

# **Exoskeleton Standards Technical Interchange Meeting (TIM): Medical Applications Section**

**Vivek Pinto, PhD**

Chief

Physical Medicine and Rehabilitation Devices Branch (PMDB)

Division of Neurological and Physical Medicine Devices (DNPMD)

Office of Device Evaluation (ODE)

Center for Devices and Radiological Health (CDRH)

Food and Drug Administration (FDA)

# Full Medical Agenda and Speakers

Time	Topic	Discussion	Speaker
Day 1	User Representative Introduction		Chris Tagatac Board of Directors for the Christopher Reeves Foundation
12:15 – 12:45 PM	FDA Introduction and Medical Exoskeleton Process Overviews	FDA Device Regulatory Introduction	Vivek Pinto, PhD
		Medical Exoskeletons	Devjani Saha, PhD
12:45 – 1:15 PM	Ongoing Related Standards Work	FDA Standard Recognition Process	Ian Broverman, MS
		JWG 36 Medical Robots for Rehabilitation	Eric Franca, PhD
1:15-2:40 PM	Unique Aspect Characterization, Open Discussion, & Generating Prioritization List	Open Discussion	All



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Center for Veterinary Medicine

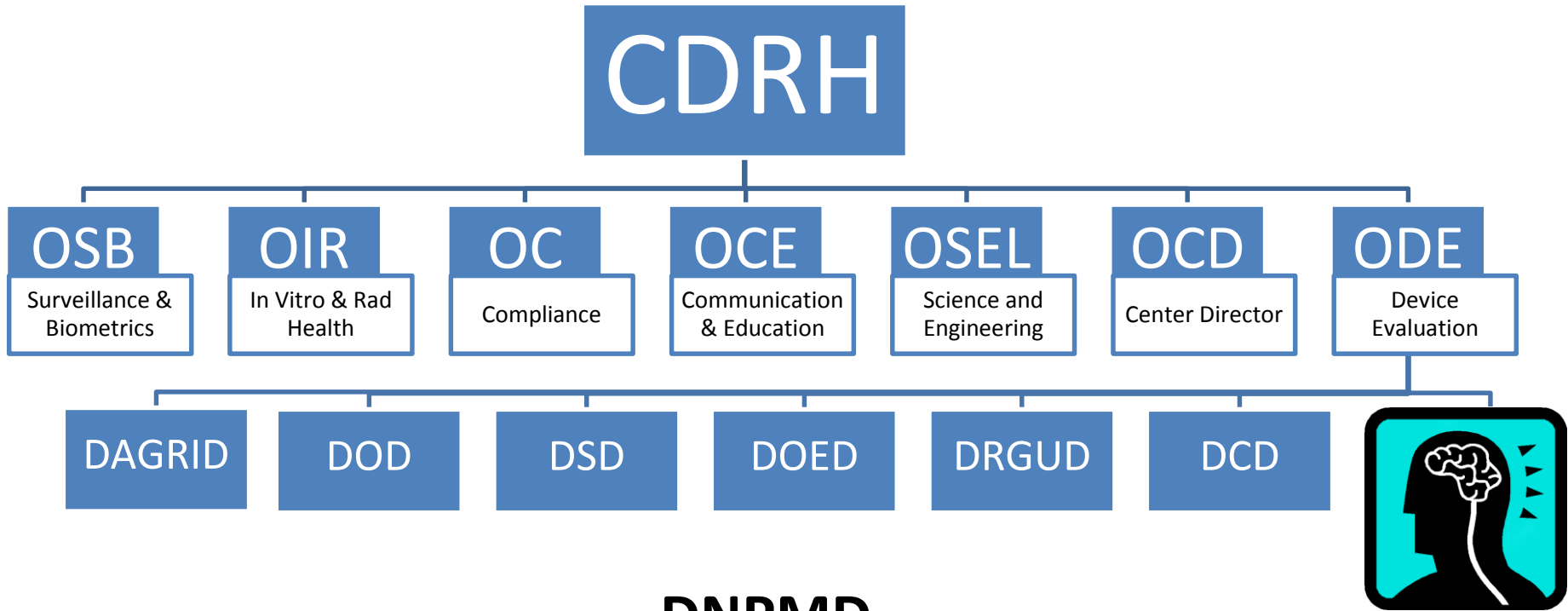


National Center for Toxicological Research

# Investing in Review-A New Division at FDA

## Center for Devices and Radiological Health (CDRH) Organization

### Pathway for Neurological and Physical Medicine Regulatory Submissions



## **DNPMD**

### **Division of Neurological and Physical Medicine Developments**



## CDRH Vision

- Patients in the U.S. have access to high-quality, safe, and effective medical devices of public health importance first in the world.
- The U.S. is the world's leader in regulatory science, medical device innovation and manufacturing, and radiation-emitting product safety.
- U.S. post-market surveillance quickly identifies poorly performing devices, accurately characterizes real-world performance, and facilitates device approval or clearance.
- Devices are legally marketed in the U.S. and remain safe, effective, and of high-quality.
- Consumers, patients, their caregivers, and providers have access to understandable science-based information about medical devices and use this information to make health care decisions.

# Division of Neurological and Physical Medicine Devices

## New Branch Organization

### Neurodiagnostic and Neurosurgical Devices

- Cranial Materials & Other Sealants
- EEG & Non-EEG Diagnostic Devices
- Neurocognitive Diagnostic Devices
- Surgical Instruments & Tools for the Neurovasculature
- Stereotactic Systems for the Neurovasculature

### Neurointerventional Devices

- Embolization Coils
- Flow Diverters
- Guidewires & Catheters for the Neurovasculature
- Neurothrombectomy Devices
