

Food and Drug Administration 10903 New Hampshire Avenue Document Control Center – WO66-G609 Silver Spring, MD 20993-0002

October 25, 2016

BIOMERIEUX, INC. KAREN RUSSELL STAFF REGULATORY AFFAIRS SPECIALIST 595 ANGLUM ROAD HAZELWOOD MO 63042

Re: K162076

Trade/Device Name: chromID MRSA Regulation Number: 21 CFR 866.1700

Regulation Name: Culture medium for antimicrobial susceptibility tests

Regulatory Class: II Product Code: JSO Dated: July 26, 2016 Received: July 29, 2016

Dear Ms. Russell:

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. 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 Parts 801 and 809); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulations (21 CFR Parts 801 and 809), please contact the Division of Industry and Consumer Education at its toll-free number (800) 638 2041 or (301) 796-7100 or at its Internet address

http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm. 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>http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm</u> for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Industry and Consumer Education at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address

http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm.

Sincerely yours,

Ribhi Shawar -S

For Uwe Scherf, M.Sc., Ph.D.
Director
Division of Microbiology Devices
Office of In Vitro Diagnostics
and Radiological Health
Center for Devices and Radiological Health

Enclosure

DEPARTMENT OF HEALTH AND HUMAN SERVICES Food and Drug Administration

Indications for Use

Form Approved: OMB No. 0910-0120 Expiration Date: January 31, 2017 See PRA Statement below.

510(k) Number (if known)
K162076
Device Name chromID™ MRSA agar
Indications for Use (Describe) chromID TM MRSA agar is a selective and differential chromogenic medium for: A. The qualitative detection of nasal colonization of methicillin-resistant Staphylococcus aureus (MRSA), to aid in the prevention and control of MRSA in healthcare settings. The test is performed on anterior nares swab specimens from patients and healthcare workers to screen for MRSA colonization. chromID TM MRSA when used to detect nasal colonization is not intended to diagnose, guide, or monitor therapy for MRSA infections, or provide results of susceptibility to methicillin.
B. The qualitative detection of MRSA from skin and skin structure infections, chromID TM MRSA is indicated for use in conjunction with other laboratory tests and clinical data available to aid in the identification and diagnosis of MRSA infections. Concomitant cultures for skin and skin structure infections are necessary to recover organisms for further microbiological susceptibility testing or epidemiological typing. A negative result does not preclude MRSA infection, chromID TM MRSA is not intended to monitor treatment for MRSA infections, or provide results of susceptibility to methicillin.
C. The qualitative detection of MRSA from positive blood cultures demonstrating Gram-positive cocci on Gram stain. chromID™ MRSA is indicated for use in conjunction with other laboratory tests and clinical data available to aid in the identification and diagnosis of MRSA infections. Sub-culturing for positive blood cultures are necessary to recover organisms for further microbiological susceptibility testing or epidemiological typing. A negative result does not preclude MRSA infection. chromID™ MRSA is not intended to monitor treatment for MRSA infections, or provide results of susceptibility to methicillin.
Type of Use (Select one or both, as applicable)
➤ Prescription Use (Part 21 CFR 801 Subpart D)
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."

chromID™ MRSA Agar: 032. 510(k) Summary

A. 510(k) Submission Information:

Submitter's Name: bioMérieux, Inc.

Address: 595 Anglum Road

Hazelwood, MO 63042

Contact Person: Karen Russell

Staff Regulatory Affairs Specialist

Phone Number: 314-731-8639 Fax Number: 314-731-8689

Date of Preparation: July 26, 2016

B. Device Name:

Formal/Trade Name: chromIDTM MRSA agar

Classification Name: Culture Media, Antimicrobial Susceptibility Test, Excluding

Mueller Hinton Agar 21 CFR 866.1700

Product Code JSO

Common Name: Culture media

C. Predicate Device: Remel Spectra MRSA (K092407)

D. 510(k) Summary:

Intended Use:

chromIDTM MRSA agar is a selective and differential chromogenic medium for :

A. The qualitative detection of nasal colonization of methicillin-resistant *Staphylococcus aureus* (MRSA), to aid in the prevention and control of MRSA in healthcare settings. The test is performed on anterior nares swab specimens from patients and healthcare workers to screen for MRSA colonization. chromIDTM MRSA when used to detect nasal colonization is not intended to diagnose, guide, or monitor therapy for MRSA infections, or provide results of susceptibility to methicillin.

