K111985

Intronix Technologies Corporation Traditional 510(k) Premarket Submission Myoguide System

DEC 3 0 2011

Section 5 - 510(k) Summary

For

Myoguide System

1. Submission Sponsor

Intronix Technologies Corporation 26 McEwan Drive Suite 15 Bolton, Ontario L7E 1E6 CANADA Phone: (905) 951.3361 Fax: (905) 951.3192 Contact: Joe Wojewoda, Production and Quality Manager

2. Submission Correspondent

Emergo Group 611 West 5th Street, Third Floor Austin, TX 78701 Cell Phone: (508) 838.9139 Office Phone: (512) 327.9997 Fax: (512) 327.9998 Contact: Richard Vincins, Vice President, QA Email: <u>richard@emergogroup.com</u>

3. Date Prepared

June 20th 2011

4. Device Name

Trade/Proprietary Name: Myoguide System Common/Usual Name: Myoguide System Model 8008 Classification Name: Electrical Peripheral Nerve Stimulator Classification Regulation: 868.2775 Classification Panel: Anesthesiology Product Code: BXN, secondary GWL Device Class:_II

5. Predicate Devices

Medtronic A/S – Clavis EMG Device K062478 Xavant Technology – STIMPOD NMS450 K102084

6. Device Description

Myoguide is a battery powered, handheld, EMG amplifier with audio feedback, LCD EMG signal and device status display, and current stimulation ranging from 0 mA - 20 mA. This device is internally powered and rated for continuous use. The patient input connection is a type BF applied part. Myoguide will automatically power off after 30 minutes of inactivity to conserve battery life.

Myoguide is designed to amplify electrophysiological signals from muscle and provide audio feedback to assist clinicians in locating areas of muscle activity. The Stimulator can be used as an adjunct. Myoguide provides muscle and nerve localization information, to accurately guide and monitor needle electrode insertion, and/or injection of neuromodulator drugs, into a muscle in the human body. Any drug used will be that of the choice of the physician.

The large LCD display provides the complete system status at a glance. EMG audio, EMG signal display, EMG RMS Value, Integrated EMG signal strength and stimulation capability, increases efficacy for injection point localization. The simple control panel is intuitive and easy to operate.

Myoguide operates in two modes: "[EMG]" and "[Stimulation]". The default mode, "[EMG]", records electromyographic (EMG) signals from electrodes placed on the subject. The second mode, "[Stimulation]", enables Myoguide's onboard stimulator to stimulate through the needle electrode that was used to record the EMG. This enables the clinician to record and stimulate through the same needle electrode. The <Mode> switch is used to change the state of operation.

7. Intended Use

The Intronix Model 8008 Myoguide System (Myoguide) is a medical device intended as a stimulator for nerve localization as well as an aid for guidance of injections into the muscles.

8. Technological Characteristics and Substantial Equivalence

The following table compares the Myoguide System to the STIMPOD NMS450 and Clavis EMG predicate devices with respect to intended use, technological characteristics and principles of operation, providing more detailed information regarding the basis for the determination of substantial equivalence.

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Comparison Table

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Manufacturer	Intronix Technologies Corporation	Xavant Technology	Medtronic A/S	Myoguide System
Trade Name	Myoguide System	STIMPOD NMS450	Clavis EMG Device	Comparison to Predicate
510(k) Number	K111985	K102084	K062478	NA
Product Code	BXN, GWL	BXN	BXN, GWL	Same
Regulation	868.2775	868.2775	890.1375	The product code lists
Number				868.2775 as the regulation
				number. The Intronix
				Myoguide System has the
				same intended use as the
				predicate device, the
				Medtronic Clavis EMG
				device.
Regulation	Electrical peripheral nerve	Electrical peripheral nerve	Diagnostic electromyograph	See note above for the
Name	stimulator	stimulator		regulation number
Indications for	The Intronix Model 8008	This product is a nerve	CLAVIS is a medical device	Same
use:	Myoguide System (Myoguide)	stimulation device designed	intended as a stimulator for	
	is a medical device intended	to be used by an anesthetist	nerve localization as	
	as a stimulator for nerve	during	well as an aid for guidance of	
	localization as well as an aid	1. General Anaesthesia, for	injections into the muscle.	
	for guidance of injections into	the purpose of establishing		
	the muscles.	the efficacy of a		
		Neuromuscular		
		Blocking Agent using non-		
		invasive surface electrodes		
		(not supplied)		
		2. Regional Anaesthesia for		
		the purpose of		
		a. nerve mapping using the		
		non-invasive Nerve Mapping		
		Probe (supplied) and		