- Neurovascular & Cerebral Interventional Devices
- Cerebrospinal Fluid Shunts

### Neurostimulation Devices Neurology Branch

- Stimulation Devices for Movement Disorders, Epilepsy, Alzheimer’s Disease, Headache, and Traumatic Brain Injury
- Devices may include cortical stimulation devices and deep brain stimulation devices

### Neurostimulation Devices Psychiatry Branch

- Stimulation Devices for Major Depression, Obsessive Compulsive Disorder, and Post Traumatic Stress Disorder
- Devices may include cranial electrical stimulation devices, electroconvulsive therapy, and transcranial magnetic stimulation devices

### Physical Medicine & Rehabilitation Devices

- Brain Computer Interfaces
- Diathermy
- Functional Electrical Stimulators
- Iontophoresis Devices
- Massagers/Vibrators
- Orthoses, Exoskeletons
- Powered Muscle Stimulators
- Rehabilitation Equipment
- Wheelchairs, Walkers

# Experience in Moving Neurological **and Physical Medicine** Medical Devices From **Bench to Market**



Clot Retriever for Ischemic Stroke



Ablation Therapy



Cognitive Function following concussion



Prosthetic Arm



Medical Device For Migraine



Microcatheters for the neurovasculature

# Medical Device Definition

- Definition of a medical device is specified in section 201(h) of the Federal Food, Drug and Cosmetic Act (21 U.S.C. 321) \*
- Section 201(h) states:
  - The term “device”...means an instrument, apparatus, implement, machine, contrivance, implant, in vitro reagent, or other similar or related article, including any component, part, or accessory, which is...”
  - “...intended for use in the **diagnosis** of disease or other conditions, or in the **cure, mitigation, treatment, or prevention** of disease, in man...” or
  - “...intended to **affect the structure or any function** of the body of man and which does not achieve any of its primary intended purposes through chemical action....”



# What makes a device a medical device?

- Usage and Risks
  - Clinical use may require different (sometimes higher) standards
  - How and where is the device used? (IFU)
  - How does the device work? (Technology)
- Example: Lego Mindstorm
  - *As a toy and teaching tool*
    - Optional, low risk
    - Minimal consequences
  - *Actuating a rehabilitation device*
    - At risk population
    - Health consequences for misuse or error



# A Risk Based Approach for Medical Devices since 1976

Increasing Risk

Classification determines extent of regulatory control (Risk Based)

## Class I

- General Controls

## Class II

- General controls
- Performance data
- Special controls

## Class III

- General controls
- Premarket approval (PMA)
- Scientific evidence to support safety and effectiveness