B. The qualitative detection of MRSA from skin and skin structure infections. chromIDTM MRSA is indicated for use in conjunction with other laboratory tests and clinical data

available to aid in the identification and diagnosis of MRSA infections. Concomitant cultures for skin and skin structure infections are necessary to recover organisms for further microbiological susceptibility testing or epidemiological typing.

A negative result does not preclude MRSA infection. chromID™ MRSA is not intended to monitor treatment for MRSA infections, or provide results of susceptibility to methicillin.

C. The qualitative detection of MRSA from positive blood cultures demonstrating Grampositive cocci on Gram stain.

chromIDTM MRSA is indicated for use in conjunction with other laboratory tests and clinical data available to aid in the identification and diagnosis of MRSA infections. Subculturing for positive blood cultures are necessary to recover organisms for further microbiological susceptibility testing or epidemiological typing.

A negative result does not preclude MRSA infection. chromID™ MRSA is not intended to monitor treatment for MRSA infections, or provide results of susceptibility to methicillin.

Indications for Use:

See Intended Use Statement.

Device Description:

chromIDTM MRSA agar consists of a rich nutritive base combining different peptones. It also contains a chromogenic substrate of α -glucosidase and a combination of several antibiotics, including cefoxitin, which favor the growth of MRSA including heteroresistant strains and the direct detection of MRSA strains by revealing α -glucosidase activity (patent registered), green colonies. The selective mixture of antibiotics inhibits most bacteria not belonging to the genus Staphylococcus, as well as yeasts. The MRSA strains are identified by the presence of green colonies that result from the chromogen incorporated in the medium. The chromogen targets the α -glucosidase activity of S. aureus. The α -glucosidase produced by S. aureus cleaves the chromogenic substrate, which gives a green color to the S. aureus colonies growing on the medium.

Substantial Equivalence

The similarities of chromIDTM MRSA agar when compared to the predicate device are described in the following table.

	Device	Predicate device	
chromID™ MRSA Agar		Remel Spectra TM MRSA (K092407)	
Similarities			
Similarities Intended Use	chromID TM MRSA agar is a selective and differential chromogenic medium for: A. The qualitative detection of nasal colonization of methicillinresistant <i>Staphylococcus aureus</i> (MRSA), to aid in the prevention and control of MRSA in healthcare settings. The test is performed on anterior nares swab specimens from patients and healthcare workers to screen for MRSA colonization. chromID TM	Remel Spectra TM MRSA is a selective and differential chromogenic medium recommended for use in the qualitative detection of nasal colonization of methicillinresistant <i>Staphylococcus aureus</i> (MRSA) to aid in the prevention and control of MRSA in healthcare settings. The test is performed with anterior nares swab specimens from patients and healthcare workers to screen for MRSA colonization. Spectra TM MRSA is not intended to diagnose MRSA infection or to	
	MRSA when used to detect nasal colonization is not intended to diagnose, guide, or monitor therapy for MRSA infections, or provide results of susceptibility to methicillin. B. The qualitative detection of MRSA from skin and skin structure infections. chromID TM MRSA is indicated for use in conjunction with other laboratory tests and clinical data available to aid in the identification and diagnosis of MRSA infections. Concomitant cultures for skin and	guide or monitor treatment for infections. Spectra TM MRSA is also intended for use in the qualitative detection of MRSA from positive blood cultures demonstrating Gram-positive cocci on Gram stain. Spectra TM MRSA is indicated for use in conjunction with other laboratory tests and clinical data available to the clinician as an aid in the detection of MRSA from patient positive blood cultures. Spectra TM MRSA is not intended to monitor treatment for MRSA	
	skin structure infections are necessary to recover organisms for further microbiological susceptibility testing or epidemiological typing. A negative result does not preclude MRSA infection. chromID TM MRSA is not intended to monitor treatment for MRSA infections, or provide results of susceptibility to methicillin. C. The qualitative detection of MRSA from positive blood cultures demonstrating Grampositive cocci on Gram stain.	infections, or provide results of susceptibility to methicillin. All positive blood bottles should be subcultured for further microbiological/susceptibility testing.	

