

June 8, 2020

Shenzhen Mindray Bio-Medical Electronics Co., Ltd. Yanhong Bai Manager Regulatory Affairs, Technical Regulation Department Mindray Building, Keji 12th Road South Hi-tech Industrial Park, Nanshan Shenzhen, 518057 China

Re: K200015

Trade/Device Name: ePM Series Patient Monitors
Regulation Number: 21 CFR 870.1025
Regulation Name: Arrhythmia Detector and Alarm (Including ST-Segment Measurement and Alarm)
Regulatory Class: Class II
Product Code: MHX, DSI, MLD, DRT, DXN, DSK, FLL, DQA, DPZ, CCK, DXG, DSJ, CBQ, CBS, CBR, CCL
Dated: May 9, 2020
Received: May 12, 2020

Dear Yanhong Bai:

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 <u>https://www.fda.gov/medical-devices/medical-device-safety/medical-device-reporting-mdr-how-report-medical-device-problems</u>.

For comprehensive regulatory information about medical devices and radiation-emitting products, including information about labeling regulations, please see Device Advice (<u>https://www.fda.gov/medical-devices/device-advice-comprehensive-regulatory-assistance</u>) and CDRH Learn (<u>https://www.fda.gov/training-and-continuing-education/cdrh-learn</u>). 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 (<u>https://www.fda.gov/medical-devices/device-advice-comprehensive-regulatory-assistance/contact-us-division-industry-and-consumer-education-dice</u>) for more information or contact DICE by email (<u>DICE@fda.hhs.gov</u>) or phone (1-800-638-2041 or 301-796-7100).

Sincerely,

Jennifer Shih Assistant Director (Acting) Division of Cardiac Electrophysiology, Diagnostics and Monitoring Devices Office of Cardiovascular Devices Office of Product Evaluation and Quality Center for Devices and Radiological Health

Enclosure

Indications for Use

510(k) Number *(if known)* K200015

Device Name ePM Series Patient Monitors

Indications for Use (Describe)

The ePM 10/ePM 12/ePM 15/ePM 10M/ePM 12M/ePM 15M patient monitors are intended for monitoring, displaying, reviewing, storing, alarming, and transferring of multiple physiological parameters including ECG (3-lead, 5-lead, 6-lead or 12-lead selectable, Arrhythmia Detection, ST Segment Analysis, QT Analysis, and Heart Rate (HR)), Respiration Rate (Resp), Temperature (Temp), Pulse Oxygen Saturation (SpO2), Pulse Rate (PR), Non-invasive Blood Pressure (NIBP), Invasive Blood Pressure (IBP), Pulmonary Artery Wedge Pressure (PAWP), Cardiac Output (C.O.), Carbon Dioxide (CO2), Oxygen (O2) and Anesthetic Gas (AG). The system also provides an interpretation of resting 12-lead ECG. All the parameters can be monitored on single adult, pediatric, and neonatal patients except for the following: • The PAWP monitoring is intended for adult and pediatric patients only;

• C.O. monitoring is intended for adult patients only;

The monitors are to be used in healthcare facilities by clinical professionals or under their guidance. They should only be used by persons who have received adequate training in their use. The ePM 10/ePM 12/ePM 15/ePM 10M/ePM 12M/ePM 15M monitors are not intended for helicopter transport, hospital ambulance, or home use.

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Type of Use (Select one or both, as	annlicahle)
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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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"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

In accordance with 21 CFR 807.87(h) and (21 CFR 807.92) the 510(k) Summary for the ePM Series Patient Monitors is provided below.