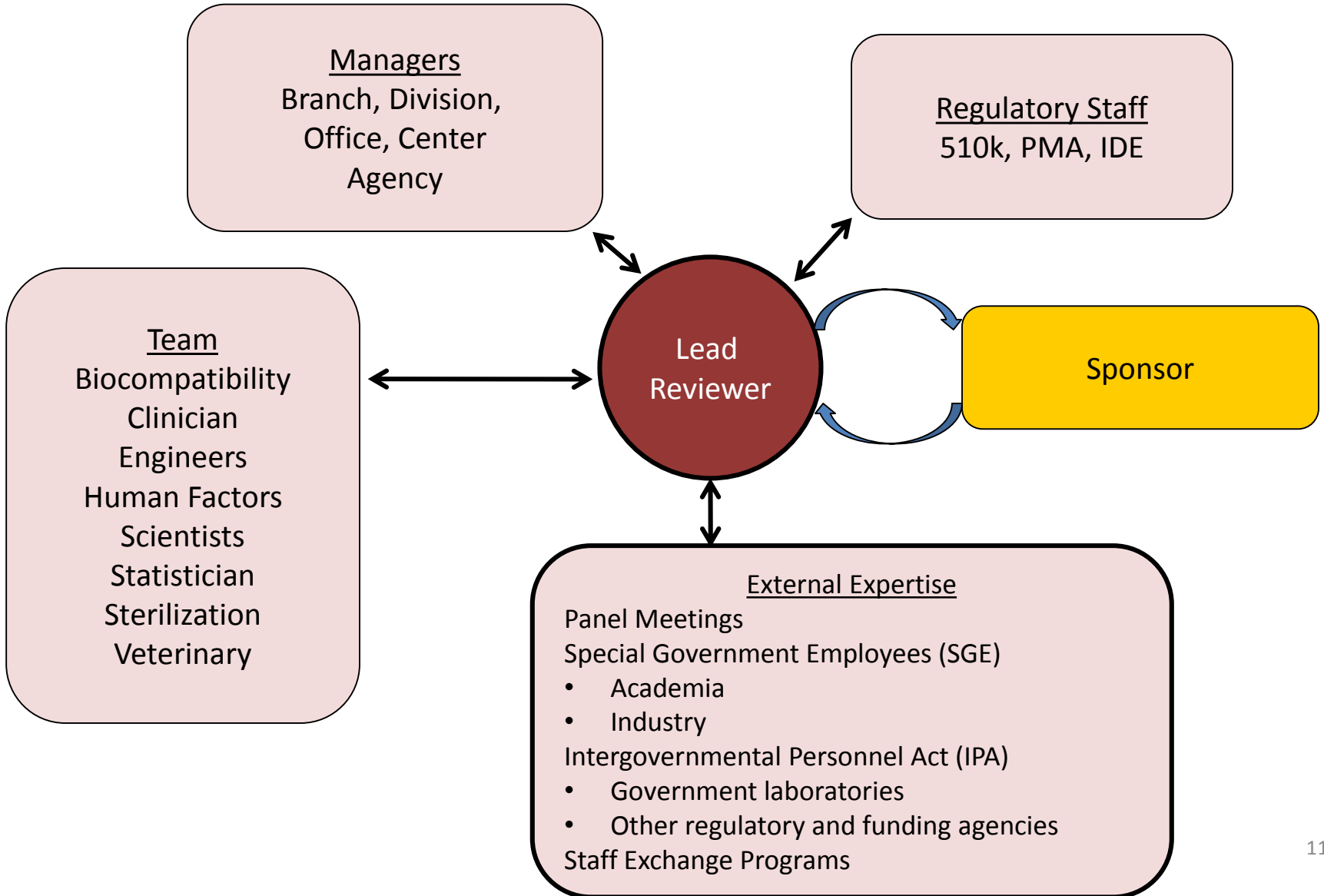
## General Controls

- Electronic Establishment Registration
- Electronic Device Listing
- Quality Systems
- Labeling
- Medical Device Reporting (MDR)
- Premarket Notification [510(k)] (unless exempt)

## Special Controls (addressing Risk)

- Guidelines (e.g., Glove Manual)
- Mandatory Performance Standard
- Performance testing, such as biocompatibility, engineering, animal, etc.
- Special Labeling

