

Shanghai United Imaging Healthcare Co., Ltd. % Shumei Wang QM & RA VP No. 2258 Chengbei Road, Jiading Industrial District Shanghai, Shanghai 201807 CHINA

August 4, 2020

Re: K193210

Trade/Device Name: HYPER DLR Regulation Number: 21 CFR 892.1200

Regulation Name: Emission computed tomography system

Regulatory Class: Class II

Product Code: KPS Dated: June 24, 2020 Received: June 29, 2020

Dear Shumei Wang:

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

DEPARTMENT OF HEALTH AND HUMAN SERVICES Food and Drug Administration

Indications for Use

510(k) Number (if known)

Form Approved: OMB No. 0910-0120

Expiration Date: 06/30/2020 See PRA Statement below.

K193210							
Device Name HYPER DLR							
Indications for Use (Describe) HYPER DLR is an image processing function intended to be used by radiologists and nuclear medicine physicians to reduce noise of the fluorodeoxyglucose (FDG) PET images.							
Type of Use (Select one or both, as applicable)							
CONTINUE ON A SEPARATE PAGE IF NEEDED.							

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510 (k) SUMMARY

K193210

1. Date of Preparation

June 24, 2020

2. Sponsor Identification

Shanghai United Imaging Healthcare Co., Ltd.

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Contact Person: Shumei Wang

Position: QM&RA VP

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Email: shumei.wang@united-imaging.com

3. Identification of Proposed Device

Trade Name: HYPER DLR

Common Name: Emission Computed Tomography System

Model(s): HYPER DLR

Regulatory Information

Regulation Number: 21 CFR 892.1200

Regulation Name: Emission Computed Tomography System

Regulatory Class: II Product Code: KPS Review Panel: Radiology

4. Identification of Predicate Device(s)

Predicate Device 1:

510(k) Number: K172143

Device Name: Emission Computed Tomography System

Model(s): uMI 780

Regulatory Information

Regulation Number: 21 CFR 892.1200

Regulation Name: Emission Computed Tomography System

Regulatory Class: II Product Code: KPS, JAK Review Panel: Radiology

Predicate Device 2:

510(k) Number: K182237

Device Name: Emission Computed Tomography System

Model(s): uMI 550



Regulatory Information

Regulation Number: 21 CFR 892.1200

Regulation Name: Emission Computed Tomography System

Regulatory Class: II Product Code: KPS, JAK Review Panel: Radiology

5. Device Description:

HYPER DLR is a software-only device. HYPER DLR is intended to be implemented on previously cleared PET/CT devices uMI 550 (K182237) and uMI 780 (K172143). HYPER DLR serves as an alternative to the existing image smoothing options that are available on the predicate devices. HYPER DLR is an image post-processing technique which uses a pre-trained neural network to predict low noise PET image from high noise PET image. After training, the network could extract the noise component from the image, thus reducing the image noise.

6. Indications for Use

HYPER DLR is an image processing function intended to be used by radiologists and nuclear medicine physicians to reduce noise of the fluorodeoxyglucose (FDG) PET images.

7. Comparison of Technological Characteristics with the Predicate Devices

A comparison between the technological characteristics of proposed and predicate devices is provided as below.

ITEM	Predicate Device 1 uMI 780 (K172143) including a post- smoothing function for PET image reconstruction	Predicate Device 2 uMI 550 (K182237) including a post- smoothing function for PET image reconstruction	Proposed Device HYPER DLR	NOTE
Image Processing Location	Onsite on the facility PET/CT reconstruction computer.	Onsite on the facility PET/CT reconstruction computer.	Onsite on the facility PET/CT reconstruction computer.	Same
Operating system	Windows	Windows	Windows	Same
Workflow	Support online & offline	Support online & offline	Support online & offline	Same
Protocols	Standard scanner protocols	Standard scanner protocols	Standard scanner protocols	Same
Algorithm description	The post-smoothing function uses Gaussian filtering to reduce the noise in	The post-smoothing function uses Gaussian filtering to reduce the noise in	The software employs a convolutional neural network	Gaussian filtering suppresses the high frequency



the PET images. The	the PET images. The	based method to	component of
Gaussian filtering	Gaussian filtering	re-generate the	the image,
works by using the	works by using the	value for each	which includes
3D Gaussian	3D Gaussian	pixel. The	noise and image
distribution as a	distribution as a	network extracts	details. On the
point-spread	point-spread	the noise	contrary,
function. And the	function. And the	component from	convolutional
filtering process is	filtering process is	the image, while	neural network
achieved by	achieved by	retains the other	is able to
convolving the	convolving the	useful	distinguish the
Gaussian filter with	Gaussian filter with	components such	noise
the reconstructed	the reconstructed	as image details.	component and
PET image.	PET image.		the image
			details, and only
			removes the
			noise
			component from
			the image.

