

July 9, 2021

bioMérieux, Inc. Debra Broyles Sr. Regulatory Affairs Specialist 595 Anglum Road Hazelwood, Missouri 63042

Re: K201675

Trade/Device Name: VITEK 2 AST-Gram Negative Meropenem ($\leq 0.25 - \geq 16 \,\mu g/mL$)

Regulation Number: 21 CFR 866.1645

Regulation Name: Fully Automated Short-Term Incubation Cycle Antimicrobial Susceptibility System

Regulatory Class: Class II

Product Code: LON, LTW, LTT

Dated: June 18, 2020 Received: June 19, 2020

Dear Debra Broyles:

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 and Part 809); 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/training-and-continuing-education/cdrh-learn) 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,

Ribhi Shawar, Ph.D. (ABMM)
Chief
General Bacteriology and Antimicrobial Susceptibility
Branch
Division of Microbiology Devices
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

Form Approved: OMB No. 0910-0120

Expiration Date: 06/30/2023 See PRA Statement below.

510(k) Number (if known)	
Device Name	
Indications for Use (Describe)	
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)

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

CONTINUE ON A SEPARATE PAGE IF NEEDED.

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510(k) SUMMARY

VITEK® 2 AST-Gram Negative Meropenem (≤0.25 - ≥16 μg/mL)

510(k) Submission Information:

Submitter's Name: bioMérieux, Inc.

Address: 595 Anglum Road

Hazelwood, MO 63042

Contact Person: Debra Broyles

Senior Regulatory Affairs Specialist

Phone Number: 314 -731-8805

Fax Number: 314-731-8689

Date of Preparation: December 8, 2020

B. Device Name:

Formal/Trade Name: VITEK® 2 AST-Gram Negative Meropenem (≤0.25 - ≥16

 $\mu g/mL$)

Classification Name: 21 CFR 866.1645

Fully Automated Short-Term Incubation Cycle

Antimicrobial Susceptibility System Product Code(s): LON, LTW, LTT

Common Name: VITEK® 2 AST-GN Meropenem ($\leq 0.25 - \geq 16 \,\mu\text{g/mL}$)

C. Predicate Device: VITEK® 2 AST-GN Eravacycline ($\leq 0.12 -> 4$

 $\mu g/mL$) (K191766)

D. Device Description:

The principle of the VITEK® 2 AST cards is based on the microdilution minimum inhibitory concentration (MIC) technique reported by MacLowry and Marsh $^{(1)}$ and Gerlach $^{(2)}$. The VITEK® 2 AST card is essentially a miniaturized, abbreviated and automated version of the doubling dilution technique $^{(3)}$.



Each VITEK® 2 AST card contains 64 wells. A control well which only contains microbiological culture media is resident on all cards. The remaining wells contain premeasured portions of a specific antibiotic combined with culture media. The bacterial or yeast isolate to be tested is diluted to a standardized concentration with 0.45-0.5% saline before being used to rehydrate the antimicrobial medium within the card. The VITEK® 2 System automatically fills, seals and places the card into the incubator/reader. The VITEK® 2 Compact has a manual filling, sealing and loading operation. The VITEK® 2 Systems monitor the growth of each well in the card over a defined period of time. At the completion of the incubation cycle, a report is generated that contains the MIC value along with the interpretive category result for each antibiotic contained on the card.

VITEK® 2 AST-GN Meropenem ($\leq 0.25 - \geq 16 \,\mu\text{g/mL}$) has the following concentrations in the card: 0.5, 1, 2, 4 and 8 $\,\mu\text{g/mL}$ (equivalent standard method concentration by efficacy in $\,\mu\text{g/mL}$).

E. Substantial Equivalence Information:

The similarities and differences of the VITEK® 2 AST-GN Meropenem (\leq 0.25 - \geq 16 µg/mL) when compared to the predicate device, VITEK® 2 AST-GN Eravacycline (\leq 0.12 - \geq 4 µg/mL), are described in the **Table 1** below.