1. SUBMITTER

	Applicant:	SHENZHEN MINDRAY BIO-MEDICAL ELECTRONICS CO., LTD.
		Mindray Building, Keji 12th Road South
		High-tech Industrial Park, Nanshan
		Shenzhen 518057, P.R. China
		Tel: +86 755 81888998
		Fax: +86 755 26582680
	Contact:	Contact Person: Yanhong Bai
		Title: Manager Regulatory Affairs
		Phone: +86 755 81885635
		Fax: +86 755 26582680
		E-mail: <u>baiyanhong@mindray.com</u>
	Date Prepared:	December 28, 2019
2.	DEVICE	
	Device Trade Name:	ePM Series Patient Monitors
		Patient Monitor
	Device Common Name:	
	Classification Name:	21 CFR 870.1025, Class II, Arrhythmia detector and alarm (including ST account measurement and alarm)
	Classification Ivalle:	alarm (including ST-segment measurement and alarm)
		Class II
	Regulatory Class:	
		Cardiovascular
	Panel:	

Primary Product Code: MHX - Monitor, Physiological, Patient (with arrhythmia detection or alarms)

Table 1:	Secondary Product Codes
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Regulation	Product	Regulation description	Device Common Name
Number/Class	Code		
870.1025, II	DSI	Arrhythmia detector and alarm (including ST-segment measurement and alarm)	Detector and alarm, arrhythmia
870.1025, II	MLD	Arrhythmia detector and alarm (including ST-segment measurement and alarm)	Monitor, st segment with alarm
870.2300, II	DRT	Cardiac Monitor (including cardiotachometer and rate alarm)	Monitor, cardiac (incl. cardiotachometer & rate alarm)
870.1130, II	DXN	Noninvasive blood pressure measurement system	System, measurement, blood-pressure, non-invasive
870.1110, II	DSK	Blood pressure computer	Computer, blood-pressure
880.2910, II	FLL	Clinical electronic thermometer	Thermometer, electronic, clinical
870.2700, II	DQA	Oximeter	Oximeter
870.2710, II	DPZ	Ear oximeter	Oximeter, ear
868.1400, II	ССК	Carbon dioxide gas analyzer	Analyzer, gas, carbon-dioxide, gaseous-phase
870.1435, II	DXG	Single-function, preprogrammed diagnostic computer	Computer, diagnostic, pre-programmed, single-function
870.1100, II	DSJ	Blood pressure alarm	Alarm, blood-pressure
868.1500, II	CBQ	Enflurane gas analyzer	Analyzer, gas, enflurane, gaseous-phase (anesthetic concentration)
868.1620, II	CBS	Halothane gas analyzer	Analyzer, gas, halothane, gaseous-phase (anesthetic conc.)
868.1700, II	CBR	Nitrous oxide gas analyzer	Analyzer, gas, nitrous-oxide, gaseous phase (anesthetic conc.)
868.1720, II	CCL	Oxygen gas analyzer	Analyzer, gas, oxygen, gaseous-phase

3. PREDICATE DEVICES

K191769 - ePM Series Patient Monitors (Including ePM 10/ePM 12/ePM 15/ePM 10M/ePM 12M/ePM 15M) (SHENZHEN MINDRAY BIO-MEDICAL ELECTRONICS CO., LTD)

4. **REFERENCE DEVICE**

K103142 - The spacelabs Multi-parameter Module (SPACELABS HEALTHCARE, INC.)

5. DEVICE DESCRIPTION

The subject ePM Series Patient Monitors includes six monitors:

- ePM 10 Patient Monitor
- ePM 12 Patient Monitor
- ePM 15 Patient Monitor
- ePM 10M Patient Monitor
- ePM 12M Patient Monitor
- ePM 15M Patient Monitor

The ePM Series Patient Monitors are Mindray's new generation monitoring product family with ergonomic and flexible design in platform of both software and hardware to meet the clinical needs of monitoring.

