

**510(k) SUBSTANTIAL EQUIVALENCE DETERMINATION
DECISION SUMMARY
ASSAY ONLY TEMPLATE**

A. 510(k) Number:

K501478

B. Purpose for Submission:

To add Rifampin to the MicroScan® Synergies plus™ Gram-Positive MIC/Combo Panels

C. Measurand:

Rifampin at 0.25 - 8 µg/mL

D. Type of Test:

Quantitative and Qualitative growth based detection algorithm using optics light detection

E. Applicant:

Dade Behring Inc,
MicroScan®

F. Proprietary and Established Names:

MicroScan® Synergies plus™ Gram-Positive MIC/Combo Panels

G. Regulatory Information:

1. Regulation section:

866.1645 - Fully automated short-term incubation cycle antimicrobial susceptibility system
866.1640 - Antimicrobial Susceptibility Test Powder

2. Classification:

Class II

3. Product code:

LON – Automated AST system short incubation

LRG-Instrument for Auto Reader & Interpretation of Overnight Antimicrobial Susceptibility Systems
JWY - Manual Antimicrobial Susceptibility Test Systems
LTT – Panels, Test, Susceptibility, Antimicrobial

4. Panel:
83 Microbiology

H. Intended Use:

1. Intended use(s):

For use with MicroScan® Synergies plus™ Panels read on the WalkAway® -SI System (including upgraded WalkAway® -40 or WalkAway® -96 to meet WalkAway® SI equivalence). MicroScan® panels are designed for use in determining quantitative and/or qualitative antimicrobial agent susceptibility and/or identification to the species level of colonies, grown on solid media, of rapidly growing aerobic and facultative anaerobic gram-positive cocci and Listeria.

2. Indication(s) for use:

The testing of rifampin at concentrations of 0.25 – 8 µg/mL to the gram-positive test panel for testing *Staphylococcus* spp. at 4.5-16 hours or 16-20 hours for a overnight reading.

3. Special conditions for use statement(s):

- Turbidity method of inoculum preparation only.
- For prescription use only.

4. Special instrument requirements:

Not Applicable

I. Device Description:

Each panel contains two control wells: a negative control well, and a growth control well (contains test medium without antibiotic). Antibiotics are diluted in water, buffer, or minute concentrations of broth to selected concentrations prior to dehydration of the panels. The panel is rehydrated and inoculated at the same time with 0.1 ml of suspension prepared by the turbidity method (inoculum prepared in 0.4% saline with Pluroinc®, then 0.1ml transferred to 25ml of inoculum Synergies plus Pos Broth with Pluronic®) for a final inoculum concentration of 3-7 X 10⁵ CFU/ml. Panels are incubated in a Walk-Away® System and read periodically starting at 4.5 hours until sufficient growth to determine the MIC. Alternately the panels may be incubated at 35° C in a non-CO₂ for 16-24 hours and read by visual observation of growth.

J. Substantial Equivalence Information:

1. Predicate device name(s):

MicroScan® Dried Gram-Positive and Gram-Negative MIC/Combo Panels

2. Predicate 510(k) number(s):

k862140

k020185

3. Comparison with predicate:

Similarities		
Item	Device	Predicate
Intended use	MicroScan® panels are designed for use in determining quantitative and/or qualitative antimicrobial agent susceptibility and/or identification to the species level of colonies, grown on solid media, of rapidly growing aerobic and facultative anaerobic organisms	Same
Specimen	Isolated colonies from culture used	Same
Inoculum	Inoculum density to 0.5 McFarland standard	Same
Incubation	<16 hours 16 – 24 hours	Same
Results	Quantitative with qualitative interpretations	Same
Technology	Growth based	Same
Differences		
Item	Device	Predicate
Panels	Dried rifampin in water	Dried clindamycin or gentamicin in broth
Reading	Uses both a ≤ 16 hour read and overnight read method in the same system	Overnight system uses only the overnight reading method and <16 hour instruments use only the <16 hour read method.
Inoculum preparation	Turbidity method of inoculation only.	Inoculum prepared using either the Turbidity method or Prompt® system
Instrument	WalkAway® -SI System or equivalent	autoScan® -4 or WalkAway®
Antibiotic	Rifampin at 0.25 – 8 µg/mL	Different concentrations depending on the antibiotic

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

Class II Special Controls Guidance Document: Antimicrobial Susceptibility Test (AST) Systems; Guidance for Industry and FDA”; Clinical and Laboratory Standards Institute (CLSI) M7 (M100-S15) “Methods for Dilution Antimicrobial Susceptibility Tests for Bacteria That Grow Aerobically; Approved Standard”.

