

GE Healthcare
GE Medical Systems Ultrasound and Primary Care Diagnostics, LLC
% Mr. Bryan Behn
Regulatory Affairs Director
9900 Innovation Drive
WAUWATOSA WI 53226

September 10, 2021

Re: K211488

Trade/Device Name: LOGIQ E10 Regulation Number: 21 CFR 892.1550

Regulation Name: Ultrasonic Pulsed Doppler Imaging System

Regulatory Class: Class II Product Code: IYN, IYO, ITX

Dated: August 11, 2021 Received: August 13, 2021

Dear Mr. Behn:

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. Although this letter refers to your product as a device, please be aware that some cleared products may instead be combination products. The 510(k) Premarket Notification Database located at https://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfpmn/pmn.cfm identifies combination product submissions. 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 <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); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803) for

devices or postmarketing safety reporting (21 CFR 4, Subpart B) for combination products (see https://www.fda.gov/combination-products/guidance-regulatory-information/postmarketing-safety-reporting-combination-products); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820) for devices or current good manufacturing practices (21 CFR 4, Subpart A) for combination products; and, if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to https://www.fda.gov/medical-device-problems.

For comprehensive regulatory information about medical devices and radiation-emitting products, including information about labeling regulations, please see Device Advice (https://www.fda.gov/medical-devices/device-advice-comprehensive-regulatory-assistance) and CDRH Learn (https://www.fda.gov/training-and-continuing-education/cdrh-learn). Additionally, you may contact the Division of Industry and Consumer Education (DICE) to ask a question about a specific regulatory topic. See the DICE website (https://www.fda.gov/medical-devices/device-advice-comprehensive-regulatory-assistance/contact-us-division-industry-and-consumer-education-dice">https://www.fda.gov/medical-devices/device-advice-comprehensive-regulatory-assistance/contact-us-division-industry-and-consumer-education-dice) for more information or contact DICE by email (DICE@fda.hhs.gov) or phone (1-800-638-2041 or 301-796-7100).

Sincerely,

For

Thalia T. Mills, Ph.D.

Director
Division of Radiological Health
OHT7: Office of In Vitro Diagnostics
and Radiological Health
Office of Product Evaluation and Quality
Center for Devices and Radiological Health

Enclosure



GE Healthcare 510(k) Premarket Notification Submission

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Food and Drug Administration

Expiration Date: 06/30/2023

Form Approved: OMB No. 0910-0120

Indications for Use

510(k) Number (if known)

K211488

Device Name
LOGIQ E10

Indications for Use (Describe)
LOGIQ E10 is intended for use by a qualified physician for ultrasound evaluation of Fetal / Obstetrics; Abdominal (including Renal, Gynecology/Pelvic); Pediatric; Small Organ (Breast, Testes, Thyroid); Neonatal Cephalic; Adult Cephalic; Cardiac (Adult and Pediatric); Peripheral Vascular; Musculo-skeletal Conventional and Superficial; Urology (including Prostate); Transrectal; Transvaginal; Transesophageal and Intraoperative (Abdominal and Vascular).

Modes of operation include: B, M, PW Doppler, CW Doppler, Color Doppler, Color M Doppler, Power Doppler, Harmonic Imaging, Coded Pulse, 3D/4D Imaging mode, Elastography, Shear Wave Elastography, Attenuation Imaging and Combined modes: B/M, B/Color, B/PWD, B/Color/PWD, B/Power/PWD. The LOGIQ E10 is intended to be used in a hospital or medical clinic.

Type of Use (Select one or both, as applicable)

Prescription Use (Part 21 CFR 801 Subpart D)

Over-The-Counter Use (21 CFR 801 Subpart C)

CONTINUE ON A SEPARATE PAGE IF NEEDED.

This section applies only to requirements of the Paperwork Reduction Act of 1995.

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510(k) Premarket Notification Submission

K211488

510(k) Summary

In accordance with 21 CFR 807.92 the following summary of information is provided:

Date: May 10, 2021

Submitter: GE Medical Systems Ultrasound and Primary Care Diagnostics,

LLC

9900 Innovation Dr Wauwatosa, WI 53226

Manufacturer: GE Medical Systems Ultrasound and Primary Care Diagnostics,

LLC

9900 Innovation Dr Wauwatosa, WI 53226

Primary Contact Person: Bryan Behn

Regulatory Affairs Director

GE Healthcare

E: bryan.behn@ge.com T: (262) 247-5502

Alternate Contact Person: Elizabeth Wentworth

Regulatory Affairs Specialist

GE Healthcare

<u>Device:</u> <u>Trade Name:</u> LOGIQ E10 Common/Usual Name: LOGIQ E10

Classification Names: Class II

<u>Product Code:</u> IYN (primary), IYO, ITX (secondary)

