510(k) SUBSTANTIAL EQUIVALENCE DETERMINATION DECISION SUMMARY ASSAY AND INSTRUMENT COMBINATION TEMPLATE

A. 510(k) Number:

k182552

B. Purpose for Submission:

This submission is a Dual 510(k) and CLIA Waiver by Application (Dual Submission) tracked as k182552 and CW180012. This 510(k) is to expand the indications for use for the StatStrip Xpress Glucose Hospital Meter System to include capillary whole blood samples for use in all hospitalized patients.

C. Measurand:

Capillary whole blood glucose

D. Type of Test:

Quantitative amperometric assay, glucose oxidase

E. Applicant:

Nova Biomedical Corporation

F. Proprietary and Established Names:

StatStrip Xpress Glucose Hospital Meter System

G. Regulatory Information:

Product Code	Regulation Name	Classification	Regulation Section	Panel
PZI	Glucose Test System	II	21 CFR 862.1345	Clinical Chemistry

H. Intended Use:

1. Intended Use:

See Indications for Use below.

2. Indications for Use:

The StatStrip Xpress Glucose Hospital Meter System is intended for point-of-care, in vitro diagnostic, multiple-patient use for the quantitative determination of glucose in capillary finger stick, venous whole blood, arterial whole blood, neonate arterial whole blood and neonate heel stick specimens throughout all hospital and all professional healthcare settings including patients receiving intensive medical intervention/therapy.

The system should only be used with single-use, auto-disabling lancing devices when performing a capillary finger stick or neonate heel stick. It is not intended for use with neonate cord blood specimens. It is not intended for the screening or diagnosis of diabetes mellitus but is indicated for use in determining dysglycemia.

3. <u>Special conditions for use statement(s)</u>:

- For prescription use only
- For in vitro diagnostic use only
- The system has not been evaluated for use with neonate venous blood.
- Temperature and humidity extremes Test results may be inaccurate when test strips are stored outside of the storage and handling conditions.
- Altitudes above 15,000 feet (4500 meters) above sea level have not been evaluated.
- Specimens Only fresh whole blood or whole blood collected in lithium heparin collection devices should be used for arterial and venous specimens.
- Fluoride, EDTA, Sodium, and Ammonium blood collection devices should not be used.
- Use only whole blood. Do not use serum or plasma.
- Should only be used with single-use, auto-disabling lancing devices
- Caution should be exercised when testing capillary whole blood due to potential pre-analytical variability in capillary specimen collection.
- A capillary whole blood specimen relies upon an adequate, non-compromised capillary blood flow. The healthcare provider must be aware that a capillary whole blood specimen glucose result may not always be the same as an arterial or a venous whole blood glucose result, especially when the patient's condition is rapidly changing.
- If a capillary whole blood glucose result is not consistent with a patient's clinical signs and symptoms, glucose testing should be repeated with either an arterial or venous specimen on the StatStrip Xpress Glucose Hospital Meter System.

4. Special instrument requirements:

StatStrip Xpress Blood Glucose Hospital Meter

I. Device Description:

The StatStrip Xpress Glucose Hospital Meter System (previously cleared under k070960, k150461, and k161856) consists of a hand held StatStrip Xpress Glucose Hospital Meter,

StatStrip Glucose Hospital Meter Test Strips, Quick Reference Guide, and User Manual. Three levels of control solutions (Level 1, Level 2, Level 3) and five levels of linearity solutions (Level 1, Level 2, Level 3, Level 4, Level 5) are available for use with the StatStrip Xpress Glucose Hospital Meter System and were previously cleared in k060345.