	Device	Predicate device
	chromID TM MRSA Agar	Remel Spectra TM MRSA (K092407)
chromID™ MRSA Agar chromID™ MRSA is indicated		Remei Specifa WiksA (R032407)
	for use in conjunction with other	
	laboratory tests and clinical data	
	available to aid in the	
	identification and diagnosis of	
	MRSA infections. Sub-culturing	
	for positive blood cultures are	
	necessary to recover organisms	
	for further microbiological	
	susceptibility testing or	
	epidemiological typing. A	
	negative result does not preclude	
	MRSA infection. chromID TM	
	MRSA is not intended to monitor	
	treatment for MRSA infections,	
	or provide results of	
	susceptibility to methicillin.	
Test method	Manual	Manual
Specimen	Anterior nares specimens (Direct	Anterior nares specimens (Direct
	specimens)	specimens)
	Positive blood cultures	Positive blood cultures
Test Principle	chromID TM MRSA agar consists	Remel Spectra TM MRSA is an
	of a rich nutritive base combining	opaque medium, which uses a novel
	different peptones. It also	chromogen that yields a denim-blue
	contains a chromogenic substrate	color as a result of phosphatase
	of α-glucosidase and a	activity. This enzyme is present in all
	combination of several antibiotics	Staphylococcus aureus, including
	including cefoxitin, which favor	MRSA. To allow the medium to
	the growth of MRSA including	differentiate MRSA accurately, it
	hetero-resistant strains and the	contains a combination of
	direct detection of MRSA strains	antibacterial compounds designed to
	by revealing α-glucosidase	inhibit the growth of a wide variety
	activity (patient registered): green	of competitor organisms.
	colonies.	of competitor organisms.
	colonics.	Also included are compounds that
	The selective mixture of	Also included are compounds that
	antibiotics inhibits most bacteria	encourage the production of MRSA
	not belonging to the genus	pathogenicity marker, ensuring
		expression of the phosphatase
	Staphylococcus, as well as yeasts.	enzyme and so providing enhanced
	The α -glucosidase produced by S .	sensitivity and specificity.
	aureus cleaves the chromogenic	
	substrate, which gives a green	
	color to the S. aureus colonies	
	growing on the medium. Since	
	the cefoxitin has inhibited non-	
	methicillin-resistant S. aureus	
	strains, only the methicillin-	
	resistant S. aureus strains grow	

	Device	Predicate device
	chromID™ MRSA Agar	Remel Spectra TM MRSA (K092407)
	and turn green on the media.	
Differences		
Interpreting results	The α -glucosidase produced by <i>S. aureus</i> cleaves the chromogenic substrate, which produces a green color to the <i>S. aureus</i> colonies growing on the medium. Any shade of green should be interpreted as a positive result.	After 24 hours incubation, MRSA will appear as small to medium denim blue colonies against a white background. The colonies are typically smaller than on non-selective media. Other organisms (non-MRSA) will exhibit marked inhibition or produce white colonies. If after 24 hours incubation no denim blue colonies are observed, the specimen is considered negative and plates should be discarded.
Incubation	24h at 35-37°C aerobic	24h at 35-37°C ambient air
Conditions	conditions	
Specimen	Skin and skin structure specimens	Not applicable

Both devices incorporate selective agents in the agar to inhibit most bacteria not belonging to the genus *Staphylococcus*, as well as yeasts. Both media are selective for methicillin-resistant *Staphylococcus* and contain a chromogenic substrate that turns a specific color with growth of *Staphylococcus aureus* colonies. The differences in the two media are the selective agents and the targeted enzyme / chromogen combination resulting in the color of the *S. aureus* colonies.