L. Test Principle:

The WalkAway® SI uses a Colorimetric Optics System consisting of a color wheel/lamp assembly and a Photosensor. There is an initial read at 2.5 hours with a possible final read at 4.5, 5.5, 6.5, 8, 12, 16, or 18 hours (overnight instrument readings, manual readings) depending on the growth rate of the organism being tested. The time of final read is dependent on the user customization, the growth rate of the organism, and the sensitivity of the automatic reader since cell densities below 2×10^7 cells/ml are not detected.

Deleted: , or
Deleted:)
Deleted:

M. Performance Characteristics (if/when applicable):

1. Analytical performance:

a. *Precision/Reproducibility:*

Reproducibility was demonstrated using 270 isolates, tested at 3 sites on 3 separate days in triplicate. The study included the testing on the WalkAway® SI read at <16 hours, WalkAway® 16-18 hour readings and manual readings at 16-20 hours incubation. The WalkAway® SI had 3 results that were not readable at <16 hours. All reading methods were overall reproducible at >95%, except for the <16 hour readings. The result from one site was lower than expected providing results just below the acceptable criteria.

b. *Linearity/assay reportable range:*

Not Applicable

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

The recommended QC isolate was tested a sufficient number of times with acceptable results on all testing days with the reference method. All Synergy Plus panels, which are configured to produce readings at <16 hours, provided QC results in the 4.5-16 hour window. Quality control results demonstrated the ability of the different reading parameters (manual and instrument) to produce acceptable results. The following table provides the frequency of the results in each concentration tested with the expected range stated.

Results					
Organism	Conc in $\mu\text{g/mL}$	# reference	MicroScan®		
			Manual overnight	Instrument overnight	<16 hours Instrument
<i>E. faecalis</i> ATCC 29212 Range 0.5 – 4 $\mu\text{g/mL}$	≤ 0.25				
	0.5	29	22	24	24
	1	1	8	6	6
	2				
	4				
	8				
	>8				
<i>S. aureus</i> ATCC 29213 Range ≤ 0.25 $\mu\text{g/mL}$	≤ 0.25	30	29	29	30
	0.5		1	1	
	1				
	2				
	4				
	8				
	>8				

No trending was observed. The modes for the reference method and the test device are the same.

Inoculum density control: A turbidity meter was used for the turbidity inoculation method. Turbidity inoculum verification provided.

d. Detection limit:

Not Applicable

e. Analytical specificity:

Not Applicable

f. Assay cut-off:

Not Applicable

2. Comparison studies:

a. Method comparison with predicate device:

Clinical testing was conducted at 3 sites using fresh isolates supplemented with stock isolates. A total of 301 gram-positive isolates were tested of which 263 were fresh isolates and 38 were stock isolates. There were 75 challenge

isolates tested at one site and compared to the reference broth dilution result mode that was determined by previous testing of each isolate multiple times in the recommended reference panel. The Synergies plus™ readings were obtained at times between 4.5 and 16 hours of incubation for > 95% of the results. An additional comparison was done with readings on the instrument after overnight incubation and also read manually when incubated 16- 18 hours. Performance by these alternate reading methods was also acceptable with no apparent differences or trends.

The recommended CLSI reference method was followed with the exception of the use of a small amount (0.1%) Pluronic® in the final inoculum. A validation of the use of Pluronic® in the frozen reference panels was conducted. Similar calculations for the different reading methods were performed with very little difference. QC was also performed with minimal difference apparent in the results.

The chart below demonstrates the performance of all three reading methods (Synergies plus™ readings at <16 hours, overnight on the WalkAway® and manually read at 18 hours using the touchScan®-SR) when compared to the reference method.

Reading Methods	total	EA	%EA	Total evaluable	EA of evaluable	%EA	CA	%CA	#R	min	maj	vmj
<16 hours	374	370	98.9	18	18	100.0	365	97.6	22	7	2	0
Overnight Instrument	376	375	99.7	19	19	100.0	367	97.6	22	8	1	0
Overnight Manual	376	374	99.5	19	17	89.5	362	96.3	22	13	1	0

EA-Essential Agreement

CA-Category Agreement

R-resistant isolates

maj-major discrepancies

vmj-very major discrepancies

min- minor discrepancies

Evaluable results are those that fall within the test range of the reference method and could also be on-scale with the new device if within the plus/minus one dilution variability. EA is when there is agreement between the reference method and the MicroScanMicroScan® Synergies plus® within plus or minus one serial two-fold dilution of antibiotic. CA is when the interpretation of the reference method agrees exactly with the interpretation of the MicroScan® Synergies plus result.

b. *Matrix comparison:*

Not Applicable

3. Clinical studies:

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. Clinical cut-off:

Not Applicable

5. Expected values/Reference range:

Staphylococcus spp. interpretive criteria:

≤ 1 (Susceptible), 2 (Intermediate), ≥ 4 (Resistant)

The expected value range, interpretive criteria and QC values are included in the package insert.

N. Proposed Labeling:

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

O. Conclusion:

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