Table 1: Substantial Equivalence

Table 1. Substantial Equivalence					
Item	Device: VITEK® 2 AST-Gram Negative Meropenem (≤0.25 - ≥16 μg/mL)	Predicate: VITEK [®] 2 AST-GN Eravacycline (≤0.12 −≥ 4 μg/mL) (K191766)			
	Similarities				
Intended Use	VITEK® 2 AST-Gram Negative Meropenem is designed for antimicrobial susceptibility testing of Gram negative bacilli and is intended for use with the VITEK® 2 and VITEK® 2 Compact Systems as a laboratory aid in the determination of <i>in vitro</i> susceptibility to antimicrobial agents. VITEK® 2 AST-Gram Negative Meropenem in is a quantitative test. Meropenem has been shown to be active against most strains of the microorganisms listed below, according to the FDA label for this antimicrobial.	VITEK® 2 AST-Gram Negative Eravacycline is designed for antimicrobial susceptibility testing of Gram negative bacilli and is intended for use with the VITEK® 2 and VITEK® 2 Compact Systems as a laboratory aid in the determination of <i>in vitro</i> susceptibility to antimicrobial agents. VITEK® 2 AST-Gram Negative Eravacycline is a quantitative test. Eravacycline has been shown to be active against most strains of the microorganisms listed below, according to the FDA label for this antimicrobial.			



		Predicate:			
	Device:	VITEK® 2 AST-GN			
Item	VITEK® 2 AST-Gram	Eravacycline			
	Negative Meropenem	$(\le 0.12 - \ge 4 \mu \text{g/mL})$			
	(≤0.25 - ≥16 µg/mL)	(K191766)			
Similarities					
	Active in vitro and in clinical	Active in vitro and in clinical			
	<u>infections</u> :	infections:			
	Escherichia coli	Citrobacter freundii Enterobacter cloacae			
	Klebsiella pneumoniae	Escherichia coli			
	Proteus mirabilis	Klebsiella oxytoca			
		Klebsiella pneumoniae			
	Pseudomonas aeruginosa	12. costena prioumentate			
	<i>In vitro</i> data are available, but	<i>In vitro</i> data are available, but			
	clinical significance is	clinical significance is unknown:			
	unknown:	Citrobacter koseri			
	Citrobacter freundii	Klebsiella (Enterobacter)			
	Citrobacter koseri	aerogenes			
	Enterobacter cloacae	The VITEK® 2 Gram-Negative			
	Hafnia alvei	Susceptibility Card is intended for			
	Klebsiella oxytoca	use with the VITEK® 2 Systems in			
	Morganella morganii	clinical laboratories as an in vitro			
	Serratia marcescens	test to determine the susceptibility of clinically significant aerobic			
	The VITEK® 2 Gram Negative	Gram negative bacilli to antimicrobial agents when used as			
	Susceptibility Card Meropenem	instructed.			
	also reports susceptibility for the				
	following additional organisms as				
	listed on the FDA Susceptibility				
	Test Interpretive Criteria website:				
	Acinetobacter spp				
	The VITEK® 2 Gram-Negative				
	Susceptibility Card is intended for				
	use with the VITEK® 2 Systems				
	in clinical laboratories as an <i>in</i> vitro test to determine the				
	susceptibility of clinically				
	significant aerobic Gram negative				
	bacilli to antimicrobial agents				
	when used as instructed.				
	when used as instructed.				



Item	Device: VITEK® 2 AST-Gram Negative Meropenem (≤0.25 - ≥16 μg/mL)	Predicate: VITEK [®] 2 AST-GN Eravacycline (≤0.12 −≥ 4 μg/mL) (K191766)	
	Similarities		
Test Methodology	Automated quantitative	Same	
	antimicrobial susceptibility test		
	for use with the VITEK® 2 and		
	VITEK® 2 Compact Systems to		
	determine the <i>in vitro</i>		
	susceptibility of microorganisms		
Inoculum	Saline suspension of organism	Same	
Test Card	Gram Negative (AST-GN)	Same	
	Susceptibility Card		
Instrument	VITEK® 2 and VITEK® 2	Same	
	Compact Systems		
Differences			
Antimicrobial Agent	Meropenem	Eravacycline	
Concentrations	0.5, 2, 6, 12	0.25, 1, 2, 4	