6. INDICATIONS FOR USE

The ePM 10/12/15/10M/12M/15M patient monitors are intended for monitoring, displaying, reviewing, storing, alarming, and transferring of multiple physiological parameters including ECG (3-lead , 5-lead,6-lead or 12-lead selectable, Arrhythmia Detection, ST Segment Analysis, QT Analysis, and Heart Rate (HR)), Respiration Rate (Resp), Temperature (Temp), Pulse Oxygen Saturation (SpO2), Pulse Rate (PR), Non-invasive Blood Pressure (NIBP), Invasive Blood Pressure(IBP), Pulmonary Artery Wedge Pressure (PAWP), Cardiac Output (C.O.), Carbon Dioxide (CO2), Oxygen (O2) and Anesthetic Gas (AG). The system also provides an interpretation of resting 12-lead ECG.

All the parameters can be monitored on single adult, pediatric, and neonatal patients except for the following:

- The PAWP monitoring is intended for adult and pediatric patients only;
- C.O. monitoring is intended for adult patients only;
- The monitors are to be used in healthcare facilities by clinical professionals or under their

guidance. They should only be used by persons who have received adequate training in their use. The ePM 10/12/15/10M/12M/15M monitors are not intended for helicopter transport, hospital ambulance, or home use.

7. SUBSTANTIAL EQUIVALENCE

Comparison of Indications

Both the predicate devices and the subject devices are multi parameter patient monitors intended to be used under the direction of clinical professionals. The monitoring parameters supported by the subject ePM series are identical with those supported by the predicate ePM series monitors (K191769).

The indications for use statement of the subject devices include Arrhythmia Detection used on neonatal patients. Although this feature is not present in the primary predicate devices, it is present in the cleared spacelabs Multi-parameter Module (K103142) and does not constitute a new intended use.

In conclusion, the minor differences of the indications for use do not change the fundamental intended use of the ePM Series as multiparameter monitor.

Comparison of Technological Characteristics

The table below compares the key technological feature of the subject device to the primary predicate device (ePM series Patient Monitors, K191769). The features in gray are features which are different between the predicate devices and the subject devices.

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Table 2:	Device Comparison Table
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ECG3-lead, 5-lead, 6-lead or 12-lead selectable, arrhythmia detection, ST segment analysis, QT analysis, an interpretation of resting 12-lead ECG, J-point Auto detection, Dual Channel Pace detection, adjustable QRS threshold and heart rate3-lead, 5-lead, 6-lead or 12-lead selectable, arrhythmia detection, ST segment analysis, QT analysis, an interpretation of resting 12-lead ECG, J-point Auto detection, Dual Channel Pace detection, adjustable QRS		on alarm type	
arrhythmia detection, ST segment analysis, QTarrhythmia detection, ST segment analysis,analysis, an interpretation of resting 12-lead ECG,QT analysis, an interpretation of restingJ-point Auto detection, Dual Channel Pace12-lead ECG, J-point Auto detection, Dualdetection, adjustable QRS threshold and heart rateChannel Pace detection, adjustable QRS		3-lead 5-lead 6-lead or 12-lead selectable	3-lead 5-lead 6-lead or 12-lead selectable
ECGanalysis, an interpretation of resting 12-lead ECG, J-point Auto detection, Dual Channel Pace detection, adjustable QRS threshold and heart rateQT analysis, an interpretation of resting 12-lead ECG, J-point Auto detection, Dual Channel Pace detection, adjustable QRS			
detection, adjustable QRS threshold and heart rate Channel Pace detection, adjustable QRS		• • • •	
	ECG	J-point Auto detection, Dual Channel Pace	12-lead ECG, J-point Auto detection, Dual
(HR). threshold and heart rate (HR).			
		(HR).	threshold and heart rate (HR).