J. Substantial Equivalence Information:

1. <u>Predicate device name(s)</u>:

Nova StatStrip Glucose Hospital Meter System

2. <u>Predicate 510(k) number(s):</u>

k181043

3. Comparison with predicate:

Similarities and Differences					
Item	Predicate Device (k181043)	Candidate Device (k182552)			
Indications for Use/Intended Use	Intended for the quantitative determination of glucose in capillary finger stick, venous whole blood, arterial whole blood, neonate arterial whole blood and neonate heel stick specimens for use in determining dysglycemia.	Same			
Enzyme	Glucose Oxidase	Same			
Test Principle	Electro-chemical biosensor	Same			
Sample type	Capillary finger stick, venous and arterial whole blood, neonatal arterial whole blood and neonatal heelstick.	Same			
Measuring range	10-600 mg/dL	Same			
Measuring time	6 seconds	Same			
Hematocrit Range	20-65%	Same			
Sample volume	1.2 μL	Same			
Calibration	Automatic, no code	Same			
Operating Temperature	59°F - 104°F (15°C - 40°C)	41° to 104°F (5° to 40°C)			

Similarities and Differences						
Item	Predicate Device (k181043)	Candidate Device (k182552)				
Data storage	1000 Patient Test 200 QC Tests 4000 Operators	400 Patient Tests, quality control, linearity, and proficiency tests				
Barcode Scanner	Yes	No				
Power Source	Rechargeable 3.7 volt Lithium battery	3v dc Li coin cell battery				
Location of Test Strip Port	Bottom of Meter	Top of Meter				
Display	LCD (color touchscreen)	Segmented LCD (3 push buttons)				
Dimensions /Weight	Height: 146 mm (5.8 in) Width: 79 mm (3.1 in) Depth: 30 mm (1.18 in) 220 g (0.49 lb)	Height: 91.4 mm (3.6 in) Width: 58.4 mm (2.3 in) Depth: 22.9 mm (0.9 in) 75 g (2.65 oz)				

K. Standard/Guidance Document Referenced (if applicable):

Not applicable

L. Test Principle:

The StatStrip Xpress Glucose Hospital Meter System is based on electrochemical biosensor technology and the principle of capillary action. The system quantitatively measures blood glucose levels using glucose oxidase enzyme chemistry. The electrons generated during this reaction are transferred from the blood to the electrodes. The magnitude of the resultant current is proportional to the concentration of glucose in the specimen and the signal is converted into a readout displayed on the meter.

M. Performance Characteristics (if/when applicable):

This 510(k) is to expand the indications for use for the StatStrip Xpress Glucose Hospital Meter System to include capillary whole blood samples for use in all hospitalized patients based on the clinical studies for the StatStrip Glucose Hospital Meter System established in k181043. The StatStrip Glucose Xpress Hospital Meter uses the exact same technology as the StatStrip Glucose Hospital Meter. Both meters use the Nova StatStrip Glucose Hospital Meter Test Strips to measure glucose, require the same volume of sample, have the same glucose measuring range, and have the same indications for use. The systems differ in minor user preference features that do not impact the usability of the device, such as size of the meter, data storage specifications, and power source. The analytical performance for the

StatStrip Xpress Glucose Hospital Meter System has been previously established in k060345, k063821, k070960, k132121, k150461, k161856, which have been noted, where appropriate, below.

- 1. Analytical performance:
 - a. Precision/Reproducibility:

Previously established in k060345.

b. Linearity/assay reportable range:

As established in k063821, the reportable range for the Nova StatStrip Xpress Glucose Hospital Meter System is 10 to 600 mg/dL.

c. Traceability, Stability, Expected values (controls, calibrators, or methods):

Traceability to NIST Standard SRM917B, as established in k060345.

Test Strip:

Test strip stability protocols and acceptance criteria were evaluated in k060345 and were found to be acceptable to support the claimed shelf life of 24 months at 33-86°F and 10-90% relative humidity (RH) and the claimed open-vial stability of 180 days when stored at the recommended storage temperatures 33-86°F and 10-90% RH or until the expiration date printed on the label, whichever comes first. The labeling instructs the users not to freeze the test strips.

d. Detection limit:

This range was verified by the linearity established in k063821; section M.1.b.

e. Analytical specificity:

Potential interference from common endogenous and exogenous substances, as well as in vivo interference, was evaluated in k060345 and k132121.

f. Assay cut-off:

Not Applicable.

