



December 9, 2020

Viora Ltd.
Simona Krant
QA/RA Director
6 Hagavish Street
Netanya, 4250706
Israel

Re: K202247

Trade/Device Name: V-VR Handpiece compatible with V30, V20, V10 Systems
Regulation Number: 21 CFR 878.4400
Regulation Name: Electrosurgical Cutting And Coagulation Device And Accessories
Regulatory Class: Class II
Product Code: PBX, ISA, GEX
Dated: September 7, 2020
Received: September 9, 2020

Dear Simona Krant:

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 Federal Register.

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-devices/medical-device-safety/medical-device-reporting-mdr-how-report-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>) for more information or contact DICE by email (DICE@fda.hhs.gov) or phone (1-800-638-2041 or 301-796-7100).

Sincerely,

for Long Chen, Ph.D.
Assistant Director
DHT4A: Division of General Surgery Devices
OHT4: Office of Surgical
and Infection Control Devices
Office of Product Evaluation and Quality
Center for Devices and Radiological Health

Enclosure

Indications for Use

510(k) Number (if known)
K202247

Device Name
V-VR Handpiece compatible with V30, V20, V10 Systems

Indications for Use (Describe)

The Viora V10 system is intended for dermatological procedures.

The V10 system with the V-VR Handpiece is indicated for the temporary relief of minor muscle aches and pain, temporary relief of muscle spasm, and temporary improvement of local blood circulation.

The Viora V20 system is intended for dermatological procedures.

The V20 system with the V-VR Handpiece is indicated for the temporary relief of minor muscle aches and pain, temporary relief of muscle spasm, and temporary improvement of local blood circulation.

The Viora V30 system is intended for dermatological procedures.

The V30 system with the V-VR Handpiece is indicated for the temporary relief of minor muscle aches and pain, temporary relief of muscle spasm, and temporary improvement of local blood circulation.

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.

DO NOT SEND YOUR COMPLETED FORM TO THE PRA STAFF EMAIL ADDRESS BELOW.

The burden time for this collection of information is estimated to average 79 hours per response, including the time to review instructions, search existing data sources, gather and maintain the data needed and complete and review the collection of information. Send comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden, to:

Department of Health and Human Services
Food and Drug Administration
Office of Chief Information Officer
Paperwork Reduction Act (PRA) Staff
PRASStaff@fda.hhs.gov

"An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB number."

510(k) Summary

This 510(k) summary of safety and effectiveness information is being submitted in accordance with the requirements of the Safe Medical Devices Act of 1990 and 21 CFR 807.92.

Submitter Name and Address: Viora Ltd.
Industrial Park Sagie 2000
Migdal HaEmek, 1812003

Contact Person: Ms.Simona F. Krant
QA/RA Director
Email: Simona@Vioramed.com
Phone Number: +972 546739756
Fax Number: +972 9955 1345

Establishment Registration Number: 3005695724

Date Prepared: December 07, 2020

Device Trade Name(s): V-VR Handpiece compatible with V30, V20, V10 Systems

Device Common Name: Bipolar RF based applicator

Classification: **Name:** Electrosurgical cutting and coagulation device and accessories, Laser surgical instrument for use in general and plastic surgery and in dermatology (for V20 and V30 system)
Product code: PBX, ISA, GEX (for V30 system)
PBX, ISA, GEX (for V20 system)
PBX, ISA (for V10 system)
Regulation No: 21CFR 878.4400
Class: II
Panel: General and plastic surgery devices

Predicate Device(s): Viora V30 system with VST handpiece (K162363)
Viora V20 system with VST handpiece (K152611)
Viora V10 system with VST handpiece (K150035)

Device description

System	Description	Applications	510(k) Clearance
V30	Multi-application, multi-technology platform device intended for use in dermatologic procedures. The main console unit incorporates a touch-screen control panel, power supply modules, cooling system, switching module and service panel. Cooled by deionized water	Nd:YAG (V30) For V20 & V30: V-ST, V-IPL, V- and V-FORM (with BC Small, Medium and Large applicators)	November 18, 2016 (K162363).
V20			February 19, 2016 (K152611) & November 18, 2016 (K162363).
V10	based on the well-established bipolar radiofrequency (RF) technology used for heating of soft tissues. The main console unit incorporates a touch-screen control panel, power supply modules, RF generator and service panel.	V-ST and V-FORM (with BC Small and Large applicators)	May 1, 2015 (K150035) & November 18, 2016 (K162363).