	Arrhythmia detection is intended for adult and pediatric.	Arrhythmia detection is intended for adult, pediatric and neonate .
	Supports intelligent arrhythmia alarm.	Supports intelligent arrhythmia alarm.
	ST segment analysis is intended for adult, pediatric and neonate.	ST segment analysis is intended for adult, pediatric and neonate.
		Refer to Section 12.3.
Arrhy thmia Analy sis	Asystole, VFib/Vtac, Vtac, Vent.Brady, Extreme Tachy, Extreme Brady, PVCs, Couplet, Bigeminy, Trigeminy, R on T, Run PVCs, PVCs/min, Tachy, Brady, Missed Beats, Vent Rhythm, Pacer Not Pacing, Pacer Not Capture, Multif.PVC, Nonsus.Vtac, Pause, Vent.Rhythm, Afib, Pauses/min, Pauses/min	Same
Respir ation rate (Resp)	Measurement range: Adult: 0 to 120 rpm; Pediatric, neonate: 0 to 150 rpm. Accuracy: 7 to 150 rpm: ±2 rpm or ±2%, whichever is greater; 0 to 6 rpm: Not specified.	Same
Temp eratur e (Temp)	Measurement range: 0 to 50 °C (32 to 122 °F) Accuracy: ±0.1 °C or ±0.2 °F (without probe).	Same
Pulse oxyge n satura tion (SpO2	Supports Mindray SpO2 function, Masimo SpO2 function and Nellcor SpO2 function from multi parameter module. Mindray SpO2 function Measurement range: 0 to 100%; Accuracy: 70 to 100%: ±2% (adult/pediatric mode); 70 to 100%: ±3% (neonate mode); 0% to 69%: Not specified. Masimo SpO2 function	Same
)	Measurement range: 1 to 100%; Accuracy: 70 to 100%: ±2% (measured without motion in adult/pediatric mode);	

	70 to 100%: ±3% (measure neonate mode);			
	70 to 100%: ±3% (measured 1% to 69%: Not specified.	with motion);		
	Nellcor SpO2 function Measurement range: 0 to 100 Accuracy: 70 to 100%: ±2% (adult/pedi 70 to 100%: ±3% (neonate); 0% to 69%: Not specified.			
	Note: The specifications of functions provided by each m same across platforms.			
Pulse rate (PR)	PR from built-in Mindray SpO2 Module Measurement range: 20 to 254 bpm; Accuracy: ±3 bpm. PR from built-in Masimo SpO2 Module Measurement range: 25 to 240 bpm; Accuracy: ±3 bpm (measured without motion); ±5 bpm (measured with motion). PR from built-in Nellcor SpO2 Module Measurement range: 20 to 300 bpm; Accuracy: 20 to 250 bpm: ±3 bpm; 251 to 300 bpm, not specified.	PR from built-in Mindray SpO2 Module Measurement range: 20 to 254 bpm; Accuracy: ±3 bpm. PR from built-in Masimo SpO2 Module Measurement range: 25 to 240 bpm; Accuracy: ±3 bpm (measured without motion); ±5 bpm (measured with motion). PR from built-in Nellcor SpO2 Module Measurement range: 20 to 300 bpm; Accuracy: 20 to 250 bpm: ±3 bpm; 251 to 300 bpm; Accuracy: 20 to 250 bpm: ±3 bpm; 251 to 300 bpm; not specified. PR from external IBP Module Measurement	Same	Same

			Accur	350 bpm; racy: m or ±1%, never is		
Non- invasi ve blood pressu re (NIBP)	Measuremen Systolic Diastolic Mean Accuracy: Max mean er Max standard	Adult 25-290 10-250 15-260 Tror: ±5 mmH	•	Neonate 25-140 10-115 15-125	Same	
Invasi ve blood pressu re (IBP)	Uses an inter to measure pressure. The monitor up blood pressures systolic, dias pressures and for each pres PPV function range: -50 to Accuracy: mmHg, whice (without sense)	invasive blo the monitor of to 8 invasi res and displa stolic and me ad a wavefo essure. Supp n. Measuremo 300 mmHg; ±2% or thever is grea	IBP stand- Modu invasi od monit ive pressu od monit ive invasi an displa rm diasto ort pressu ent wavel pressu ± 1 PPV ter Measu range mmH Accun ± 1 which	module or alone IBP le to measure ve blood ire. The or can or up to 8 ve blood ires and ys systolic, lic and mean ires and a form for each ire. Support function. urement : -50 to 300	Same	Same
Cardi ac output	Use internal The cardiac of measurement	output (C.O.)	exterr		Same	Same