F. Intended Use:

VITEK® 2 AST-Gram Negative Meropenem is designed for antimicrobial susceptibility testing of Gram negative bacilli and is intended for use with the VITEK® 2 and VITEK® 2 Compact Systems as a laboratory aid in the determination of *in vitro* susceptibility to antimicrobial agents. VITEK® 2 AST-Gram Negative Meropenem in is a quantitative test. Meropenem has been shown to be active against most strains of the microorganisms listed below, according to the FDA label for this antimicrobial.

Active in vitro and in clinical infections:

Escherichia coli Klebsiella pneumoniae Proteus mirabilis Pseudomonas aeruginosa

In vitro data are available, but clinical significance is unknown:

Citrobacter freundii Citrobacter koseri



Enterobacter cloacae Hafnia alvei Klebsiella oxytoca Morganella morganii Serratia marcescens

The VITEK® 2 Gram Negative Susceptibility Card Meropenem also reports susceptibility for the following additional organisms as listed on the FDA Susceptibility Test Interpretive Criteria website:

Acinetobacter spp.

The VITEK® 2 Gram-Negative Susceptibility Card is intended for use with the VITEK® 2 Systems in clinical laboratories as an *in vitro* test to determine the susceptibility of clinically significant aerobic Gram-negative bacilli to antimicrobial agents when used as instructed.

G. Performance Overview and Conclusion:

VITEK® 2 AST-GN Meropenem demonstrated substantially equivalent performance when compared with the CLSI broth microdilution reference method, as defined in the FDA Class II Special Controls Guidance Document: Antimicrobial Susceptibility Test (AST) Systems; Guidance for Industry and FDA (Issued August 28, 2009).

The Premarket Notification (510[k]) presents data in support of VITEK® 2 AST-GN Meropenem. An external evaluation was conducted with fresh and stock clinical isolates, as well as a set of challenge strains. The external evaluations were designed to confirm the acceptability of VITEK® 2 AST-GN Meropenem by comparing its performance with the CLSI broth microdilution reference method incubated at 16-20 hrs. The data is representative of performance on both the VITEK® 2 and VITEK® 2 Compact instrument platforms.

The VITEK® 2 AST-GN Meropenem demonstrated acceptable performance as presented in Table 2 below:



Table 2: VITEK® 2 AST-GN Meropenem Performance

	%EA	VME	ME	mЕ	%CA	VME	ME	mЕ
Overall Performance (with the reference method)	(1016/1070) 95.0	N/A	N/A	N/A	(1016/1070) 95.0	(0/346) 0.0	(4/680) 0.6	(50/1070) 4.7
Enterobacterales	(537/569) 94.4	N/A	N/A	N/A	(552/569) 97.0	(0/65) 0.0	(4/491) 0.8	(13/569) 2.3
P. aeruginosa	(267/282) 94.7	N/A	N/A	N/A	(253/282) 89.7	(0/121) 0.0	(0/137) 0.0	(29/282) 10.3
Acinetobacter spp.	(212/219) 96.8	N/A	N/A	N/A	(211/219) 96.3	(0/160) 0.0	(0/52) 0.0	(8/219) 3.7

Reproducibility and Quality Control demonstrated acceptable results.

H. References:

- 1. MacLowry, J.D. and Marsh, H.H., Semi-automatic Microtechnique for Serial Dilution Antibiotic Sensitivity Testing in the Clinical laboratory, Journal of Laboratory Clinical Medicine, 72:685-687, 1968.
- 2. Gerlach, E.H., Microdilution 1: A Comparative Study, p. 63-76. Current Techniques for Antibiotic Susceptibility Testing. A. Balows (ed.), Charles C. Thomas, Springfield, IL,1974.
- 3. Barry, A.L., The Antimicrobic Susceptibility Test, Principles and Practices, Lea and Febiger, Philadelphia, PA, 1976.