

June 18, 2021

Wuxi Jiajian Medical Instrument Co., Ltd Caihong Sun Regulatory Assurance No. 35 Baiqiao Rd., Ehu Town, Xishan District, Wuxi, Jiangsu 214116 China

Re: K202893

Trade/Device Name: Transcutaneous Electrical Nerve Stimulator

Regulation Number: 21 CFR 882.5890

Regulation Name: Transcutaneous Electrical Nerve Stimulator For Pain Relief

Regulatory Class: Class II

Product Code: GZJ Dated: April 25, 2021 Received: May 17, 2021

Dear Caihong Sun:

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/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 Pamela Scott
Assistant Director
DHT5B: Division of Neuromodulation
and Physical Medicine Devices
OHT5: Office of Neurological
and Physical Medicine 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: 06/30/2023

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

| K202893 | | | | | |
|--|--|--|--|--|--|
| Device Name Transcutaneous Electrical Nerve Stimulator | | | | | |
| ndications for Use (Describe) The Transcutaneous Electrical Nerve Stimulator is an electrical nerve stimulator indicated for use for pain relief by pplying an electrical current to electrodes on a patient's skin to treat pain. In particular, this device is indicated for use for ymptomatic relief of chronic intractable pain and adjunctive treatment in the management of post surgical and post raumatic pain. | | | | | |
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| 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.

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510(k) Summary

[As required by 21 CFR 807.92]

1. Submission Information:

510(k) Number: K202893

Date: April 15, 2021

Type of 510(k) Submission: Special

Submitter/Manufacturer: Wuxi Jiajian Medical Instrument Co., Ltd

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Wuxi, Jiangsu, China 214116 E-mail: sch@jjmed.com.cn

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Tel: 86 21-31261348 / Fax: 86 21-57712250

2. Device Description:

Proprietary Name: Transcutaneous Electrical Nerve Stimulator

Common Name: TENS (Transcutaneous Electrical Nerve Stimulator)

Classification Name: Transcutaneous electrical nerve stimulator for pain relief

Product Code: GZJ
Device Class: II

Regulation Number: 21 CFR 882.5890

Review Panel: Neurology

Indications for use: Transcutaneous Electrical Nerve Stimulator is an electrical nerve

stimulator indicated for use for pain relief by applying an electrical current to electrodes on a patient's skin to treat pain. In particular, this device is indicated for use for symptomatic relief of chronic intractable pain and adjunctive treatment in the management of post surgical and post traumatic

pain.

Device Description: Transcutaneous Electrical Nerve Stimulator is Transcutaneous Electrical

Nerve Stimulator for pain relief. The stimulator sends gentle electrical current to underlying nerves and muscle group via electrodes applied on

the skin.

The device has standard programs and edit programs. It is a battery-powered portable device, comprising electronic stimulatory

module and accessories of lead wires, electrodes and battery.

Two outlet sockets are used to connect skin electrodes by lead wires. The accessories of electrodes is 510(k) cleared device (K192568), Size:

50*50mm.



3. Substantially Equivalent Comparison Conclusion

Table 1 - TENStem eco basic Parameters

| Parameters | Modified Device | Predicate Device | Remark |
|--|---|--|-------------------|
| 510(k) Number | K202893 | K112288 | |
| Device Name | Transcutaneous Electrical Nerve Stimulator | Jiajian® TENS | |
| Model | TENStem eco basic | / | |
| Manufacturer | Wuxi Jiajian Medical Instrument Co., Ltd | Wuxi Jiajian Medical Instrument Co., Ltd | Same |
| Intended use | Transcutaneous Electrical Nerve Stimulator is an electrical nerve stimulator indicated for use for pain relief by applying an electrical current to electrodes on a patient's skin to treat pain. In particular, this device is indicated for use for symptomatic relief of chronic intractable pain and adjunctive treatment in the management of post surgical and post traumatic pain. | Jiajian® TENS is an electrical nerve stimulator indicated for use for pain relief by applying an electrical current to electrodes on a patient's skin to treat pain. In particular, this device is indicated for use for symptomatic relief of chronic intractable pain and adjunctive treatment in the management of post surgical and post traumatic pain. | Same |
| Type of use | Prescription use | Prescription use | Same |
| Power Source(s) | 1.5Vx4 AAA alkaline battery | 9V Battery type 6F22 | Similar Note 1 |
| - Method of Line Current Isolation | N/A | NA | Same |
| - Patient Leakage Current | | | |
| - Normal Condition (μA) | 2μΑ | 2μΑ | Same |
| - Single Fault Condition (μA) | NA | NA | |
| Average DC current through electrodes when device is on but no pulses are being applied (µA) | <0.01μΑ | <0.01μΑ | Same |
| Number of program | 16 | 12 | Similar Note 1 |
| Number of Output channels: | 2 | 2 | Same |
| - Synchronous or Alternating? | Synchronous | Synchronous | Same |