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Manufacturer	Intronix Technologies Corporation	Xavant Technology	Medtronic A/S	Myoguide System
Trade Name	Myoguide System	STIMPOD NMS450	Clavis EMG Device	Comparison to Predicate
		 b. nerve locating using invasive electrodes/needles (not supplied). 		
Overall Design	Myoguide is a ABS plastic	The STIMPOD NMS450 is a	Clavis EMG is a ABS plastic	The three instruments are
	enclosure, battery powered,	ABS plastic enclosure, battery	enclosure, battery powered,	identical in technology
	handheld, EMG amplifier with	powered, handheld, EMG	handheld, EMG amplifier with	aspects except the
	audio feedback, LCD EMG	amplifier with audio feedback,	audio feedback, and LCD EMG	Myoguide and STIMPOD
	signal and device status	LCD EMG signal and device	signal; Clavis EMG operates in	have an LCD display where
	display; Myoguide operates in	status display; STIMPOD	two modes: EMG and	the Clavis does not; this is
	two modes: EMG and	NMS450 operates in four	Stimulation	not a significant difference
	Stimulation	stimulation modes		as the Myoguide and
				STIMPOD displays the
				system status, stimulation
				settings, and EMG signal
				and utilizes audio indicators
				where the Clavis device only
	,			utilizes indicators lights and
				audio indicators
LCD Display	Yes; 160x64 resolution with or	Yes; with or without backlight	None	The Myoguide has an LCD
	without backlight			display for complete device
			-	status and displays the EMG
				signal same as the
				STIMPOD; this is not a
				significant difference as the
				Myoguide displays the EMG
				signal and utilizes audio
				indicators where the Clavis
				device only utilizes
				indicators lights and audio
				indicators

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Manufacturer	Intronix Technologies Corporation	Xavant Technology	Medtronic A/S	Myoguide System
Trade Name	Myoguide System	STIMPOD NMS450	Clavis EMG Device	Comparison to Predicate
Mode of Operation	Continuous operation	Continuous operation	Continuous operation	Same
Stimulation Wave	Square	Square	Square	Same
Stimulation Pulse Rate	1 Hz, 3 Hz, 5 Hz, 7 Hz, or 10 Hz	1 Hz, 2 Hz, 5 Hz, 50 Hz, or 100 Hz	1 Hz or 2 Hz	Same
Stimulation Pulse Width	50, 100, 200 or 500 µs	0.05, 0.1, 0.3, 0.5 or 1.0 ms	0.1 ms or 0.2 ms	Same
Stimulation Level	0 mA to 20 mA, steps by 1.0 mA	0 mA to 80 mA, steps by 0.2 mA	0 mA to 15 mA, steps by 1.0 mA	Same
Electrode Impedance	200Ω to 10kΩ	2000Ω to 0kΩ	200Ω to 7kΩ	Same
Complies with IEC 60601-1	Yes	Yes	Yes	Same
Complies with IEC 60601-1-2	Yes	Yes	Yes	Same
Complies with IEC 60601-2-40	Yes	Yes	Yes	Same
Power Supply	Internally powered, 4AA alkaline or rechargeable	Internally powered, 4AA alkaline or rechargeable	Internally powered, 9V alkaline or rechargeable	Same
Weight	225g (8 oz)	130g (4.6 oz)	ballely 185 g (6.5 oz)	Same
Dimensions (LxWxH)	150 × 100 × 54 mm (5.9" × 4.0" × 2.1")	145 x 90 x 30 mm (5.7" x 3.5" x 1.2")	140 x 80 x 20 mm	Same
Operating Conditions	+10°C to +40°C (+50°F to +104°F) 30 – 75% rH	+10°C to +40°C (+50°F to +104°F) 30 – 75% rH	+10°C to +40°C (+50°F to +104°F) 30 – 75% rH	Same
Input Cable	Three input (anode, anode, needle) with proprietary instrument connection port	Three input (anode, anode, needle) with proprietary instrument connection port	Three input (anode, anode, needle) with proprietary instrument connection port	Same