cardiac output and other hemodynamic parameters(C.O.)hemodynamic parametersmeasurementusing the right heart (atria)invasivelythermodilution method. Themeasurestemperature change iscardiac output anddisplayed as a curve in theother hemodynamicC.O. split screen, and theparameters usingmonitor calculates thethe right heartC.O. value from this curve.(atria)The monitor is capable ofthermodilutionstoring 6 measurements.method.The <t< th=""><th>1 / I · I))</th><th>measures</th><th>The cardiac output</th><th></th><th>1</th></t<>	1 / I · I))	measures	The cardiac output		1
hemodynamicparametersmeasurementusing the right heart (atria)invasivelythermodilution method. Themeasurestemperaturechangeiscardiacoutput anddisplayed as a curve in theother hemodynamicC.O. split screen, and theparametersmonitor calculates thetheC.O. value from this curve.(atria)The monitor is capable ofthermodilutionstoring 6 measurements.method.Themethod.<	(C.O.)		-		
using the right heart (atria)invasivelythermodilution method. Themeasurestemperature change iscardiac output anddisplayed as a curve in theother hemodynamicC.O. split screen, and theparameters usingmonitor calculates thethe right heartC.O. value from this curve.(atria)The monitor is capable ofthermodilutionstoring 6 measurements.method. The		-			
thermodilution method. The temperature change is displayed as a curve in the OC.O. split screen, and the monitor calculates themeasures cardiac output and other hemodynamic parameters using the right heartC.O. value from this curve. The monitor is capable of storing 6 measurements.(atria)Themeasurements.		•			
temperaturechangeiscardiacoutputanddisplayed as a curve in theother hemodynamicC.O. split screen, and theparametersusingmonitor calculates thetherightheartC.O. value from this curve.(atria)The monitor is capable ofthermodilutionstoring 6 measurements.method.The			-		
displayed as a curve in the C.O. split screen, and the monitor calculates theother hemodynamic parameters using the right heartC.O. value from this curve. The monitor is capable of storing 6 measurements.(atria)Themethod.					
C.O. split screen, and the monitor calculates theparameters the right (atria)C.O. value from this curve. The monitor is capable of storing 6 measurements.(atria)The method.The		· · ·	-		
monitor calculates thethe right heartC.O. value from this curve.(atria)The monitor is capable ofthermodilutionstoring 6 measurements.method.		displayed as a curve in the	other hemodynamic		
C.O. value from this curve. (atria) The monitor is capable of thermodilution storing 6 measurements. method. The		C.O. split screen, and the	parameters using		
The monitor is capable of storing 6 measurements.thermodilution method.The		monitor calculates the	the right heart		
storing 6 measurements. method. The		C.O. value from this curve.	(atria)		
		The monitor is capable of	thermodilution		
Maggurament ranget CO: temperature shares		storing 6 measurements.	method. The		
weasurement range: C.O: temperature change		Measurement range: C.O:	temperature change		
0.1 to 20 L/min; TB: 23 to is displayed as a		0.1 to 20 L/min; TB: 23 to	is displayed as a		
43 °C; curve in the C.O.		43 °C;	curve in the C.O.		
TI: 0 to 27 °C; split screen, and the		TI: 0 to 27 °C;	split screen, and the		
Accuracy: monitor calculates		Accuracy:	monitor calculates		
C.O: ±5% or ±0.1 L /min, the		C.O: ±5% or ±0.1 L /min,	the		
whichever is greater; C.O. value from		whichever is greater;	C.O. value from		
TB, TI: ± 0.1 °C (without this curve. The		-	this curve. The		
sensor). monitor is capable			monitor is capable		
of storing 6			_		
measurements.			-		
Measurement			Measurement		
range: C.O: 0.1 to					
20 L/min; TB: 23 to			-		
43 °C;					
TI: 0 to 27 °C;					
Accuracy:					
C.O: ±5% or ±0.1 L			-		
/min, whichever is					
greater;			,		
TB, TI: ±0.1 °C			•		
(without sensor).					
		-	-		
	Carbo				
Sidestream CO2					
dioxid Mainstream CO2 1.0 Module Same Same				Same	Same
e(CO Module Sidestream CO2		Module	Sidestream CO2		
2) MicroStream CO2 2.0 module	2)	MicroStream CO2	2.0 module		
module Mainstream CO2		module	Mainstream CO2		

