Neusoft

510(k)

Attachment 1 Summary of Safety and Effectiveness

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This 510(k) summary of Safety and Effectiveness information is submitted in accordance with the requirements of 21 CFR Part 807.87(h)

General Information:

Trade Name:

NeuViz Spiral CT Scanner System

Common Name:

CT Scanner

Classification Name:

21 CFR Part 892.1750

Computed Tomography X-ray System

Classification:

Class II

Performance Standard:

21 CFR Subchapter J, Federal Diagnostic X-ray Equipment

Standard

Manufacture:

PHILIPS AND NEUSOFT MEDICAL SYSTEMS CO., LTD. Neusoft Park, Hun Nan Industrial Area, Shenyang 110179,

P.R.China

Distributor:

NEUSOFT MEDICAL SYSTEMS CO., LTD. No.3-11, Wenhua Road, Heping District,

Shenyang, P.R.China Post Code: 110004

Submitter:

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Summary prepared: June 8, 2007

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Safety and Effectiveness information

Intended Uses:

The NeuViz Spiral CT Scanner System is intended to produce cross-section images of head and whole body by computer reconstruction of X-ray transmission data taken at different angles.

Device Description:

The NeuViz Spiral CT Scanner System is composed of a gantry, a patient couch, an operator console and includes image acquisition hardware and software, and associated accessories. It is designed to be a head and whole body X-ray computed tomography scanner which features a continuously rotating tube-detector system and functions according to the fan beam principle. The system software is an interactive program used for X-ray scan control, image reconstruction, and image archive/evaluation.

The NeuViz Spiral CT Scanner System uses the same materials, construction and operating principle as our existing marketed product, CT-C3000 Spiral CT Scanner System.

Predicated Device:

CT-C3000 Spiral CT Scanner System (K020913)

Statement of Substantial Equivalence:

The NeuViz Spiral CT Scanner System is of comparable type and substantially equivalent to the CT-C3000 Spiral CT Scanner System (K020913) that complies with the same or equivalent standards and has the same intended uses. Both of these systems use on-board high frequency High-Voltage generator to generate X-radiation from X-ray tube. The X-ray transmission data is detected by the solid-state detector and is reconstructed by the computer which has an interactive user interface. Both of these devices produce two dimensional image and 3D image that can be filmed or electronically stored for future review.





Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Neusoft Medical Systems co., Ltd % Mr. Tamas Borsai Division Manager, Medical Division TÜV Rheinland of North America 12 Commerce Road NEWTOWN CT 06470

OCT 16 2007

Re: K072841

Trade/Device Name: NeuViz Spiral CT Scanner System

Regulation Number: 21 CFR 892.1750

Regulation Name: Computed tomography x-ray system

Regulatory Class: II Product Code: JAK Dated: October 1, 2007 Received: October 4, 2007

Dear Mr. Borsai:

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 <u>Code of Federal Regulations</u>, Title 21, Parts 800 to 898. 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 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 Center for Devices and Radiological Health's (CDRH's) Office of Compliance at one of the following numbers, based on the regulation number at the top of this letter.

21 CFR 876.xxxx	(Gastroenterology/Renal/Urology)	240-276-0115
21 CFR 884.xxxx	(Obstetrics/Gynecology)	240-276-0115
21 CFR 892.xxxx	(Radiology)	240-276-0120
Other		240-276-0100

Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding postmarket surveillance, please contact CDRH's Office of Surveillance and Biometric's (OSB's) Division of Postmarket Surveillance at 240-276-3474. For questions regarding the reporting of device adverse events (Medical Device Reporting (MDR)), please contact the Division of Surveillance Systems at 240-276-3464. 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 (240) 276-3150 or at its Internet address http://www.fda.gov/cdrh/industry/support/index.html.

Sincerely yours,

Nancy C. Brogdon

Director, Division of Reproductive, Abdominal, and Radiological Devices

Office of Device Evaluation

Vancy C Brogdon

Center for Devices and Radiological Health

Enclosure

Attachment 2 Indications for Use Statement

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510(k) Number: K0728

Device Name: NeuViz Spiral CT Scanner System

Environment of Use / Patient Population:

The NeuViz Spiral CT Scanner Systems are intended to produce cross-section images of head and whole body by computer reconstruction of X-ray transmission data taken at different angles. This device will not be used for breast disease diagnoses.

Prescription Use: YES (Part 21 CFR 801 Subpart D)

Over-The-Counter Use: NO (21 CFR 801 Subpart C)

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

Concurrence of CDRH, Office of Device Evaluation (ODE)

(Division Sign-Off)

Division of Reproductive, Abdominal and

Radiological Devices

510(k) Number