HYPER DLR utilizes the same hardware with the predicate devices and does not introduce any new restrictions on use. The differences do not affect the safety and the effectiveness.

8. Performance Data

Non-Clinical Testing

Non-clinical testing including image performance tests and clinical image evaluation were conducted for the HYPER DLR during the product development. UNITED IMAGING HEALTHCARE claims conformance to the following standards and guidance:

Software

- ➤ NEMA PS 3.1-3.20(2011): Digital Imaging and Communications in Medicine (DICOM)
- ➤ IEC 62304: Medical Device Software software life cycle process
- Guidance for the Content of Premarket Submissions for Software Contained in Medical Devices
- Content of Premarket Submissions for Management of Cybersecurity in Medical Devices

Other Standards and Guidance

- ➤ ISO 14971: Medical Devices Application of risk management to medical devices
- ➤ Code of Federal Regulations, Title 21, Part 820 Quality System Regulation
- Code of Federal Regulations, Title 21, Subchapter J Radiological Health

Software Verification and Validation

Software documentation for a Moderate Level of Concern software per FDA'



Guidance Document "Guidance for the Content of Premarket Submissions for Software Contained in Medical Devices" is included as a part of this submission. The risk analysis was completed and risk control was implemented to mitigate identified hazards. The testing results show that all the software specifications have met the acceptance criteria. Verification and validation testing of the proposed device was found acceptable to support the claim of substantial equivalence.

UNITED IMAGING HEALTHCARE conforms to the Cybersecurity requirements by implementing a process of preventing unauthorized access, modification, misuse or denial of use, or unauthorized use of information that is stored, accessed, or transferred from a medical device to an external recipient. Cybersecurity information in accordance with guidance document "Content of Premarket Submissions for Management of Cybersecurity in Medical Devices" is included in this submission.

Performance Verification

Engineering bench testing was performed to support substantial equivalence and the product performance claims. The evaluation and analysis used the identical raw datasets obtained on UIH's uMI 780 and uMI 550, and then applies both HYPER DLR and Gaussian filtering to do image de-noising. The resultant images were then compared for:

- Peak signal to noise ratio
- Structural similarity index
- > Pearson correlation coefficient
- Signal to noise ratio (SNR)
- > Contrast to noise ratio (CNR)
- Normalized root mean square error
- ➤ Bland-Altman plot of body & brain VOI SUVmean values

Bench test showed overall image quality improvement based on the commonly used quantitative metrics. HYPER DLR can significantly improve SNR and CNR while preserving image consistency.

Clinical Image Evaluation

The clinical image evaluation was performed by comparing HYPER DLR with Gaussian filtering. Each image was read by board-certified nuclear medicine physicians who provided an assessment of both image noise and overall image quality. The results of the evaluation indicated that HYPER DLR performed lower image noise than Gaussian filtering while the image quality was sufficient for clinical diagnosis.

Additional clinical image evaluation were performed for typical clinical scan times of uMI 550 and uMI 780 systems. Under all the evaluated scan time, clinical evaluation shows that the HYPER DLR produces lower or equivalent image noise and better or equivalent image quality compared with Gaussian filtering. And all the HYPER DLR images are of diagnostic quality.

Clinical Testing

No Clinical Study is included in this submission.

9. Conclusions

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The changes associated with HYPER DLR do not change the indications for use from the predicate devices, and represent equivalent technological characteristic, with no impact on control mechanism, operating principle, and energy type. HYPER DLR is substantially equivalent as safety as the legally marketed predicate devices.

HYPER DLR was developed under UIH's quality management system. Design verification, along with bench testing and the clinical image evaluation demonstrate that HYPER DLR is substantially equivalent as effective as the legally marketed predicate devices.

Based on the comparison and analysis above, the proposed device has similar performance, equivalent safety and effectiveness as the predicate devices. The differences above between the proposed device and predicate devices do not affect the intended use, safety and effectiveness. And no issues are raised regarding to safety and effectiveness. The proposed device is determined to be Substantially Equivalent (SE) to the predicate devices.