

# Acceptance Review for De Novo Classification Requests

## Draft Guidance for Industry and Food and Drug Administration Staff

### *DRAFT GUIDANCE*

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# Preface

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27 Additional copies are available from the Internet. You may also send an e-mail request to  
28 [CDRH-Guidance@fda.hhs.gov](mailto:CDRH-Guidance@fda.hhs.gov) to receive a copy of the guidance. Please use the document  
29 number 16055 to identify the guidance you are requesting.

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31 Additional copies are available from the Center for Biologics Evaluation and Research (CBER),  
32 Office of Communication, Outreach, and Development (OCOD), 10903 New Hampshire Ave.,  
33 Bldg. 71, rm. 3128, Silver Spring, MD 20993-0002, or by calling 1-800-835-4709 or 240-402-  
34 8010, by email, [ocod@fda.hhs.gov](mailto:ocod@fda.hhs.gov) or from the Internet at  
35 <https://www.fda.gov/BiologicsBloodVaccines/GuidanceComplianceRegulatoryInformation/Guidances/default.htm>.  
36

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# Acceptance Review for De Novo Classification Requests

## Draft Guidance for Industry and Food and Drug Administration Staff

*This draft guidance, when finalized, will represent the current thinking of the Food and Drug Administration (FDA or Agency) on this topic. It does not establish any rights for any person and is not binding on FDA or the public. You can use an alternative approach if it satisfies the requirements of the applicable statutes and regulations. To discuss an alternative approach, contact the FDA staff or Office responsible for this guidance as listed on the title page.*

### I. Introduction

The purpose of this draft document is to explain the procedures and criteria FDA intends to use in assessing whether a request for an evaluation of automatic class III designation (De Novo classification request or De Novo request) meets a minimum threshold of acceptability and should be accepted for substantive review.<sup>1</sup>

Focusing the Agency's review resources on complete De Novo requests will provide a more efficient approach to ensuring that safe and effective medical devices reach patients as quickly as possible. Moreover, with the enactment of the Medical Device User Fee Amendments of 2017 (MDUFA IV),<sup>2</sup> FDA agreed to performance goals based on the timeliness of reviews, as well as guidance that includes a submission checklist to facilitate a more efficient and timely review process (see Section II.E. of the MDUFA IV Commitment Letter). Acceptance review therefore takes on additional importance in both encouraging incoming quality applications from De Novo requesters and allowing the Agency to appropriately concentrate resources on complete applications.

FDA's guidance documents, including this draft guidance, do not establish legally enforceable responsibilities. Instead, guidances describe the Agency's current thinking on a topic and should be viewed only as recommendations, unless specific regulatory or statutory requirements are

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<sup>1</sup> For more information regarding the De Novo review process, please see the FDA guidance, "De Novo Classification Process (Evaluation of Automatic Class III Designation)," available at <https://www.fda.gov/downloads/medicaldevices/deviceregulationandguidance/guidancedocuments/ucm273903.pdf>.

<sup>2</sup> See Title II of the FDA Reauthorization Act of 2017 (Public Law 115-52).

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86 cited. The use of the word *should* in Agency guidance means that something is suggested or  
87 recommended, but not required.

## 88 **II. Scope**

89 The information presented in this draft document is intended to provide De Novo requesters with  
90 transparency regarding the types of information FDA believes are necessary to conduct a  
91 substantive review for a De Novo request. To enhance consistency, the document, when  
92 finalized, will provide FDA staff with a clear, consistent approach to making “Accept” or  
93 “Refuse to Accept” (RTA) decisions on De Novo requests.

94 The acceptance review policy does not alter the process by which devices are classified in a De  
95 Novo request once accepted for substantive review; however, it does alter the start of the FDA  
96 review clock for purposes of MDUFA performance goals for De Novo requests that are not  
97 accepted for review. Further, FDA’s decision to accept a De Novo request does not imply that  
98 the information provided in the De Novo request, including performance data, demonstrate  
99 reasonable assurance of the safety and effectiveness of your device or assure granting of the De  
100 Novo request.

101 As mentioned above, the purpose of this guidance is to explain the procedures and criteria FDA  
102 intends to use in assessing whether a De Novo request meets a minimum threshold of  
103 acceptability and should be accepted for substantive review. This document includes both an  
104 Acceptance Checklist (**Appendix A. Acceptance Checklist for De Novo Classification Requests**)  
105 as well as a Recommended Content Checklist (**Appendix B. Recommended Content Checklist**  
106 **for De Novo Classification Requests**), as explained in further detail below.

107 FDA recognizes and anticipates that the Agency and industry may need up to 60 days to perform  
108 activities to operationalize the policies within the guidance, when finalized. If all criteria  
109 necessary to meet a minimum threshold of acceptability for De Novo requests as outlined in this  
110 guidance, when finalized, are not included in a De Novo request received by FDA before or up  
111 to 60 days after the publication of this guidance, when finalized, CDRH staff does not generally  
112 intend to refuse to accept.

## 113 **III. De Novo Acceptance Review Policies and Procedures**

### 114 **A. Acceptance Review Policies and Procedures**

115 FDA staff will conduct an acceptance review of all De Novo requests based on objective criteria  
116 using the Acceptance Checklist (see **Appendix A. Acceptance Checklist for De Novo**  
117 **Classification Requests**) to ensure that the De Novo request is administratively complete to  
118 permit a substantive review. For the De Novo request to be accepted, all administrative elements  
119 identified as acceptance items should be present or a rationale should be provided for those  
120 elements determined by the requester to be not applicable. To aid in the acceptance review, it is  
121 recommended that requesters complete and submit Acceptance Checklists with their De Novo  
122 requests that identify the location of supporting information for each acceptance element.