# Roles in the Review Process



# Classifications & Regulatory Pathways

- Class III: generally PMA (Premarket Approval)
- Class II: 510(k) (or premarket notification), if the intended use and technology are similar to something already classified
- De Novo: devices that aren't comparable enough to something on the market. This generates a new device classification regulation, and will typically (but not always) be Class II



# Physical Medicine Panel (21 CFR 890)

(Visit [www.ecfr.gov](http://www.ecfr.gov) → Title 21 Food and Drugs → Part 890)

Diagnostic, prosthetic, and therapeutic Physical Medicine

## Diagnostic examples

- 21 CFR 890.1375 Diagnostic electromyograph
- 21 CFR 890.1925 Isokinetic testing and evaluation system

## Prosthetic examples


- [21 CFR 890.3480 Powered lower extremity exoskeleton](#)
- 21 CFR 890.3860 Powered wheelchair

## Therapeutic examples

- 21 CFR 890.5300 Ultrasound diathermy
- 21 CFR 890.5700 Cold pack

# Public Databases: *de novo*

<http://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfPMN/denovo.cfm>

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## Device Classification under Section 513(f)(2)(de novo)

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In 1997, the Food and Drug Administration Modernization Act (FDAMA) added the de novo classification pathway under section 513(f)(2) of the FD&C Act, establishing an alternate pathway to classify new devices into Class I or II that had automatically been placed in Class III after receiving a Not Substantially Equivalent (NSE) determination in response to a 510(k) submission. In this process, a sponsor who receives an NSE determination may, within 30 days of receiving notice of the NSE determination, request FDA to make a risk-based classification of the device under section 513(a)(1) of the Act.

In 2012, section 513(f)(2) of the FD&C Act was amended by section 607 of the Food and Drug Administration Safety and Innovation Act (FDASIA), to provide a second option for de novo classification. In this second pathway, a sponsor who determines that there is no legally marketed device upon which to base a determination of substantial equivalence may request FDA to make a risk-based classification of the device under section 513(a)(1) of the Act without first submitting a 510(k).

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DeNovo Number  [Product Code](#)

510(K) Number  Priority Review

Panel  Device Name

Center  Requester Name

Decision Date   to  

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**Other Databases**

- [510\(k\)s](#)
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# Public Databases: *de novo* (DEN130034)

<http://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfPMN/denovo.cfm?ID=DEN130034>




<a href="#">New Search</a>	<a href="#">Back To Search Results</a>
Device Classification Name	<a href="#">Powered Exoskeleton</a>
De Novo Number	DEN130034
510(K) Number	K131798
Device Name	REWALK
Requester	ARGO MEDICAL TECHNOLOGIES, INC. 33 Locke Dr. Suite 240 Marlborough, MA 01752
Contact	John VHamilton
Regulation Number	<a href="#">890.3480</a>
Classification Product Code	<a href="#">PHL</a>
Date Received	06/17/2013
Decision Date	06/26/2014
Decision	Granted (DENG)
Classification Advisory Committee	Physical Medicine
Review Advisory Committee	Physical Medicine
Reclassification Order	<a href="#">Reclassification Order</a>
FDA Review	<a href="#">Decision Summary</a>
Type	Direct

# Public Databases: Product Classification

<http://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfPCD/classification.cfm>

## Product Classification



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This database includes:

- a list of all medical devices with their associated classifications, product codes, FDA premarket review organizations, and other regulatory information.

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Device <input style="width: 90%;" type="text"/>	Product Code <input style="width: 90%;" type="text"/>
Review Panel <input style="width: 90%;" type="text" value="v"/>	Regulation Number <input style="width: 90%;" type="text"/>
Submission Type <input style="width: 90%;" type="text" value="v"/>	Third Party Eligible <input style="width: 90%;" type="text" value="v"/>
Implanted Device <input style="width: 90%;" type="text" value="v"/> Life-Sustain/Support Device <input style="width: 90%;" type="text" value="v"/>	Device Class <input style="width: 90%;" type="text" value="v"/>

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**Need information about classifying your device?**

[Device Classification](#)



# Public Databases: Product Code PHL

<http://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfPCD/classification.cfm?ID=3598>