Performance Characteristics

Analytical Studies

The following studies were conducted as part of K151688: Recovery (Limit of Detection), Analytical Reactivity (Challenge), Cross Reactivity (Analytical Specificity), Mixed Infection, Incubation, Expression of Resistance, and Interference Substances. These studies are also summarized below.

Reproducibility – Reproducibility of the chromIDTM MRSA agar was evaluated with a set of ten well-characterized *Staphylococcus aureus* organisms, including both mecA positive and mecA negative isolates. These organisms were tested in triplicate each day at 1x10³ CFU/mL for five days at three clinical trial sites. Expected results were obtained 100% of the 450 times tested.

Quality Control – Two quality control organisms were tested at each study site by chromIDTM MRSA on each day of testing.

Staphylococcus aureus	ATCC 29213
Staphylococcus aureus	ATCC 43300

The results for chromIDTM MRSA agar QC were 100% correct for of the 297 times tested.

Recovery (**Limit of Detection**) - At 24 hours incubation time, the lowest concentration of MRSA organisms demonstrating growth with a positive result was 10³ CFU/mL for one MRSA strain (ATCC® 43300) and 10⁵ CFU/mL for the second MRSA strain (CDC Mu3-BR).

Analytical Reactivity (Challenge) – A challenge set composed of 80 mecA MRSA strains and 5 mecC MRSA strains was inoculated on the chromIDTM MRSA agar with an inoculum equivalent to 10³ CFU/mL. After 24 hours of incubation, 58/80 mecA MRSA strains and 4/5 mecC MRSA strains were detected on the chromIDTM MRSA agar.

Cross Reactivity (Analytical Specificity) - To evaluate the analytical specificity of the chromIDTM MRSA media, 71 non-MRSA strains representing bacterial and fungal species were inoculated onto chromIDTM MRSA medium at a high inoculum level (10⁶ CFU/mL). After 24 hours of incubation, forty-four strains did not grow and twenty strains grew colonies without green pigment. Green colonies (cross reactivity) were observed for three *Klebsiella pneumoniae* (KPC) strains, two *Staphylococcus sciuri* (oxacillin resistant) strains, one *Enterobacter cloacae* (KPC) strain, and one *Staphylococcus pseudintermedius* (oxacillin resistant) strain.

Mixed Infection - 10 MRSA strains at an organism concentration of 10^3 CFU/mL were inoculated alone and in association with 3 non-targeted strains at an organism concentration of 10^8 , 10^6 , or 10^4 CFU/ml. MRSA was still detected on chromID MRSA in the presence of high levels of non-target organisms.

Interfering Substances - For blood culture specimens tested in the presence of hemoglobin, triglyceride, conjugated and non-conjugated bilirubin, γ -globulin, and sodium polyanethol sulfonate, all the MRSA strains were recovered. For blood culture bottles, there was no negative effect on the growth of MRSA strains on chromID MRSA. The bottles tested in the study included BacT/ALERT® aerobic FA, FA Plus, SA and anaerobic FN, FN Plus, SN and BacTECTM aerobic Standard, Plus, Peds Plus and anaerobic Standard, Plus and Lytic.

Incubation - The incubation times required for three MRSA strains, at an organism concentration of 10³ CFU/mL, to produce positive chromIDTM MRSA results was 20 hours for two strains and 27 hours for one strain.

Expression of Resistance - Twenty eight well-characterized *S. aureus* (10 MRSA low level methicillin-resistant, 10 high level methicillin-resistant, 5 BORSA, and 3 MSSA strains) were evaluated with chromIDTM MRSA. All low level and high level methicillin-resistant strains were detected at an inoculum $\geq 10^5$ CFU/mL. At lower concentrations some strains can give colorless colonies after 24 hours of incubation.