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123 The acceptance review, which occurs prior to the substantive review, should be conducted and  
124 completed within 15 calendar days of FDA receiving the De Novo request. An acceptance  
125 review will only begin for De Novo requests for which the appropriate user fee has been paid  
126 and a validated eCopy has been received.<sup>3</sup>

127 The acceptance review will be conducted on original De Novo requests and responses to  
128 acceptance review communications but not supplements or amendments submitted in response to  
129 requests for additional information after a De Novo request has been accepted for a substantive  
130 review. FDA staff should assess whether the De Novo request should be accepted by first  
131 answering the preliminary questions below and then verifying that the De Novo request contains  
132 all of the information identified as RTA items in the Acceptance Checklist.

133 The purpose of the acceptance review is to assess whether a De Novo request is administratively  
134 complete, which helps ensure that it includes all of the information necessary for FDA to conduct  
135 a substantive review. Therefore, the De Novo request should not be accepted and should receive  
136 an RTA designation if one or more of the items noted as RTA items in the Acceptance Checklist  
137 are not present and no explanation is provided for the omission(s). However, during the RTA  
138 review, FDA staff has discretion to determine whether missing checklist items are needed to  
139 ensure that the De Novo request is administratively complete to allow the De Novo request to be  
140 accepted. FDA staff also has discretion to request missing checklist items interactively from  
141 requesters during the RTA review. Interaction during the RTA reviews is dependent on FDA  
142 staff's determination that outstanding issues are appropriate for interactive review and that  
143 adequate time is available for the requester to provide supporting information and for FDA staff  
144 to assess responses.

145 If one or more items noted as RTA items on the Acceptance Checklist are not present, FDA staff  
146 conducting the acceptance review should obtain management concurrence and notify the  
147 designated De Novo contact person electronically<sup>4</sup> that the De Novo request has not been  
148 accepted. FDA staff should also provide the requester with a copy of the completed checklist  
149 indicating which item(s) are the basis for the RTA designation.

150 The De Novo requester may respond to the RTA notification by providing the missing  
151 information identified in the Acceptance Checklist. The De Novo requester should submit this  
152 information to the respective Center's Document Control Center (DCC) to be included in the file  
153 under the originally assigned De Novo number. A new De Novo request and new user fee are not  
154 necessary, and it is not necessary to resend the entire De Novo request, unless FDA notes

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<sup>3</sup> For additional information, please see the FDA guidance "FDA and Industry Actions on De Novo Classification Requests: Effect on FDA Review Clock and Goals," available at <https://www.fda.gov/downloads/medicaldevices/deviceregulationandguidance/guidancedocuments/ucm576305.pdf>.

<sup>4</sup> For additional information about email communications with CBER, please see "SOPP 8119: Use of Email for Regulatory Communications," available at <https://www.fda.gov/BiologicsBloodVaccines/GuidanceComplianceRegulatoryInformation/ProceduresSOPPs/ucm109645.htm>.

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155 otherwise (e.g., because the De Novo request is missing the majority of the items on the  
156 checklist). It is sufficient to submit and address only the information requested per the  
157 Acceptance Checklist. If a response to the RTA notification is not received within 180 days of  
158 the date of RTA notification, FDA will consider the De Novo request to be withdrawn and the  
159 De Novo request will be closed in the system.

160 Upon receipt of the newly submitted information, FDA staff should conduct the acceptance  
161 review again following the same procedure within 15 calendar days of receipt of the new  
162 information. The subsequent acceptance review will assess whether the new information makes  
163 the De Novo request complete according to the checklist criteria for completeness. If the De  
164 Novo request is still found to be incomplete, FDA staff should notify the contact person and  
165 provide the new checklist indicating the missing item(s).

166 When a De Novo request is accepted, FDA staff should electronically notify the De Novo  
167 request contact person that the De Novo request has been accepted and begin a substantive  
168 review of the De Novo request. If FDA does not complete the acceptance review within the  
169 acceptance review period (i.e., within 15 calendar days of receipt), the De Novo requester should  
170 be electronically notified that the acceptance review was not completed and the De Novo request  
171 is under substantive review. FDA may request any information that may have resulted in an RTA  
172 designation during the substantive review.<sup>5</sup> Once a De Novo request has been accepted, FDA  
173 may ask for relevant information during the substantive review that may have been  
174 unintentionally overlooked during the acceptance review.

### 175 **B. FDA Review Clock**

176 The FDA review clock start date is the DCC receipt date of the most recent De Novo request or  
177 additional information that resulted in an acceptance designation for the De Novo request,  
178 provided the user fee has been paid and a validated eCopy has been provided. Thus, the FDA  
179 review clock does not start when a De Novo request is placed on eCopy or User Fee hold or  
180 designated RTA.

181 De Novo requests and additional information submitted in response to a RTA designation are  
182 received by the respective Center's DCC. If the De Novo request is accepted for substantive  
183 review on the first acceptance review, the FDA review clock start date is the DCC receipt date of  
184 the De Novo request. However, if the De Novo request is designated RTA, the FDA review  
185 clock start date will be the DCC receipt date of the De Novo request including the additional  
186 information that results in an acceptance designation (even if FDA later requests information that  
187 should have been requested during acceptance review). In the event the acceptance review was  
188 not completed within 15 calendar days, the De Novo request will be considered to be under

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<sup>5</sup> In the case of a government closure during the 15-day review period, the review period may be extended by a comparable number of business days that the FDA buildings are closed. If the submitter receives an automated notice that the acceptance review was not completed because the screening period has exceeded 15 days, FDA may send a correction notice to the De Novo requester.