## Product Classification

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New Search		<a href="#">Back To Search Results</a>
<b>Device</b>	Powered Exoskeleton	
<b>Regulation Description</b>	Powered lower extremity exoskeleton.	
<b>Definition</b>	A powered exoskeleton is a prescription device that is composed of an external, powered, motorized orthosis used for medical purposes that is placed over a person's paralyzed or weakened limbs for the purpose of providing ambulation.	
<b>Physical State</b>	The device is a wearable exoskeleton device that allows the user to enable ambulation over the course of the day. The control of the device is achieved through a wrist-worn user-operated wireless communicator, tilt sensor and specific body movements.	
<b>Technical Method</b>	The movement of the swing leg is controlled by a seat of gears and DC motors at the knee and hip joints. Minimizing energy expenditure with gait approximation is critical for maximizing battery life between charges.	
<b>Target Area</b>	The device legs consist of left and right interconnect hip and knee segments. Multiple attachment straps are mounted along the length of each leg. The pelvic band support provides a structure to join the two legs together and the pelvic strap helps hold the user firmly in the system. A tilt sensor is mounted on the left side of the pelvic band. The ankle/foot bed holds the calves of the user to the system.	
<b>Regulation Medical Specialty</b>	Physical Medicine	
<b>Review Panel</b>	Neurology	
<b>Product Code</b>	PHL	
<b>Premarket Review</b>	<a href="#">Office of Device Evaluation (ODE)</a> Division of Neurological and Physical Medicine Devices (DNPMMD) Physical Medicine and Rehabilitation Devices Branch (PMDB)	
<b>Submission Type</b>	510(k)	
<b>Regulation Number</b>	<a href="#">890.3480</a>	
<b>Device Class</b>	2	
<b>Total Product Life Cycle (TPLC)</b>	<a href="#">TPLC Product Code Report</a>	
<b>GMP Exempt?</b>	No	
<b>Implanted Device?</b>	No	
<b>Life-Sustain/Support Device?</b>	No	
<b>Third Party Review</b>	Not Third Party Eligible	

# Public Databases: 510(k) Premarket Notification

<http://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfPMN/pmnm.cfm>

## 510(k) Premarket Notification

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A 510(K) is a premarket submission made to FDA to demonstrate that the device to be marketed is at least as safe and effective, that is, substantially equivalent, to a legally marketed device (21 CFR [§807.92\(a\)\(3\)](#)) that is not subject to premarket approval.

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510K Number	<input type="text"/>	Type	<input type="text"/>	Product Code	<input type="text"/>
Center	<input type="text"/>	Combination Products	<input type="checkbox"/>		
Applicant Name	<input type="text"/>	Cleared/Approved In Vitro Products	<input type="checkbox"/>		
Device Name	<input type="text"/>	Redacted FOIA 510(k)	<input type="checkbox"/>		
Panel	<input type="text"/>	Third Party Reviewed	<input type="checkbox"/>		
Decision	<input type="text"/>				
Decision Date	<input type="text"/>	to	<input type="text"/>	Clinical Trials	<input type="checkbox"/>
Sort by	<input type="text" value="Decision Date (descending)"/>				

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# Public Databases: Cleared 510(K)'s

## 510(k) Premarket Notification

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1 to 4 of 4 Results

ProductCode: *PHL* Decision Date To:  
 01/10/2017

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Device Name ▲▼	Applicant ▲▼	510(K) Number ▲▼	Decision Date ▲▼
<a href="#">Rewalk(TM)</a>	Rewalk Robotics Inc.	<a href="#">K160987</a>	07/22/2016
<a href="#">Ekso™ (Version 1.1) And Ekso Gt™ (Versio</a>	Ekso Bionics, Inc.	<a href="#">K161443</a>	07/19/2016
<a href="#">Ekso™ (Version 1.1) And Ekso Gt™ (Versio</a>	Ekso Bionics, Inc.	<a href="#">K143690</a>	04/01/2016
<a href="#">Indego</a>	Parker Hannifin Corporation	<a href="#">K152416</a>	02/26/2016