Clinical studies

chromIDTM MRSA was evaluated at four clinical sites. chromIDTM MRSA performance was determined by the presence or absence of green colonies. All green colonies were tested by Gram stain, catalase and latex agglutination, and *Staphylococcus aureus* colonies were tested for resistance to oxacillin by the Cefoxitin Screen test. All green colonies were also tested for the presence of the mecA gene by PCR, and species identification was confirmed by VITEK® MS.

Positive results were defined for chromIDTM MRSA as the growth of green colonies. All other results, including the growth of white colonies and no growth, were considered negative.

Every sample was also tested by the reference method, which included growth on Tryptic Soy agar with 5% sheep blood (BAP). Colonies suggestive of *Staphylococcus* species were tested by Gram stain, catalase and latex agglutination. *Staphylococcus aureus* isolates were further tested for resistance to Oxacillin by the Cefoxitin Screen test. All colonies resistant to Oxacillin by the Cefoxitin Screen test were tested for the presence of the mecA gene by PCR and by VITEK® MS for species confirmation.

Positive results for BAP were defined as growth of Cefoxitin resistant *Staphylococcus aureus* present in the media up to 48 hours. All other results, including the growth of Cefoxitin susceptible *Staphylococcus aureus*, growth of other species and no growth, were considered negative.

Blood Culture Bottle-System Type Performance Summary

Blood Culture Information	Blood Culture Bottle Type	Sensitivity n/N [%] (95% Score CI)	Specificity n/N [%] (95% Score CI)
	FA (FAN® Aerobic)	32/32 [100.0%] (89.3 - 100%)	14/14 [100.0%] (78.5 - 100%)
	FA (FAN® Plus Aerobic)	22/22 [100.0%] (85.1 - 100%)	10/10 [100.0%] (72.3 - 100%)
	FN (FAN® Anaerobic)	31/31 [100.0%] (89.0 - 100%)	5/5 [100.0%] (56.6 - 100%)
BacT/ALERT® (vs. BAP)	FN (FAN® Plus Anaerobic)	20/20 [100.0%] (83.9 - 100%)	7/7 [100.0%] (64.6 - 100%)
	SA (Standard Aerobic)	23/23 [100.0%] (85.7 - 100%)	162/164 [98.8%] (95.7 - 99.7%)
	SN (Standard Anaerobic)	25/25 [100.0%] (86.7 - 100%)	95/96 [99.0%] (94.3 – 99.8%)
	SYSTEM (Combined)	153/153 [100.0%] (97.6 - 100%)	293/296 [99.0%] (97.1 - 99.7%)
	Plus Aerobic/F	30/30 [100%] (88.7 - 100%)	222/225 [98.7%] (96.2 - 99.6%)
BACTEC TM (vs. BAP)	Lytic/10 Anaerobic/F	32/32 [100%] (89.3 - 100%)	126/127 [99.2%] (95.7 – 99.9%)
	SYSTEM (Combined)	62/62 [100.0%] (94.2 - 100%)	348/352 [98.9%] (97.1 - 99.6%)

A total of 863 positive blood culture specimens (demonstrating Gram-positive cocci) were analyzed during the clinical trial. One hundred eighty-seven cultures were removed

due to low prevalence of target (in specific blood culture bottle type) and protocol deviations.

In the clinical study, MRSA was identified in 215 positive blood cultures by the reference method and 222 positive blood cultures by chromIDTM MRSA (at 24 hours). Seven discordant specimens (MRSA positive result by chromIDTM: MRSA negative result by reference method) were observed. Two false positives were confirmed as MRSA positive. Five false positives that grew green colonies were not identified as MRSA as per latex agglutination and Cefoxitin screen results.

chromIDTM MRSA Clinical Performance Data chromIDTM MRSA (24 hours) versus BAP Reference Method (48 hours)

	Performance	2-sided 95% CI
Sensitivity	100.0% (215/215)	[98.3% – 100]%
Specificity	98.9% (641/648)	[97.8% – 99.5]%

The prevalence of MRSA detected by BAP plus confirmatory testing for MRSA was 24.9% (215/863), and the prevalence detected by chromIDTM MRSA at 24 hours was 25.7% (222/863).