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189 substantive review, and the FDA review clock start date will be the DCC receipt date of the most  
190 recently received information for the De Novo request. Once the De Novo request is under  
191 substantive review, the calendar days used to conduct the acceptance review (i.e., up to 15 days)  
192 are included within the calendar days to reach a final decision for the De Novo request.

193 **C. Notification of Acceptance Review Result**

194 The De Novo requester should receive an electronic notification of the acceptance review result  
195 within 15 calendar days of DCC receipt (i.e., that the De Novo request has been accepted for  
196 substantive review, that the De Novo request is not accepted for review (RTA), or that the De  
197 Novo request is now under substantive review because the acceptance review was not  
198 completed). This notification will also serve to identify the FDA lead reviewer<sup>6</sup> assigned to the  
199 De Novo request. The notification of either the acceptance or RTA designation will be made  
200 only with supervisory concurrence of the lead reviewer’s acceptance review determination. The  
201 notification of acceptance or RTA designation may occur on any day prior to the 15th calendar  
202 day of DCC receipt. However, in the event the acceptance review was not conducted, a  
203 notification that an RTA review was not conducted will be sent on the 16th day. The notification  
204 will be sent only to the designated contact person identified in the De Novo request. In the case  
205 of an RTA designation, the notification should be accompanied by the completed Acceptance  
206 Checklist indicating the missing elements that resulted in the RTA designation. The completed  
207 checklists are considered part of the De Novo request’s administrative file and will not be posted  
208 publicly. Therefore, it is imperative that the De Novo request identify complete contact  
209 information, including the email address to which the notification should be sent.<sup>7</sup>

210 **IV. Refuse to Accept Principles**

211 In order to use this guidance appropriately, FDA staff should review the following basic  
212 principles regarding FDA’s review policies and procedures.

213 **Acceptance should not be based on a substantive review of the information provided in the**  
214 **De Novo request.**

215 It is important to make the distinction between the acceptance review and the substantive review.  
216 The acceptance review is conducted to assess whether the De Novo request contains all of the  
217 appropriate elements, as identified in the Acceptance Checklist, in order to begin a substantive  
218 review. In assessing whether a De Novo request should be accepted, submitted information is not  
219 evaluated for adequacy to support granting the De Novo request. The acceptance checklist is a  
220 tool to ensure that the De Novo request contains the necessary information in order to conduct a  
221 substantive review (i.e., FDA should not refuse to accept a De Novo request if information is

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<sup>6</sup> In the case of De Novo requests submitted to CBER, whenever the term “lead reviewer” is used in this guidance, the equivalent CBER contact person is the regulatory project manager (RPM).

<sup>7</sup> CBER will accommodate the use of faxes; submitters may also wish to provide a fax number.



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222 present but inadequate to support granting the De Novo request). The evaluation of the quality of  
223 the content occurs within the substantive review once the De Novo request has been accepted.

224 **FDA staff should determine whether the requester provided a justification for any**  
225 **alternative approach.**

226 The De Novo requester may provide a rationale for why any criteria in the checklist are not  
227 applicable to the device. It is FDA’s expectation that each item in the Acceptance Checklist will  
228 be addressed either by including the requested information or providing a rationale for why it  
229 not applicable or why there is a deviation.

230 FDA will not consider a given criterion in the checklist to be “present” if the De Novo request  
231 fails to include either the information requested or a rationale for omission or deviation. If a  
232 justification to omit certain information or for taking an alternative approach is provided, FDA  
233 will consider the adequacy of that justification or alternative approach during substantive review  
234 of the De Novo request. See **Section VI** below for examples and further explanation.

## 235 **V. The Checklist – Preliminary Questions**

236 Within 15 calendar days of receipt of the De Novo request, FDA staff should answer the  
237 preliminary questions below, which are included on the first page of the Acceptance Checklist.  
238 The preliminary questions are intended to be answered by the lead reviewer as an initial  
239 screening of the De Novo request. FDA does not intend for the applicant to have addressed these  
240 items in their De Novo request. Depending upon the answers to these preliminary questions, the  
241 remainder of the acceptance review may or may not be necessary.

242 If the responses to the preliminary questions and subsequent consultation with the Center  
243 personnel identified below indicate that the De Novo acceptance review should not continue<sup>8</sup> the  
244 FDA lead reviewer or the CBER regulatory project manager (RPM) should promptly:

- 245 • inform the De Novo review team (including consulting reviewers); and
- 246 • notify the requester using proper administrative procedures.

247 The preliminary questions are:

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<sup>8</sup> FDA will not process a De Novo request unless it meets the following requirements: (a) the submission must be sent with the user fee required by section 738 of the Federal Food, Drug, and Cosmetic Act (FD&C Act) and (b) a validated eCopy is provided. Because any De Novo request not meeting these two requirements will not be processed by the CDRH or CBER DCC, these requirements are not included in the checklist.