2. Comparison studies:

a. Method comparison study

Performance for capillary finger stick, venous whole blood and arterial whole blood samples from non-hospitalized patients was established in k060345.

Performance for neonatal heelstick and neonatal arterial samples was established in k063821.

Performance for venous and arterial, neonatal heelstick and neonatal arterial samples from patients throughout the hospital was established in k132121.

Performance for capillary fingerstick samples from hospitalized patients, including those receiving intensive medical intervention/therapy, was established in k181043.

b. Matrix comparison

Not applicable.

- 3. <u>Clinical studies</u>:
 - a. Clinical Sensitivity:

Not applicable.

b. Clinical specificity:

Not applicable.

c. Other clinical supportive data (when a. and b. are not applicable):

Not applicable.

4. <u>Clinical cut-off</u>:

Not applicable.

5. <u>Expected values/Reference range:</u>

Normal (non-diabetic) adult fasting: Less than 100 mg/dL (5.55 mmol/L) and less than 140 mg/dL (7.77 mmol/L) 1-2 hours after meals.

American Diabetes Association. Classification and Diagnosis of Diabetes: Standards of Medical care in Diabetes. Diabetes Care (2018), Volume 41, Supplement 1.

N. Instrument Name:

StatStrip Xpress Glucose Hospital Meter

O. System Descriptions:

1. Modes of Operation:

Does the applicant's device contain the ability to transmit data to a computer, webserver, or mobile device?

Yes or No X

Does the applicant's device transmit data to a computer, webserver, or mobile device using wireless transmission?

Yes _____ or No ____X____

2. Software:

FDA has reviewed applicant's Hazard Analysis and software development processes for this line of product types:

Yes X_____ or No ______

3. Specimen Identification:

There is no sample identification function with this device. Samples are applied directly to the test strip as they are collected.

4. Specimen Sampling and Handling:

The glucose test is intended to be used with capillary fingerstick whole blood, arterial, venous, neonatal heel stick and neonatal arterial. The blood sample is applied directly to the test strip by capillary action.

5. Calibration:

The meter does not require the user to input a test strip code or perform any other calibration.

6. Quality Control:

Three levels of aqueous ready to use glucose control solutions are available with this system (Level 1, Level 2, and Level 3). Recommendations on when to test the control materials are provided in the labeling. An acceptable range for each control level is printed on the vial label of the control being used.

P. Other Supportive Instrument Performance Characteristics Data Not Covered In The "Performance Characteristics" Section above:

1) Hematocrit Study:

As established in k060345 and k063821 to support the claimed hematocrit range of 20-65%.

2) <u>Altitude Study:</u>

As established in k060345 to support the use of the device up to 15,000 ft.

3) <u>Temperature and humidity studies:</u>

As established in k161856 to support the claimed operating condition range of 41° F - 104°F and 10-90% relative humidity.

4) Infection Control Studies:

The device is intended for multiple-patient use. Disinfection efficacy studies were performed in k150461 on the materials comprising the meter by an outside commercial testing laboratory demonstrating complete inactivation of hepatitis B virus (HBV) with the chosen disinfectant, Clorox Germicidal Wipes, EPA registration # 67619-12 was validated for use with the meter. Robustness studies were also performed by the sponsor in k150461 demonstrating that there was no change in performance or in the external materials of the modified StatStrip Glucose Hospital Meter after 10,950 cleaning and disinfection cycles (one cycle includes one cleaning wipe plus one disinfecting wipe) using the Clorox Germicidal Wipes to simulate 3 years of device use. Labeling was reviewed for adequate instructions for the validated cleaning and disinfection procedures.

5) <u>Electromagnetic Compatibility and Electrical Safety:</u>

Established in k060345.

Q. Proposed Labeling:

The labeling is sufficient and it satisfies the requirement of 21 CFR Part 809.10.

R. Conclusion:

The submitted information in this premarket notification is complete and supports a substantial equivalence decision.