ePM Series Patient Monitors

	module		
	MicroStream CO2		
	module		
	*10M does not		
	support external		
	CO ₂ modules		
Type: Sidestream CO2 Module	e (CO2 2.0):		
Measurement range: 0~150mm	nHg		
Accuracy:			
0~40 mmHg: ±2mmHg,			
41~76 mmHg: ±5% of reading	5,		
77~99 mmHg: ±10% of readir	ng,		
100~150mmHg: ±(3mmHg +	8% of reading),	Same	
ISO accuracy mode:		Sume	
Add ±2mmHg to the full	accuracy mode		
AwRR measurement:			
awRR measurement range	e: 0 to 150rpm;		
awRR:			
<60rpm, ±1rpm,			
60~150rpm, ±2rpm.			
Type: Microstream CO2 Modu	ule		
Measurement range:			
CO2: 0~99mmHg;			
awRR: 0~150rpm;			
Accuracy:			
CO2:		Same	
0~38mmHg: ±2mmHg;			
39~99mmHg: ±5% of the rea	ading+0.08% of (the		
reading-38).			
awRR:			
0~70rpm: ±1rpm,			
71~120rpm: ±2rpm,121~150rp	pm: ±3rpm		
Type: Mainstream CO2			
Module Measurement range:			
CO2: 0~150mmHg;			
awRR: 0~150rpm;			
Accuracy:		Same	
CO2:			
0~40mmHg: ±2mmHg,			
41~70mmHg: $\pm 5\%$ of the read	-		
71~100mmHg: ±8% of the rea	ading,		

	101~150mmHg: ±10% of the reading;			
	awRR: ±1rpm.			1
Oxyg en (O2)	awRR: ±1rpm.	Oxygen values are measured by the Sidestream CO2 2.0 or the AG module using a paramagnetic method.		
		Measurement range: 0~100% (CO2 and AG), Accuracy: 0~25%, ±1%; 26~80%,±2%; 81~100%, ±3% (CO2 and AG).	Same	Same
Anest hetic gas (AG)	Not support	The AG module analyzes gas samples from the patient and calculates CO2, O2, N2O, and AA waveforms and related numerics that include airway respiratory rate and MAC (minimum alveolar concentration). Measurement range: CO2, HAL, ENF, ISO, SEV, DES: 0~30 %; O2, N2O: 0~100 %; awRR: 2~100 rpm. Accuracy: Full accuracy	Same	Same