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248 **1. Is the product a device (per section 201(h) of the FD&C Act) or a combination product**  
249 **(per 21 CFR 3.2(e)) with a device constituent part subject to review in a De Novo**  
250 **request)?**

251 If the product does not appear to meet the definition of a device under section 201(h) of the  
252 FD&C Act, or does not appear to be a combination product with a device constituent part, then  
253 the De Novo lead reviewer should consult with the CDRH Product Jurisdiction Officer or the  
254 CBER Product Jurisdiction Liaison to determine the appropriate action and inform Division  
255 management. If FDA staff determines that the product does not appear to be a device or a  
256 combination product with a device constituent part, the De Novo review team should stop the  
257 review and notify the requester that more information is needed.

258 **2. Is the De Novo request with the appropriate Center?**

259 If the De Novo request is for a single-entity device and appears to be subject to review in a  
260 Center different from the one to which it was submitted, or if it is for a combination product with  
261 a device constituent part and it appears that a Center different from the one to which it was  
262 submitted has the lead, the De Novo request lead reviewer should consult with the CDRH  
263 Product Jurisdiction Officer or the CBER Product Jurisdiction Liaison to determine the  
264 appropriate action and inform Division management. If the De Novo request is submitted to  
265 CDRH and CDRH staff determines that the De Novo request is not subject to CDRH review, or  
266 the De Novo request is submitted to CBER and CBER staff determines that the De Novo request  
267 is not subject to CBER review, the De Novo request review team should stop the review and  
268 notify the requester.

269 **3. If a Request for Designation (RFD) was submitted for the device or combination**  
270 **product with a device constituent part and assigned to your Center, identify the RFD #**  
271 **and confirm the following:**

- 272 • **Is the device or combination product the same (e.g., design, formulation) as that**  
273 **presented in the RFD submission?**
- 274 • **Are the indications for use for the device or combination product identified in the**  
275 **De Novo request the same as those identified in the RFD submission?**

276 An RFD determination is specific to the device or combination product and indications for use  
277 for the device or combination product described in the RFD submission. If the device or  
278 combination product has been modified or the indications for use have been modified since the  
279 RFD, the RFD determination may no longer be applicable and jurisdiction may need to be  
280 reevaluated by the Office of Combination Products (OCP). The De Novo lead reviewer should  
281 consult with the CDRH Jurisdictional Officer or the CBER Product Jurisdiction Liaison to  
282 determine the appropriate action and inform Division management.

283 **4. Is this device type eligible for De Novo classification?**

284 FDA staff should determine whether the subject device is a device type for which De Novo  
285 classification is known to be an inappropriate regulatory approach. If the device does not appear  
286 to be eligible for De Novo classification (e.g., a predicate device exists, an existing classification

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287 regulation exists for the same device type, or an approved PMA(s) exists for the same device  
288 type), FDA staff should make this determination during the acceptance review and notify the  
289 requester of the determination. This preliminary question is not intended to identify De Novo  
290 requests for which a substantive review is required in order to determine if De Novo  
291 classification is an inappropriate approach (e.g., information must be reviewed to determine if  
292 special controls can mitigate the identified risks to health).

#### 293 **5. Is there a pending premarket notification (510(k)) or premarket approval (PMA)** 294 **application for the same device with the same indications for use?**

295 If the De Novo requester has a pending 510(k) or PMA for the same device with the same  
296 indications for use, the De Novo review team should place the De Novo request on  
297 administrative hold and work with the De Novo requester to clarify the appropriate regulatory  
298 pathway and premarket submission type. The review team should also consult Division  
299 management and other Center resources to determine which premarket review pathway applies  
300 to the device and the appropriate processes for addressing the situation. FDA staff should also  
301 consult Division management and other Center resources if a 510(k) or PMA have been  
302 submitted for the same device type by different applicants.

#### 303 **6. Is the requester subject to the Application Integrity Policy (AIP)?<sup>9</sup>**

304 The lead reviewer should refer to the AIP list  
305 (<https://www.fda.gov/ICECI/EnforcementActions/ApplicationIntegrityPolicy/ucm134453.htm>).  
306 If the applicant is on the list, the reviewer should consult the CDRH Office of  
307 Compliance/Division of Bioresearch Monitoring (OC/DBM) or CBER Office of Compliance and  
308 Biologics Quality/Division of Inspections and Surveillance/Bioresearch Monitoring Branch  
309 (OCBQ/DIS/BMB) to determine the appropriate action.

## 310 **VI. The Checklist – Acceptance Review**

### 311 **A. Organizational Elements**

312 Although missing one or more of the items in the table of Organizational Elements in the  
313 Acceptance Checklist generally will not lead to an RTA decision, such as a Table of Contents or  
314 page numbers, we strongly encourage requesters to incorporate these elements in their De Novo  
315 requests to streamline FDA review and decision-making. If, however, the De Novo request is so  
316 disorganized that FDA cannot locate RTA items on the Acceptance Checklist needed to classify  
317 the subject device, or if the De Novo request is so poorly written that the RTA items on the

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<sup>9</sup> When data in a pending submission have been called into question by certain wrongful acts (fraud, untrue statements of material facts, bribery, or illegal gratuities), FDA intends to defer substantive scientific review of such data until completion of a validity assessment and questions regarding reliability of the data are resolved. (See FDA Guide 7150.09 Compliance Policy Guide, Chapter 50 – General Policy – Subject: Fraud, Untrue Statements of Material Facts, Bribery, and Illegal Gratuities, 56 FR 46191.)

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318 Acceptance Checklist submitted to support De Novo classification cannot be understood, the De  
319 Novo request should receive an RTA decision.

