

July 1, 2021

C.R. Bard, Inc. Joan Bergstrom Regulatory Affairs Specialist 1625 W. Third Street Tempe, Arizona 85281

Re: K203575

Trade/Device Name: GlidePath™ Retro Long-Term Hemodialysis Catheter

Regulation Number: 21 CFR 876.5540

Regulation Name: Blood access device and accessories

Regulatory Class: Class II

Product Code: MSD Dated: May 27, 2021 Received: May 28, 2021

Dear Joan Bergstrom:

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. However, you are responsible to determine that the medical devices you use as components in the kit have either been determined as substantially equivalent under the premarket notification process (Section 510(k) of the act), or were legally on the market prior to May 28, 1976, the enactment date of the Medical Device Amendments. Please note: If you purchase your device components in bulk (i.e., unfinished) and further process (e.g., sterilize) you must submit a new 510(k) before including these components in your kit/tray. 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 Carolyn Y. Neuland, Ph.D.
Assistant Director
DHT3A: Division of Renal, Gastrointestinal,
Obesity and Transplant Devices
OHT3: Office of GastroRenal, ObGyn,
General Hospital and Urology Devices
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.

K203575		
Device Name GlidePath™ Retro Long-Term Hemodialysis Catheter		
Indications for Use (<i>Describe</i>) The GlidePath TM Retro Long-Term Hemodialysis Catheters are indicated for use in attaining short-term or long-term vascular access for hemodialysis, hemoperfusion or apheresis therapy. Access is attained via the internal jugular vein, subclavian vein, or femoral vein. Catheters longer than 40 cm are intended for femoral vein insertion.		
Turns of the (Colort and or both, as applicable)		
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.

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GlidePath™ Retro Long-Term Hemodialysis Catheter 510(k) Summary 21 CFR 807.92

As required by the Safe Medical Devices Act of 1990, coded under Section 513, Part (I)(3)(A) of the Food, Drug and Cosmetic Act, a 510(k) summary upon which substantial equivalence determination is based is as follows:

Submitter Information:

Applicant: Bard Peripheral Vascular, Inc.

1625 West 3rd Street Tempe, Arizona 85281

Phone: 480-597-8425

Fax: 480-449-2546

Contact: Joan Bergstrom, Regulatory Affairs Specialist

Date May 27, 2021

Subject Device Name:

Device Trade Name: GlidePath™ Retro Long-Term Hemodialysis

Catheter

Common or Usual Name: Catheter, Hemodialysis, Implanted

Device Classification: Class II

Classification Name: Blood Access Device and Accessories

Product Code: MSD

Regulation Number: 21 CFR 876.5540

Review Panel: Gastroenterology/Urology

Predicate Device:

Bard GlidePath™ Long-Term Dialysis Catheter (K190527, cleared March 5, 2020)

Retrograde Placement Reference Device:

Covidien Palindrome™ Precision RT Chronic Catheter Kit (K111817, cleared August 30, 2011)

Device Description:

The GlidePath™ Retro Long-Term Hemodialysis Catheter features a dual-lumen polyurethane catheter shaft with optimized double-D cross-sectional design providing separate arterial and venous lumens, an external bifurcation hub with SwiftClick connector assembled by physician upon placement, and arterial and venous extension legs that connect to an external dialysis machine or blood cleansing device. The arterial (red) luer connector secures to the blood intake on the dialysis machine and the venous (blue) luer connector secures to the blood return line on the dialysis machine. Each extension leg has an atraumatic occlusion clamp which closes access to the lumen. The symmetrical catheter tip contains holes that aid in the distribution of blood flow or aid in over-the-guidewire placement. The dialysis catheter is offered in various lengths. GlidePath™ Retro Long-Term Hemodialysis Catheters diameter and tip to cuff lengths are listed below.

Attribute	GlidePath [™] Retro Long-Term Hemodialysis Catheter Product Offerings
Catheter Diameter (F)	14.5
Catheter Shaft Length, Tip to Cuff (cm)	15, 19, 23, 27, 31, 35, 42, 50

Indications for Use of Device:

The GlidePath™ Retro Long-Term Hemodialysis Catheters are indicated for use in attaining short-term or long-term vascular access for hemodialysis, hemoperfusion or apheresis therapy. Access is attained via the internal jugular vein, subclavian vein, or femoral vein. Catheters longer than 40 cm are intended for femoral vein insertion.

Comparison to Predicate and Reference Devices:

The GlidePath™ Retro Long-Term Hemodialysis Catheter has the following similarities to the predicate, GlidePath™ Long-Term Hemodialysis Catheter (K190527, cleared March 5, 2020):

- Same catheter shaft material
- Same intended use
- Same indications for use
- Same patient target population
- Same operating principle
- Same fundamental scientific technology

- Same packaging configurations
- Same sterility assurance level and method of sterilization

The main difference between the subject device, GlidePath™ Retro Long-Term Hemodialysis Catheter, and the predicate GlidePath™ Long-Term Hemodialysis Catheter is the retrograde placement technique and external bifurcation connector for which the reference device, Covidien Palindrome™ Precision RT Chronic Catheter Kit (K111817, cleared August 30, 2011) and its bifurcation connector serves as technology comparison.

Performance Data:

To demonstrate substantial equivalence of the subject device to the predicate device, both technical characteristics and performance criteria were evaluated. Using FDA Guidance Documents on non-clinical testing of medical devices and internal Risk Assessment procedures, tests for the following characteristics and performance criteria were performed on the subject device:

- Extension Leg to Bifurcation Tensile
- Bifurcation to Catheter Shaft while assembled with Swiftclick Tensile
- Flow Rate
- Recirculation
- Mechanical Hemolysis
- Catheter Assembly Leak
- Catheter Burst
- Surface Inspection
- Stylet to Luer Tensile
- Stylet Assembly Leak
- Priming Luer Interface
- Catheter Cap to Tunneler Rod Tensile
- Tunneler Rod Malleability
- Package Performance
- · Sterility and Endotoxin
- Biocompatibility per ISO 10993
- Human Factors Evaluation

The required retrograde placement technology comparison of specific device characteristics including the external hub connector is made to the reference device, Palindrome™ Precision RT Chronic Catheter Kit (K111817, cleared August 30, 2011). The results of these comparisons and tests performed in accordance with standards and FDA guidance, demonstrate that the technical characteristics and performance criteria of the GlidePath™ Retro Long-Term Hemodialysis Catheter is substantially equivalent to the predicate, comparable in technology to the reference, and that it can perform in a manner equivalent to devices currently on the market for the same intended use.

Conclusion:

The subject device, the GlidePath™ Retro Long-Term Hemodialysis Catheter, met all predetermined acceptance criteria of design verification and validation as specified by applicable standards, guidance, test protocols and/or customer inputs. The subject, predicate, and reference devices share the same or similar characteristics: catheter shaft material, intended use, indications for use, target patient population, operating principle, fundamental scientific technology, packaging configurations, and sterility assurance level and method of sterilization. Therefore, Bard Peripheral Vascular, Inc. concludes that the subject device GlidePath™ Retro Long-Term Hemodialysis Catheter is substantially equivalent to the legally marketed predicate device, GlidePath™ Long-Term Hemodialysis Catheter and comparable to the legally marketed reference device Palindrome™ Precision RT Chronic Catheter Kit.