The *V-VR Handpiece* is supported by *Viora's V10, V20 and V30* systems.

Indication for Use for V-VR Handpiece compatible with V30, V20, V10 Systems

Viora V10, V20 and V30 systems are intended for dermatological procedures.

The V10, V20 and V30 systems with the V-VR Handpiece are indicated for the temporary relief of minor muscle aches and pain, temporary relief of muscle spasm, and temporary improvement of local blood circulation.

Predicate Devices

The predicate device to Viora systems V10, V20 and V30 are the cleared *V10, V20 and V30 systems* themselves (please refer to the table below).

Device name	510k No.	Date of Clearance	Compatible Predicate Handpiece
Viora V10	K150035	Cleared on May 1, 2015	V-ST
Viora V20	K152611	Cleared on February 19, 2016	V-ST
Viora V30	K162363	Cleared on November 18, 2016	V-ST

The predicate device to *V-ST Handpiece compatible with V30, V20, V10 Systems* is V10, V20, V30 systems with V-ST handpiece, (Viora Ltd.)

Substantial Equivalence to Predicate Device

Comparison Parameter	Subject Device: V10,V20 and V30 systems with V-VR Handpiece	Predicate Device: V10,V20 and V30 systems with V-ST handpiece	Characteristic Comparison (same/different)
Device Class	Class II	Class II	Same
Classification Panel	General and Plastic Surgery devices	General and Plastic Surgery devices	Same
Product code	21CFR878.4400 (V10,V20 & V30) 21CFR878.4810 (V20 & V30)	21CFR878.4400 (V10,V20 & V30) 21CFR878.4810 (V20 & V30)	Same
Regulation number	PBX, ISA (V10,V20 & V30) GEX (V20 & V30)	PBX, ISA (V10,V20 & V30) GEX (V20 & V30)	Same
Regulation description	Electrosurgical cutting and coagulation device and accessories.	Electrosurgical cutting and coagulation device and accessories.	Same
Device main components	Cleared V10,V20 and V30 systems with: V-VR Handpiece, connector, cable handpiece.	Bipolar RF Applicator, connector, cable handpiece	Same
Supported technologies	The cleared V10,V20 and V30 systems include RF (V10,V20 & V30) IPL (V20 & V30) and Laser(V30)	The cleared V10,V20 and V30 systems include RF (V10,V20 & V30) IPL (V20 & V30) and Laser(V30)	Same
Intended use and indication for use	The V10,V20 and V30 systems with the V-VR Handpiece is indicated for the temporary relief of minor muscle aches and pain, temporary relief of muscle spasm, and temporary improvement of local blood circulation.	The V10,V20 and V30 systems with the V-ST Handpiece are indicated for the temporary relief of minor muscle aches and pain, temporary relief of muscle spasm, and temporary improvement of local blood circulation.	Same



Shape the Future

510(k) K202247

Page 4 of 6

Comparison Parameter	Subject Device: V10,V20 and V30 systems with V-VR Handpiece	Predicate Device: V10,V20 and V30 systems with V-ST handpiece	Characteristic Comparison (same/different)
System user interface	V10 & V20: 8.1-inch touch screen V30:10.4-inch touch screen	V10 & V20: 8.1-inch touch screen V30:10.4-inch touch screen	Same
Handpiece dimensions:	17x25.6 cm	14x24 cm	Different but equivalent
Handpiece weight	0.625 kg	0.75 kg	Different but equivalent
Electrical requirements:	100-240 V~ 10A 50/60 Hz (V10,V20 & V30) 100-120 V~ 10A 50/60 Hz (V20 & V30) Single Phase	100-240 V~ 10A 50/60 Hz (V10,V20 & V30) 100-120 V~ 10A 50/60 Hz (V20 & V30) Single Phase	Same
Maximum vacuum level	No Vacuum	No Vacuum	Same
Software	The V10,V20 and V30 systems software supports the V-VR Handpieces. The software was verified and validated according to the FDA guidance.	According to 510(k) summaries V10: K150035 V20: K152611 V30: K162363.	Same