320 **B. Elements of a Complete De Novo Request (RTA Items)**

321 The objective criteria in the Acceptance Checklist outlines those elements that are essential to  
322 FDA’s substantive review of the De Novo request and classification of the subject device under  
323 section 513(a)(1) of the FD&C Act.

324 **C. Applying the Checklist of RTA Items**

325 Using the Acceptance Checklist, within 15 calendar days of receipt of the De Novo request, FDA  
326 staff should answer each question for the elements identified as RTA items. For those items that  
327 have an option of “yes,” “no,” or “not applicable” (N/A) as an answer, the item should receive an  
328 answer of “yes” or “N/A” for the De Novo request to be accepted for substantive review. For any  
329 element that offers more than one option to be accepted for substantive review, FDA staff should  
330 indicate whether the De Novo request has addressed one of the options for acceptance.

331 **D. Elements Marked as “Not Applicable” (N/A)**

332 The Acceptance Checklist is intended to contain elements necessary for FDA’s substantive  
333 review of the wide range of medical devices that are appropriate for De Novo classification. All  
334 such criteria may not be pertinent to a particular device. FDA staff should select “N/A” for those  
335 elements that do not apply to the subject device. For example, the requirements for financial  
336 certification and disclosure statements (21 CFR 807.87(i)) only apply to De Novo requests with  
337 clinical data. If the De Novo request contains no clinical data, FDA staff should select “N/A.”

338 **E. Adequacy of Information**

339 In order to make the checklist criteria objective, for each RTA item, FDA should consider only  
340 the presence or omission of the element or a rationale for the omission of the element or use of  
341 an alternative approach during acceptance review. It is likely that FDA staff will encounter  
342 scenarios where information is provided but is incomplete or inadequate. In such instances, FDA  
343 staff should answer the question for the respective item as “yes” but may communicate the  
344 inadequacy or request additional information in the course of the substantive review. For  
345 example, the requester may have provided summary information for performance testing;  
346 however, during the acceptance review, the reviewer may note that the results of a particular test  
347 may not be sufficient to determine if the test adequately mitigates a risk to health, and additional  
348 justification would be needed. The performance testing criterion would be marked “yes” in the  
349 checklist, and the full assessment of the results and communication to the requester that  
350 additional justification is needed should occur during the substantive review.

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351 **F. Elements Marked “No”**

352 For any acceptance criterion designated as “no,” FDA intends to provide an explanation to  
353 describe the missing element(s), if needed. This explanation is particularly important for a  
354 criterion in which it may not be immediately apparent to the requester what necessary  
355 information, specifically, is not present. FDA staff should include a list or statement of the  
356 additional information that is necessary to meet the acceptance criteria. This list or statement can  
357 be communicated in the “comment” section on the checklist beside each specific criterion.

358 **VII. Recommended Content Checklist**

359 **A. Purpose**

360 **Appendix B.** Recommended Content Checklist for De Novo Classification Requests provides  
361 additional content recommendations to De Novo requesters. These content elements are based on  
362 information commonly identified as missing or deficient during the substantive review of a De  
363 Novo request and typically included in requests for additional information. While these elements  
364 are not considered in the RTA process, De Novo requests without the recommended information  
365 may require additional time to conduct a substantive review, may be placed on hold to request  
366 additional information in order to complete the substantive review, or may be more likely to  
367 receive a “decline” decision.

368 De Novo requesters who choose to incorporate these content recommendations are encouraged to  
369 complete and submit the Recommended Content Checklist with the De Novo request that  
370 identifies the location of supporting information for each recommended content element.

371 **B. Prior Submission(s) Relevant to the De Novo Request**  
372 **Under Review**

373 For certain De Novo requests, the requester may have previously provided other submissions for  
374 the same device for which FDA provided feedback related to the data or information needed to  
375 support De Novo classification (e.g., a Pre-Submission request, Investigational Device  
376 Exemption (IDE), prior Not Substantially Equivalent (NSE) determination, or prior 510(k) or De  
377 Novo that was deleted or withdrawn). In some cases, the requester may also have received a  
378 prior decline order for the same device. When such prior feedback relevant to De Novo  
379 classification of the subject device exists, we recommend the De Novo request include  
380 information to address this prior feedback and the checklist includes criteria related to this issue.  
381 FDA suggests designating a separate section of the De Novo request that identifies any prior  
382 submission(s) by number, includes a copy of or cross-reference to prior FDA feedback (e.g.,  
383 letter or meeting minutes), and states how or where in the De Novo request this prior feedback  
384 was addressed, including feedback related to any prior related De Novo requests. Note that the  
385 adequacy of how the feedback was addressed should be assessed during the substantive review.

386 To address the checklist criterion regarding whether a prior submission exists, FDA recommends  
387 that requesters provide this information in Section F of the CDRH Premarket Review De Novo

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388 request Cover Sheet form (Form 3514,  
389 <https://www.fda.gov/downloads/AboutFDA/ReportsManualsForms/Forms/UCM080872.pdf>).  
390 Requesters should list prior submissions in Section F of this form or state that there were no prior  
391 submissions to address this criterion. Please be advised that leaving this section of the form blank  
392 will not be considered a statement that there were no prior submissions. This information may  
393 also be included in the cover letter (i.e., either as a statement that there were no prior submissions  
394 for the device, or a listing of the number(s) of the prior submission(s)).

