



June 10, 2022

Boston Scientific Corporation
Melissa Schneider
Senior Regulatory Affairs Specialist
4100 Hamline Ave North
St. Paul, Minnesota 55112

Re: K220796

Trade/Device Name: IntellaMap Orion™ High Resolution Mapping Catheter

Regulation Number: 21 CFR 870.1220

Regulation Name: Electrode recording catheter or electrode recording probe

Regulatory Class: Class II

Product Code: DRF

Dated: March 17, 2022

Received: March 18, 2022

Dear Melissa Schneider:

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,

Aneesh Deoras
Assistant Director
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)
K220796

Device Name
IntellaMap Orion™ High Resolution Mapping Catheter

Indications for Use (Describe)

The IntellaMap Orion Catheter is indicated for electrophysiological mapping (recording or stimulating only) of the cardiac structures of the heart.

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 for IntellaMap Orion™ High Resolution Mapping Catheter
- K220796**

1. Submitter

Boston Scientific Corporation
Electrophysiology Division
4100 Hamline Ave North
St. Paul, MN 55112

Contact:

Melissa Schneider
Regulatory Affairs Specialist
Phone: 651-582-6935
E-mail: melissa.schneider@bsci.com

Oliver Buttleman
Regulatory Affairs Specialist
Phone: 651-581-0894
E-mail: oliver.buttleman@bsci.com

Date Prepared: March 17, 2022

2. Device

Trade Name: IntellaMap Orion™ High Resolution Mapping Catheter
Common Name: IntellaMap Orion Catheter
Classification Name: Electrode Recording Catheter or Electrode Recording Probe
Product Code: DRF
Device Class and Panel: Class II, Cardiovascular
Classification Regulation: 21 CFR Part 870.1220

3. Predicate Device

Trade Name: IntellaMap Orion™ High Resolution Mapping Catheter
Manufacturer: Boston Scientific Corporation
Clearance Number: K192360
Common Name: IntellaMap Orion Catheter
Classification Name: Electrode Recording Catheter or Electrode Recording Probe
Product Code: DRF
Device Class and Panel: Class II, Cardiovascular Classification Regulation: 21 CFR Part 870.1220

4. Device Description

The IntellaMap Orion™ High Resolution Mapping Catheter (Orion catheter) is an 8.5 French (Ø 2.82mm), 115 cm working length, and a 64-electrode steerable catheter.

The basket-shaped distal region consists of 8 splines that compose the electrode array. The proximal end has a handle that extends to a cable with a connector. The handle includes bi-directional articulation controls and a deployment slider that activates the electrode array into a basket shape once inside the heart. A flushing port extends from the back of the connector for connection to a continuous pressurized saline drip. The catheter is supplied with an 8.5F insertion sleeve for insertion through the hemostasis valve on an introducer sheath. A sensor in the catheter tip enables the position of the distal region of the catheter to be tracked in space when used with the RHYTHMIA HDx™ Mapping System.

5. Indications for Use

The IntellaMap Orion Catheter is indicated for electrophysiological mapping (recording or stimulating only) of the cardiac structures of the heart.

6. Technological Characteristics

The IntellaMap Orion catheter incorporates the identical design, packaging, fundamental technology, manufacturing processes, sterilization process and intended use as those featured in the predicate device.

7. Substantial Equivalence

The proposed labeling modifications of the IntellaMap Orion catheter, including updated contraindications does not impact the device's substantial equivalence to the previously cleared version of this device. The device is as safe, as effective, and performs as well as the predicate device. The indications for use, intended use, classification, product functions, materials, configuration, and sterility are substantially equivalent to the predicate device.

8. Performance Data

Not applicable for the changes proposed in this Special 510(k).

8. Conclusion

The proposed IntellaMap Orion catheter is equivalent in indications for use, intended use, classification, product functions, materials, configuration, and sterility to the predicate device, the IntellaMap Orion catheter. Therefore, Boston Scientific believes the proposed IntellaMap Orion catheter to be substantially equivalent to the predicate IntellaMap Orion catheter.