| - Method of Channel Isolation | | By Transformer | By Transformer | Same |
|--|----------------------------|--|--|-------------------|
| Regulated Current or Regulated Voltage? | | Current control | Voltage control | Similar Note 2 |
| Software/Firmware/M | | Yes | Yes | Same |
| icroprocessor Control? Automatic Overload | | No | No | Same |
| Trip? Automatic No-Load Trip? | | No | No | Same |
| | ic Shut Off? | Yes | Yes | Same |
| User Override Control? | | Yes | Yes | Same |
| Indicat or Display | On/Off Status? | Yes | Yes | Same |
| | Low Battery? | Yes | Yes | Same |
| | Voltage/Cur rent Level? | Yes | Yes | Same |
| Timer (minutes) | Range | 10~90 min | 1~99 min | Similar Note 2 |
| Compliance with Voluntary Standards? | | ANSI AAMI ES60601-1, IEC 60601-1-2, IEC 60601-2-10 | IEC 60601-1, IEC 60601-1-2, IEC 60601-2-10 | Same |
| Compliance with 21 CFR 898? | | Yes | Yes | Same |
| Weight (grams) | | Approx.96g without battery | 170g without battery | G: '1 |
| Dimensions (mm) [W x H x D] | | 140*64*28 mm | 114 x 59 x 27 mm | Similar Note 1 |
| Housing Materials & Construction | | ABS | ABS | Same |
| Waveforn | n | Monophasic | Monophasic | Same |
| Shape | | Rectangular pulse | Rectangular | Same |
| Maximum Output Voltage (volts) | | 30V±20% @500Ω | 35V @500Ω | Similar Note 3 |
| Maximum Output Current (specify units) | | 60mA±20% @500Ω | 70mA @500Ω | |
| Pulse width (μsec) | | 75-300µs±20% | 60-300μs±20% | |
| Pulse Period (msec) | | 8.33-1000ms | 8.33-2000ms | |
| Max. pulse frequency (Hz) [or Rate (pps)] | | 1-120Hz±20% | 0.5-120Hz±20% | |
| Net Charge (μC per pulse) | | 0.65μC @500Ω | 0.83μC @500Ω | Similar Note 4 |



| Maximum Phase | | 22.04C @5000 | |
|--------------------------------|--|--|------|
| Charge, (μC) | 18μC @500Ω | 23.04μC @500Ω | |
| Maximum Average | 2.16mA @500Ω | 2.76mA @500Ω | |
| Current, (mA) | 2.10IIIA (@300 52 | 2.70IIIA (@300\$2 | |
| Maximum Current | | | |
| Density, (mA/cm ² , | $0.09 \mathrm{mA/cm^2}$ @500 Ω | $0.35 \text{mA/cm}^2 @ 500 \Omega$ | |
| r.m.s.) | | | |
| Maximum Average | | | |
| Power Density, | $2.59 \mathrm{mW/cm^2}$ @ 500Ω | 13.27 mW/cm ² @500 Ω | |
| (mW/cm ²) | | | |
| Accessories | Electrodes, cables, battery | Electrodes, cables, battery | Same |

Comparison in details:

Note 1:

The proposed device has more treatment programs than the predicate device K112288, but all of the treatment programs have passed the IEC 60601-2-10 and IEC 60601-1 test codes. So, this difference will not raise any safety or effectiveness issue.

The weight, dimensions of the proposed device are a little different from the predicate device K112288, but these differences are insignificant in the terms of safety or effectiveness. Besides, the battery used is different from the predicate device, but the battery used by the proposed device is commonly used in the market. Therefore, this difference will not raise any safety or effectiveness issue.

Note 2:

The "Regulated Current or Regulated Voltage" between the proposed device and the predicate device has slight difference. But both of them have passed IEC 60601-1 test code, so this difference won't raise any new safety and effectiveness issues.

There is a little difference on treatment time range between proposed device and predicate device. But the treatment time can be adjusted by user as they want. So, the difference of treatment time range will not raise any safety or effectiveness issue.

Note 3:

There are some differences on the maximum output voltage and maximum output current between the proposed device and predicate device. Based on the calculation of maximum current density, maximum average power density, these parameters don't exceed the safety limit. All deviation and the worst case have been considered in risk analysis report, and these parameters have passed IEC 60601-2-10 test codes. So these differences will not raise any new safety and effectiveness issues. Although the "Frequency range" and "Pulse width range" of the proposed device are a little different from the predicate device, but they are all compliance with IEC 60601-2-10 requirements. So, the minor differences of function specification will not raise any safety or effectiveness issue.

Note 4:

The "Net Charge" and "Maximum Phase Charge" of the proposed device are very similar to the predicate device, and both of them comply with IEC 60601-1 and IEC 60601-2-10 requirements. So, the differences will not raise any safety or effectiveness issue.

The maximum average current of the proposed device is smaller than that of the predicate device which means the better safety. The maximum current density, maximum average power density have some differences between proposed device and predicate device due to they are calculated by different electrode area. However, the Maximum current density complies with IEC 60601-2-10 requirements and the



Maximum average power density is within 0.25W/cm² limit. Therefore, these differences will not raise any new safety and effectiveness issues.

Final conclusion:

The proposed device TENStem eco basic is substantial Equivalent to the predicate device K112288.

4. Non-Clinical Test Conclusion

Bench tests were conducted on Transcutaneous Electrical Nerve Stimulator to verify that the proposed device met all design specifications as was Substantially Equivalent (SE) to the predicate device. The following tests were performed on the proposed device:

- ANSI AAMI ES60601-1: 2005/(R) 2012 And A1: 2012, C1: 2009/(R) 2012 And A2: 2010/(R) 2012 (Consolidated Text) Medical Electrical Equipment Part 1: General Requirements For Basic Safety And Essential Performance (IEC 60601-1: 2005, MOD);
- IEC 60601-2-10 Edition 2.1 2016-04, Medical Electrical Equipment Part 2-10: Particular Requirements For The Basic Safety And Essential Performance Of Nerve And Muscle Stimulators;
- IEC 60601-1-2 Edition 4.0 2014-02 Medical electrical equipment Part 1-2: General requirements for basic safety and essential performance Collateral Standard: Electromagnetic disturbances Requirements and tests;

5. Clinical Test

Clinical data was not including in this submission.

6. Conclusions

The conclusions drawn from the non-clinical tests demonstrate that the subject device is substantially equivalent to the predicate device.