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395 **Appendix A. Acceptance Checklist for De Novo**  
 396 **Classification Requests**

397 (Should be completed within 15 days of DCC receipt)  
 398 The following information is not intended to serve as a comprehensive review.  
 399 FDA recommends that the requester include this completed checklist as part of the De  
 400 Novo request.

401 De Novo #: DEN \_\_\_\_\_ Date Received by DCC:

402 Lead Reviewer:

403 Branch: Division: Center/Office:

404 Note: If an element is left blank on the checklist, it does not mean the checklist is  
 405 incomplete; it means the reviewer did not assess the element during the RTA review and  
 406 that the element will be assessed during substantive review.

<b>Preliminary Questions</b>			
Answers in the shaded blocks indicate consultation with a Center advisor is needed. (Boxes checked in this section represent FDAs preliminary assessment of these questions at the time of administrative review.)	Yes	No	N/A
<p><b>1. Is the product a device (per section 201(h) of the FD&amp;C Act) or a combination product (per 21 CFR 3.2(e)) with a device constituent part subject to review in a De Novo request?</b></p> <p>If it appears not to be a device (per section 201(h) of the FD&amp;C Act) or such a combination product, or you are unsure, consult with the CDRH Jurisdictional Officer or the CBER Product Jurisdiction Liaison to determine the appropriate action, and inform Division management. <i>Provide a summary of the Jurisdictional Officer's/Liaison's determination.</i> If the product does not appear to be a device or such a combination product, mark "No."</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Comments:</b>			
<p><b>2. Is the De Novo request with the appropriate Center?</b></p> <p>If the product is a device or a combination product with a device constituent part, is it subject to review by the Center in which the De Novo request was received? If you believe the De Novo request is not with the appropriate Center, or you are unsure, consult with the CDRH Jurisdictional Officer or the CBER Product Jurisdiction Liaison to determine the appropriate action and inform your division management. <i>Provide a summary of the Jurisdictional Officer's/Liaison's determination.</i> If the De Novo request should not be reviewed by your Center, mark "No."</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Comments:</b>			

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<b>Preliminary Questions</b>			
Answers in the shaded blocks indicate consultation with a Center advisor is needed. (Boxes checked in this section represent FDAs preliminary assessment of these questions at the time of administrative review.)	Yes	No	N/A
<p><b>3. If a Request for Designation (RFD) was submitted for the device or combination product with a device constituent part and assigned to your Center, identify the RFD # and confirm the following:</b></p> <p><b>a. Is the device or combination product the same (e.g., design, formulation) as that presented in the RFD submission?</b></p> <p><b>b. Are the indications for use for the device or combination product identified in the De Novo request the same as those identified in the RFD submission?</b></p> <p>If you believe the product or the indications presented in the De Novo request have changed from the RFD, or you are unsure, consult with the CDRH Jurisdictional Officer or the CBER Product Jurisdiction Liaison to determine the appropriate action and inform your division management. <i>Provide summary of Jurisdictional Officer's/Liaison's determination.</i> If the answer to either question above is no, mark "No." If there was no RFD, mark "N/A."</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Comments:</b>			
<p><b>4. Is this device type eligible for De Novo classification?</b></p> <p>If the device does not appear to be eligible for De Novo classification (e.g., a predicate device exists, an existing classification regulation exists for the same device type, or an approved PMA(s) exists for the same device type), you should consult with the appropriate CDRH or CBER staff during the acceptance review. If the device type is not eligible for De Novo classification, mark "No."</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Comments:</b>			
<p><b>5. Is there a pending 510(k) or PMA for the same device with the same indications for use?</b></p> <p>If yes, consult Division management and the appropriate CDRH or CBER staff to determine the appropriate action.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Comments:</b>			
<p><b>6. Is the requester subject to the Application Integrity Policy (AIP)?</b></p> <p>If yes, consult with the CDRH Office of Compliance/Division of Bioresearch Monitoring (OC/DBM) or CBER Office of Compliance and Biologics Quality/Division of Inspections and Surveillance/Bioresearch Monitoring Branch (OCBQ/DIS/BMB) to determine the appropriate action. Check the AIP list at <a href="https://www.fda.gov/ICECI/EnforcementActions/ApplicationIntegrityPolicy/ucm134453.htm">https://www.fda.gov/ICECI/EnforcementActions/ApplicationIntegrityPolicy/ucm134453.htm</a>.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Comments:</b>			

407 • If the answer to 1 or 2 appears to be "No," then stop review of the De Novo request and issue  
 408 the "Original Jurisdictional Product" letter.



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- 409 • If the answer to 3a or 3b appears to be “No,” then stop the review and contact the CDRH  
 410 Jurisdictional Officer or CBER Office of Jurisdiction Liaison.  
 411 • If the answer to 4 is “No”, the lead reviewer should consult Division management and other  
 412 Center resources to determine the appropriate action.  
 413 • If the answer to 5 is “Yes,” then stop review of the De Novo request, contact the appropriate  
 414 CDRH or CBER staff.  
 415 • If the answer to 6 is “Yes,” then contact CDRH/OC/DBM or CBER/OCBQ/DIS/BMB,  
 416 provide a summary of the discussion with DBM or BMB Staff, and indicate their  
 417 recommendation/action.