Ultrasonic Pulsed Doppler Imaging System. 21CFR 892.1550,

90-IYN

Ultrasonic Pulsed Echo Imaging System, 21CFR 892.1560, 90-

IYO

Diagnostic Ultrasound Transducer, 21 CFR 892.1570, 90-ITX

Primary Predicate Device: K200158 LOGIQ E10 Diagnostic Ultrasound System

Reference Device(s): Vivid E95 K202658 Diagnostic Ultrasound System

<u>Device Description:</u> The LOGIQ E10 is a full featured, track 3, general purpose

diagnostic ultrasound system which consists of a mobile console

that provides digital acquisition, processing and display capability. The user interface includes a computer keyboard, specialized controls, LCD touch screen and color widescreen monitor (OLED and HDU monitors). The system utilizes a variety of linear, curved, phased, dual, and matrix array transducers to support the broad imaging capabilities.



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Indications for Use:

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Technology:

The LOGIQ E10 employs the same fundamental scientific technology as its predicate device(s).

<u>Determination of</u> <u>Substantial Equivalence:</u>

Comparison to Predicates

The proposed LOGIQ E10 is substantially equivalent to the predicate devices. The following is an overview of the differences between the proposed LOGIQ E10 and the predicate LOGIQ E10 (K200158). The systems are all intended for diagnostic ultrasound imaging and fluid flow analysis.

- The LOGIQ E10 and predicate LOGIQ E10 systems have the same imaging modes.
- The systems are manufactured with materials which have been evaluated and found to be safe for the intended use of the device.
- The systems have acoustic power levels which are below the applicable FDA limits.
- The LOGIQ E10 and predicate LOGIQ E10 systems have similar capability in terms of performing measurements, capturing digital images, reviewing and reporting studies.
- The LOGIQ E10 and predicate LOGIQ E10 systems have been designed in compliance with approved electrical and physical safety standards.
- The transducers supported in proposed LOGIQ E10 and predicate LOGIQ E10 are identical except:
 - adding a new transducer, ML4-20-D, ML4-20VN-D which is similar to the previously cleared ML6-15-D



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- The software features supported in proposed LOGIQ E10 and predicate LOGIQ E10 are identical except:
 - UGAP has been added to the C2-9(VN)-D probes
 - SWE has been added to the L3-12D probe
 - Contrast and B-Flow have been added to the L6-24-D
 - Respirometer support
- Other minor software feature modifications are: improved measurement updates and CTO improvements
- EZ Imaging, Hepatic Assistant and SRI have minor enhancements and workflow improvements to existing features.
- Device Management 2.0 and Remote Expert Training have been added

Summary of Non-Clinical Tests:

The device has been evaluated for acoustic output, biocompatibility, cleaning and disinfection effectiveness as well as thermal, electrical, electromagnetic and mechanical safety, and has been found to conform with applicable medical device safety standards. The LOGIQ E10 and its applications comply with voluntary standards:

- AAMI/ANSI ES60601-1, Medical Electrical Equipment Part 1: General Requirements for Safety, 2005/(R)2012 And A1:2012
- IEC 60601-1-2 Medical Electrical Equipment Part 1-2: General Requirements for Basic Safety and Essential Performance – Collateral Standard: Electromagnetic Disturbance - Requirements and Tests, 2014
- IEC 60601-2-37, Medical Electrical Equipment Part 2-37: Particular Requirements for the Safety of Ultrasonic Medical Diagnostic and Monitoring Equipment, 2015
- ISO 10993-1, Biological Evaluation of Medical Devices-Part 1: Evaluation and Testing Within A Risk Management Process, 2018
- ISO 14971, Application of risk management to medical devices, 2012
- NEMA PS 3.1 3.20, Digital Imaging and Communications in Medicine (DICOM) Set. (Radiology) 2016

The following quality assurance measures are applied to the development of the system:

Risk Analysis



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- Requirements Reviews
- Design Reviews
- Testing on unit level (Module verification)
- Integration testing (System verification)
- Performance testing (Verification)
- Safety testing (Verification)

Transducer materials and other patient contact materials are biocompatible.

Summary of Clinical Tests:

The subject of this premarket submission, LOGIQ E10, did not require clinical studies to support substantial equivalence.

Conclusion: GE Healthcare considers the LOGIQ E10 to be as safe, as effective, and performance is substantially equivalent to the predicate device(s).