

FEB 7 2006

## Section 4. 510(k) Summary

### General Provisions

Submitter's Name and Address: EKOS Corporation  
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Suite 101  
Bothell, WA 98021

Contact Person: Jocelyn Kersten  
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425-482-1109 (fax)  
[jkersten@EKOSCORP.com](mailto:jkersten@EKOSCORP.com)

Classification Name: Catheter, Continuous Flush (KRA)

Common or Usual Name: Continuous Flush Catheter

Proprietary Name: Lysus® Infusion System

Name of Predicate Device: Lysus® Infusion System

510(k) Reference No.: K052071

### Device Description

The system consists of a disposable infusion catheter with removable ultrasound core and an instrument that generates and controls the delivery of energy to the catheter. The infusion catheter contains multiple side holes distributed over the length of the treatment zone. The ultrasound core contains up to 30 ultrasound elements, evenly spaced over the treatment zone. Thermal sensors in the treatment zone monitor transducer temperature.

### Intended Use

The Lysus® Infusion System is intended for the controlled and selective infusion of physician-specified fluids, including thrombolytics, into the peripheral vasculature.

### Summary of Technological Characteristics

The device modifications described in this notification do not affect the technological characteristics for the Lysus Infusion System.

### Test Summary

Electrical safety and system testing confirmed the PT-3B operates as intended with the Lysus Infusion Catheters.



Food and Drug Administration  
9200 Corporate Boulevard  
Rockville MD 20850

FEB 7 2006

EKOS Corporation  
c/o Ms. Jocelyn Kersten  
Director, Regulatory Affairs  
22030 20<sup>th</sup> Ave., SE, Suite 101  
Bothell, WA 98021

Re: K060084  
EKOS Lysus Infusion System  
Regulation Number: 21 CFR 870.1210  
Regulation Name: Continuous Flush Catheter  
Regulatory Class: Class II (two)  
Product Code: KRA  
Dated: January 10, 2006  
Received: January 11, 2006

Dear Ms. Kersten:

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.

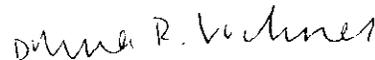
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Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other 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): K 0 60084

Device Name: Lysus® Infusion System

Indications For Use: The Lysus® Infusion System is intended for the controlled and selective infusion of physician-specified fluids, including thrombolytics, into the peripheral vasculature.

Prescription Use  X   
(Part 21 CFR 801 Subpart D)

AND/OR

Over-The-Counter Use \_\_\_\_\_  
(21 CFR 807 Subpart C)

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

Concurrence of CDRH, Office of Device Evaluation (ODE)

*Anna R. Vachon*  
(Division Sign-Off)  
Division of Cardiovascular Devices

510(k) Number K 0 60084

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