<b><u>Organizational Elements</u></b>			
Failure to include these items should not result in an RTA designation.			
<b>*Requesters including the checklist with their De Novo request should identify the page numbers where requested information is located. Use the comments section for an element if additional space is needed to identify the location of supporting information.</b>	<b>Yes</b>	<b>No</b>	<b>*Page #</b>
1. De Novo request contains a Table of Contents.	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>			
2. Each section is labeled (e.g., headings or tabs designating Device Description section, Classification Information and Supporting Data, etc.).	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>			
3. All pages of the De Novo request are numbered.  All pages should be numbered in such a manner that information can be referenced by page number. This may be done either by consecutively numbering the entire De Novo request, or numbering the pages within a section (e.g., 12-1, 12-2...).	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>			

418  
419

<b><u>Elements of a Complete De Novo Request</u></b>
<ul style="list-style-type: none"> <li>• Any “No” answer can result in a “Refuse to Accept” decision; however, FDA staff has discretion to determine whether missing items are needed to ensure that the request is administratively complete to allow the request to be accepted or to request missing checklist items interactively from requesters during the RTA review.</li> <li>• Each element on the checklist should be addressed within the request. The requester may provide a rationale for omission for any criteria that are deemed not applicable. If a rationale is provided, the criterion is considered present (“Yes”). An assessment of the rationale will be considered during the review of the request.</li> </ul>

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<b>Elements of a Complete De Novo Request</b>				
Check “Yes” if item is present, “N/A” if it is not needed, and “No” if it is not included but needed.				
*Requesters including the checklist with their De Novo request should identify the page numbers where requested information is located. Use the comments section for an element if additional space is needed to identify the location of supporting information.	Yes	No	N/A	*Page #
<b>A. Administrative Information</b>				
1. De Novo request contains a description of the device’s intended use, with prescription (Rx) and/or over-the-counter (OTC) use designated (see also 21 CFR 801.109 and FDA’s guidance document entitled, “Alternative to Certain Prescription Device Labeling Requirements,” available at <a href="https://www.fda.gov/RegulatoryInformation/Guidances/ucm072747.htm">https://www.fda.gov/RegulatoryInformation/Guidances/ucm072747.htm</a> ).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
<b>B. Device Description</b>				
1. The De Novo request includes descriptive information for the device, including the following:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
a. A description of the technology (features, materials, and principles of operation) for achieving the intended effect.  Where necessary to describe the device, include representative engineering drawing(s), schematics, illustrations, photos and/or figures of the device. Alternatively, include a statement that engineering drawings, schematics, etc. are not applicable to the device (e.g., the device is a reagent and figures are not pertinent to describe the device).  In lieu of engineering drawings, schematics, etc. of each device to be marketed, “representative” drawings, etc. may be provided, where “representative” is intended to mean that the drawings, etc. provided capture the differences in design, size, and other important characteristics of the various models, sizes, or versions of the device(s) to be marketed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
b. A description of proposed conditions of use; surgical technique for implants; anatomical location of use; user interface; how the device interacts with other devices; and/or how the device interacts with the patient.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
c. A list and description of the components, parts, and accessories to be marketed with the device.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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<b>Elements of a Complete De Novo Request</b>				
Check “Yes” if item is present, “N/A” if it is not needed, and “No” if it is not included but needed.	Yes	No	N/A	*Page #
*Requesters including the checklist with their De Novo request should identify the page numbers where requested information is located. Use the comments section for an element if additional space is needed to identify the location of supporting information.				
<b>Comments:</b>				
2. <b>In Vitro Diagnostic (IVD) Devices:</b> If the device is an IVD, the De Novo request provides the following descriptions as appropriate: <ul style="list-style-type: none"> <li>a. Sensitivity (detection limits, Limit of Blank (LoB), Limit of Detection (LoD), Limit of Quantitation (LoQ) where relevant for the device type).</li> <li>b. Analytical specificity.</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
<b>C. Classification Information and Supporting Data</b>				
1. The De Novo request provides a description of why general controls or general and special controls provide reasonable assurance of safety and effectiveness.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
2. If classification into class II is recommended, the De Novo request identifies proposed special controls and describes how those special controls provide a reasonable assurance of safety and effectiveness.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				

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<b>Elements of a Complete De Novo Request</b>				
Check “Yes” if item is present, “N/A” if it is not needed, and “No” if it is not included but needed.	Yes	No	N/A	*Page #
<p><b>*Requesters including the checklist with their De Novo request should identify the page numbers where requested information is located. Use the comments section for an element if additional space is needed to identify the location of supporting information.</b></p>				
<p>To the extent that the submission relies upon the following information to provide detailed information and reasons for the recommended classification, the De Novo request provides the following:</p> <p>3. <b>Reprocessing and Sterilization:</b> If device is intended to be sterile or is reusable:</p> <ul style="list-style-type: none"> <li>a. Identification of the components and/or accessories for which reprocessing and/or sterilization are applicable.</li> <li>b. Sterilization method, parameters, validation method, and Sterility Assurance Level (SAL).</li> <li>c. Reprocessing information, including the protocols and test reports of the validation of the reprocessing instructions (see the FDA guidance document entitled, “Reprocessing Medical Devices in Health Care Settings: Validation Methods and Labeling,” available at <a href="https://www.fda.gov/downloads/MedicalDevices/DeviceRegulationandGuidance/GuidanceDocuments/UCM253010.pdf">https://www.fda.gov/downloads/MedicalDevices/DeviceRegulationandGuidance/GuidanceDocuments/UCM253010.pdf</a>).</li> <li>d. Pyrogenicity test information for the following:               <ul style="list-style-type: none"> <li>i. implants;</li> <li>ii. devices in direct or indirect contact with the cardiovascular system, the lymphatic system, or cerebrospinal fluid (CSF), regardless of duration of contact; or</li> <li>iii. devices labeled “non-pyrogenic.”</li> </ul> </li> <li>e. Packaging information, including materials and package test methods.</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				