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Manufacturer	Intronix Technologies	Xavant Technology	Medtronic A/S	
	Corporation			wyoguide system
Trade Name	Myoguide System	STIMPOD NMS450	Clavis EMG Device	Comparison to Predicate
		A.		
Input Cable	Single input adapter for	Not available	Not available	N/A
Adapter	standard touch-proof			
	connection			

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9. Non-Clinical Testing

The device's hardware and software development, verification, and validation have been carried out in accordance with FDA guidelines. The software was tested against the established Software Design Specifications for each of the test plans to assure the device performs as intended. The Device Hazard analysis was completed and risk control implemented to reduce any identified hazards. The testing results supports that all the hardware specifications and software specifications have met the acceptance criteria for the device. The Myoguide System passed all testing and supports the claims of substantial equivalence and safe operation.

The Myoguide System complies with the applicable voluntary standards for Electromagnetic Compatibility and Safety. The device passed all the electrical and safety testing according to national and international standards.

10. Clinical Testing

There was no clinical testing required to support the medical device as the indications for use is equivalent to the predicate device. The substantial equivalence of the device is supported by the non-clinical testing. The verification and validation testing of the device software and electrical safety and EMC testing of the device was found to acceptable and supports the claims of substantial equivalence.

11. Conclusion

By definition, a device is substantially equivalent to a predicate device when the device has the same intended use and the same technological characteristics as the previously cleared predicate device. Or the device has the same intended use and different technological characteristics that can be demonstrated that the device is substantially equivalent to the predicate devices, and that the new device does not raise different questions regarding its safety and effectiveness as compared to the predicate devices.

It has been shown in this 510(k) submission that the difference between the Myoguide System and the predicate devices does not raise any questions regarding its safety and effectiveness. The Myoguide System, as designed and manufactured, is determined to be substantially equivalent to the referenced predicate devices.



Food and Drug Administration 10903 New Hampshire Avenue Document Control Room –WO66-G609 Silver Spring, MD 20993-0002

DEC 3 0 2011

Intronix Technologies Corporation C/O Mr. Richard Vincins, Vice President, Quality Affairs Emergo Group 611 West 5th Street Austin, Texas 78701

Re: K111985

Trade/Device Name: Myoguide System Model 8008 Regulation Number: 21 CFR 868.2775 Regulation Name: Electrical Peripheral Nerve Stimulator Regulatory Class: II Product Code: BXN Dated: December 9, 2011 Received: December 13, 2011

Dear Mr. Vincins:

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. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to 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); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); 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.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please go to <u>http://www.fda.gov/AboutFDA/CentersOffices/CDRH/CDRHOffices</u>/<u>ucm115809.htm</u> for the Center for Devices and Radiological Health's (CDRH's) Office of Compliance. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to <u>http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm</u> for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

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) 796-7100 or at its Internet address http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm.

Sincerely yours,

the for

Anthony D. Watson, B.S., M.S., M.B.A. Director Division of Anesthesiology, General Hospital, Infection Control and Dental Devices Office of Device Evaluation Center for Devices and Radiological Health

Enclosure

Section 4 - Indications for Use Statement

510(k) Number (if known): Not Assigned

Device Name: Myoguide System

Indications for Use:

The Intronix Model 8008 Myoguide System (Myoguide) is a medical device intended as a stimulator for nerve localization as well as an aid for guidance of injections into the muscles.

Prescription Use ____X (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-Ott) Division of Anesthesiology, General Hospital Infection Control, Dental Devices

510(k) Number: ___K || | 9 8 5