4. Patients who require monitoring of effect of drugs to control ventricular rate in various atrial arrhythmias (e.g. atrial fibrillation).
5. Patients recovering from cardiac surgery who are indicated for outpatient arrhythmia monitoring.
6. Patients with diagnosed sleep disordered breathing including sleep apnea (obstructive, central) to evaluate possible nocturnal arrhythmias
7. Patients requiring arrhythmia evaluation of etiology of stroke or transient cerebral ischemia, possibly secondary to atrial fibrillation or atrial flutter
8. Data from the device may be used by another device to analyze, measure or report QT interval. The device is not intended to sound any alarms for QT interval changes

**Contraindications:**

1. Patients with potentially life-threatening arrhythmias who require inpatient monitoring.
2. Patients who the attending physician thinks should be hospitalized.



**Division Sign-Off**  
**Division of Cardiovascular Devices**

510(k) Number K052240