# Powered lower extremity exoskeleton

## 21 CFR 890.3480 Powered lower extremity exoskeleton

- (a) *Identification*. A powered lower extremity exoskeleton is a prescription device that is composed of an external, powered, motorized orthosis that is placed over a person's paralyzed or weakened limbs for medical purposes.
- (b) *Classification*. Class II (special controls). The special controls for this device are:
  - » List of 7 Special Controls (with parts) to provide a reasonable assurance of safety and effectiveness
- Dr. Saha will elaborate in her presentation

# Assistive Devices for the Upper Extremity



- At this time we've cleared assistive devices wrapped around the upper extremity of stroke patients undergoing rehabilitation for muscle re-education, and maintaining or increasing range of motion.
- Devices can involve different control mechanisms (i.e., myoelectric)
- Consider submitting a 513(g) if you want our feedback on what regulation your device would be classified.

# Indications for Use vs. Intended Use

- **Indications for use** – *The disease or condition the device will diagnose, treat, prevent, cure or mitigate, including a description of the patient population for which the device is intended.*
- **Intended use** – *The general purpose of the device or its function. The intended use of a device encompasses the indications for use.*

New Indications for Use are cleared through the 510(k) Notification whereas new intended use is granted/approved through a *de novo* application or premarket approval

How to determine whether a different indications for use presents a new intended use -

<http://www.fda.gov/downloads/MedicalDevices/.../UCM284443.pdf>

# FDA Guidance Documents

## FDA Guidance Documents

<http://www.fda.gov/MedicalDevices/DeviceRegulationandGuidance/GuidanceDocuments/default.htm>

- Significant Risk/Non-Significant Risk Guidance Document
  - <http://www.fda.gov/downloads/RegulatoryInformation/Guidances/UCM126418.pdf>
- 513(g) Guidance Document – when to assess the appropriate device classification
  - <http://www.fda.gov/downloads/medicaldevices/deviceregulationandguidance/guidancedocuments/ucm209851.pdf>
- The 510(k) Program: Evaluating Substantial Equivalence in Premarket Notifications [510(k)]
  - <http://www.fda.gov/downloads/MedicalDevices/.../UCM284443.pdf>
- Draft: De Novo Classification Process (Evaluation of Automatic Class III Designation)
  - <http://www.fda.gov/downloads/medicaldevices/deviceregulationandguidance/guidancedocuments/ucm273903.pdf>

# Pre-Submissions

**WHAT:** an opportunity to obtain **FDA feedback** prior to IDE or marketing submission

## **Guidance Document**

“Requests for Feedback on Medical Device Submissions: The Pre-Submission Program and Meetings with Food and Drug Administration Staff”

(Document issued on February 18, 2014 )





# Point of Contact for General Submission Questions

## DICE

Division of Industry and Consumer Education

EMAIL : [DICE@fda.hhs.gov](mailto:DICE@fda.hhs.gov)

**Phone:** 1(800) 638-2041 or (301) 796-7100

*Press 1 to speak to the Consumer Team*

*Press 2 to speak to the Industry Team*

# Neuron

Volume 92  
Number 5  
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## NeuroView

### FDA Regulation of Neurological and Physical Medicine Devices: Access to Safe and Effective Neurotechnologies for All Americans

Anderson L, Antkowiak P, Asefa A, Ballard A, Bansal T, Bello A, Berne B, Bowsher K, Blumenkopf B, Broverman I, Bydon M, Chao K, Como P, Cork K, Costello A, De Laurentis K, DeMarco A, Dean H, Doucet J, Dworak B, Epperson L, Franca E, Ghassemian N, Ghosh C, Govindarajan A, Gupta J, Gutowski S, Herrmann R, Hoffmann M, Heetderks W, Hsu S, Kaufman D, Keegan E, Kittlesen G, Khuu K, Lee H, Lo L, Marcus I, Marjenin T, Mathews B, Misra S, Pinto V, Ramos V, Raben S, Russell A, Saha D, Seog J, Shenouda C, Smith M, Tang X, Wachrathit K, Waterhouse J, Williams D, Zheng X, Peña C.

**Neuron.** 2016 Dec 7;92(5):943-948. doi: 10.1016/j.neuron.2016.10.036.

### NEW FDA Website for Neurological Devices:

<http://www.fda.gov/MedicalDevices/ProductsandMedicalProcedures/NeurologicalDevices/default.htm>

# Medical Device Premarket Review

## Contact Information



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