	_	
	mode:	
	CO2:0%≤CO2≤1%	
	, ±0.1%ABS, 1%<	
	CO2≤5%, ±0.2%	
	ABS, 5%<	
	CO2≤7%,	
	±0.3% ABS, 7%<	
	CO2≤10%, ±0.5%	
	ABS, 10%< CO2	
	not specified;	
	N2O: 0~20% REL:	
	±2% ABS,	
	20~100%REL:	
	±3% ABS;	
	O2 0~25%, ±1%;	
	26~80%, ±2%;	
	81~100%, ±3%;	
	HAL, ENF, ISO:	
	0~1%REL: ±0.15%	
	ABS, 1~5% REL:	
	±0.2%	
	ABS, >5% REL, not	
	specified;	
	SEV: 0~1% REL:	
	±0.15% ABS,	
	1~5%REL:	
	±0.2% ABS,	
	5~8%REL: ±0.4%	
	ABS, >8%REL, not	
	specified;	
	DES: 0~1%REL:	
	±0.15% ABS,	
	1~5%REL: ±0.2%	
	ABS, 5~10%REL:	
	±0.4% ABS,	
	10~15% REL:	
	±0.6%	
	ABS ,15~18% REL:	
	±1%	
	ABS ,>18%REL,	
	not specified;	
	awRR:2~60rpm,	
	1 /	

	±1rpm, >60rpm,	
	not specified.	
Wirel		
ess	The Wireless radio module (Laird) is used for	
	connecting to a wireless monitoring network with a	Same
functi	central monitoring system (CMS).	
on		
ECG	Provides the function to statistical results of heart	
24h	rate changes and cardiac arrhythmia of patients	
Summ	within 24 hours, including HR statistics, ARR	Same
Summ	statistics, ST statistics, QT/QTc statistics and Pace	
ary	statistics.	
	The EWS is a set of early warning scores that are	
	intended to assist clinicians in recognizing the early	
	signs of deterioration in patients based on vital	
EWS	signs and clinical observations. The three types of	Same
	EWS provided are Modified Early Warning Score	
	(MEWS), National Early Warning Score (NEWS	
	and NEWS2) and user configurable Custom Score.	
Glasg	The CCS a well established seering system used to	
ow	The GCS a well-established scoring system used to assess the state of consciousness based three sub-	
Coma		Same
Scale		
(GCS)	response, and limb movement.	

Substantial Equivalence Conclusion

In conclusion, the differences in technological characteristics do not raise new questions of safety and effectiveness.

8. PERFORMANCE DATA

To establish the substantial equivalence of the ePM Series Patient Monitors, Mindray conducted functional and system level testing to validate the performance of the devices. The results of the bench testing show that the subject device meets its specifications and is substantially equivalent to the predicate device.

In addition, Mindray has conducted testing to ensure the subject devices meet relevant consensus standards.

Biocompatibility Testing

The ePM Series Patient Monitors are not patient contacting. There are no new patient contacting accessories or components. There have been no material changes to the previously cleared patient contacting devices, therefore biocompatibility testing is not required.

Software Verification and Validation Testing

Software verification and validation testing was conducted and documentation was provided as recommended by FDA's Guidance for Industry and FDA Staff, "Guidance for the Content of Premarket Submissions for Software Contained in Medical Devices." Verification of the ePM Series Patient Monitors was conducted to ensure that the product works as designed. Validation was conducted to check the design and performance of the product.

Electromagnetic Compatibility and Electrical Safety

There have been no changes to the hardware and mechanical construction of the ePM Series Monitors since their previous clearance. Therefore additional Electromagnetic Compatibility and Electrical Safety testing is not required to demonstrate substantial equivalence.

Bench Testing

To establish the substantial equivalence of the ePM Series Patient Monitors, Mindray conducted functional and system level testing to validate the performance of the devices. The results of the bench testing show that the subject device meets its accuracy specification, and is substantially equivalent to the predicate device.

In addition, Mindray has conducted testing to ensure the subject devices meet relevant consensus standards.

- IEC 60601-2-27:2011 Medical electrical equipment--Part 2-27: Particular requirements for the basic safety and essential performance of electrocardiographic monitoring equipment
- AAMI / ANSI EC57:2012 Testing and reporting performance results of cardiac rhythm and st-segment measurement algorithms

9. CONCLUSION

Based on the detailed comparison between the predicate devices and the subject devices, the performance testing and conformance with applicable standards, the ePM Series Patient Monitors can be found substantially equivalent to the predicate devices.