Summary of technologic characteristics

The Viora *V-VR Handpiece compatible with V30, V20, V10 Systems* and the predicate device have similar intended use and indication for use, identical technological features and identical performance characteristics. The *V10, V20 and V30* console has similar technological characteristics as the predicate device, performance and software validation data demonstrate that the differences between the *V-VR Handpiece compatible with V30, V20, V10 Systems* support and the predicate do not raise any new questions of safety and effectiveness.

The *V-VR Handpiece* and the predicate device have similar intended use and similar technological features. Any differences in the *V-VR Handpiece* design do not raise any new questions of safety and effectiveness, as was verified by performance testing.

In conclusion, the *V-VR Handpiece compatible with V30, V20, V10 Systems* is substantially equivalent to its predicate device. Therefore, we concluded that the V-ST handpiece for the *V-VR handpiece* appears to be an adequate predicate for this submission.

Performance standards

The *V-VR Handpiece compatible with V30, V20, V10 Systems* comply with the following performance standards:

<u>System Relevance</u>	<u>Standard Number</u>	<u>Part Title</u>
V10,V20,V30	IEC 60601-1:2012	Medical Electrical Equipment Part 1:General Requirements for Basic Safety and Essential Performance
V10,V20,V30	IEC 60601-1-2: 2014	Medical Electrical Equipment Part 1-2:General Requirements for Basic Safety and Essential Performance - Collateral Standard: Electromagnetic Compatibility – Requirements and Tests.
V20,V30	IEC 60601-2-57:2011	Particular Requirements for The Basic Safety and Essential Performance of Non-Laser Light Source Equipment Intended for Therapeutic, Diagnostic, Monitoring and Cosmetic/Aesthetic Use.
V20,V30	IEC 60601-2-22:2007	Particular Requirements for Basic Safety And Essential Performance of Surgical, Cosmetic, Therapeutic and Diagnostic Laser Equipment.
V20,V30	IEC 60825-1:2014	Safety of Laser Products Part 1: Equipment Classification, And Requirements

Electrical Safety and Electromagnetic Compatibility:

The *V-VR Handpiece compatible with V30, V20, V10 Systems* was determined to be in conformance with applicable IEC standards as described in the above table.

Performance Bench Tests

V-VR IR(Infra-Red) temperature was assessed to verify capability to V-VR handpiece capability to safely maintain superficial skin therapeutic temperature between 40-45 °C during 14 minutes of the treatment (heating phase).

Bench testing demonstrated that the *Viora V10, V20, V30 system* with *V-VR Handpiece* performs per its device specifications and are as safe and effective as the cleared predicate devices.

Biocompatibility:

The materials and biocompatibility characteristics of *Viora V10, V20, V30 systems*, except of the material of the new Handpiece V-VR remains the same as approved (K150035, K152611, and K162363 respectively).

Thus, all components that come into contact with the skin (tip, electrodes) are bio-compatible and meet the requirement of the ISO 10993-1.

Additional biological evaluation for the V-VR Handpiece is considered to have meet the requirements for a surface device with limited to transient contact and can be considered safe and suitable for its intended use.

Software:

Software verification and validation testing was conducted, and results demonstrated that testing results were found acceptable for software release.

All performance testing demonstrated that the *Viora V10, V20, V30 system* with *V-VR Handpiece* performs according to specifications and functions as intended.

Conclusion

The technological differences between subject and predicate devices do not raise any new questions of safety or effectiveness. The non-clinical testing, software verification and validation testing and the temperature testing on the surface of the skin were performed to evaluate the performance of Viora V10, V20, V30 system with V-VR Handpiece.

Based on comparison of the technological characteristics of the devices and results of the performance testing, Viora V10, V20, V30 system with V-VR Handpiece are substantially equivalent to the predicate devices for requested intended use.