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<b>Elements of a Complete De Novo Request</b>				
Check “Yes” if item is present, “N/A” if it is not needed, and “No” if it is not included but needed.	Yes	No	N/A	*Page #
<p><b>*Requesters including the checklist with their De Novo request should identify the page numbers where requested information is located. Use the comments section for an element if additional space is needed to identify the location of supporting information.</b></p>				
<p>To the extent that the submission relies upon the following information to provide detailed information and reasons for the recommended classification, the De Novo request provides either of the following:</p> <p><b>4. Shelf Life:</b></p> <p style="margin-left: 20px;">a. A summary of the methods used to establish that device performance is not adversely affected by aging, or a rationale for why the storage conditions are not expected to affect device safety or effectiveness.</p> <p style="margin-left: 20px;"><b>OR</b></p> <p style="margin-left: 20px;">b. A proposed shelf life, as well as a summary of the methods used to establish that device safety and effectiveness will not be adversely affected throughout the proposed shelf life.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
<p>To the extent that the submission relies upon the following information to provide detailed information and reasons for the recommended classification, the De Novo request provides the following:</p> <p><b>5. Biocompatibility:</b> If the device includes patient-contacting components:</p> <p style="margin-left: 20px;">a. Identification of each patient-contacting device component and associated materials of construction.</p> <p style="margin-left: 20px;">b. Identification of contact classification (e.g., surface-contacting, less than 24-h duration) for each patient-contacting device component (e.g., implant, delivery catheter).</p> <p style="margin-left: 20px;">c. Biocompatibility assessment of patient-contacting components.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				

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<b>Elements of a Complete De Novo Request</b>				
Check “Yes” if item is present, “N/A” if it is not needed, and “No” if it is not included but needed.	Yes	No	N/A	*Page #
<p><b>*Requesters including the checklist with their De Novo request should identify the page numbers where requested information is located. Use the comments section for an element if additional space is needed to identify the location of supporting information.</b></p>				
<p>To the extent that the submission relies upon the following information to provide detailed information and reasons for the recommended classification, the De Novo request provides the following:</p> <p><b>6. Software:</b></p> <ul style="list-style-type: none"> <li>a. Software level of concern and rationale for the software level of concern.</li> <li>b. Applicable software documentation provided based on the level of concern as described in the FDA guidance document entitled, “Guidance for the Content of Premarket Submissions for Software Contained in Medical Devices,” available at <a href="https://www.fda.gov/downloads/MedicalDevices/DeviceRegulationandGuidance/GuidanceDocuments/ucm089593.pdf">https://www.fda.gov/downloads/MedicalDevices/DeviceRegulationandGuidance/GuidanceDocuments/ucm089593.pdf</a>, <b>OR</b> an alternate approach to such documentation with a rationale.</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
<p>To the extent that the submission relies upon the following information to provide detailed information and reasons for the recommended classification, the De Novo request provides the following:</p> <p><b>7. Electrical Safety and Electromagnetic Compatibility:</b> Electrical safety and/or electromagnetic compatibility evaluation, including:</p> <ul style="list-style-type: none"> <li>a. Evaluation of electrical safety (e.g., per IEC 60601-1 or equivalent FDA-recognized standard), <b>OR</b> evaluation using alternate methods or standards with a rationale.</li> <li>b. Evaluation of electromagnetic compatibility (e.g., per IEC 60601-1-2 or equivalent FDA-recognized standard), <b>OR</b> evaluation using alternate methods or standards with a rationale.</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
<p><b>8. Animal:</b> For each animal study provided in the De Novo request, a statement that the study was conducted in compliance with applicable requirements in the Good Laboratory Practice (GLP) for Nonclinical Laboratory Studies regulation (21 CFR part 58), <b>OR</b> if the study was not conducted in compliance with the GLP regulation, the De Novo request explains why the noncompliance would not impact the validity of the study data provided to support the De Novo request.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				

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<b>Elements of a Complete De Novo Request</b>				
Check “Yes” if item is present, “N/A” if it is not needed, and “No” if it is not included but needed.	Yes	No	N/A	*Page #
*Requesters including the checklist with their De Novo request should identify the page numbers where requested information is located. Use the comments section for an element if additional space is needed to identify the location of supporting information.				
<p>9. <b>Literature:</b> If literature is relied upon in the De Novo request to support the recommended classification, the De Novo request provides a discussion of how each article is applicable in supporting the De Novo request.</p> <p><b>Comments:</b></p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<p>10. <b>Benefit-Risk:</b> The De Novo request includes a description of the probable benefits to health from use of the device and any probable risks to health from such use.</p> <p>See the FDA guidance document entitled, “Factors to Consider When Making Benefit-Risk Determinations in Medical Device Premarket Approval and De Novo Classifications,” available at <a href="https://www.fda.gov/downloads/medicaldevices/deviceregulationandguidance/guidancedocuments/ucm517504.pdf">https://www.fda.gov/downloads/medicaldevices/deviceregulationandguidance/guidancedocuments/ucm517504.pdf</a>.</p> <p><b>Comments:</b></p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>D. Statements, Certifications, and Declarations of Conformity</b>				
<p>To the extent that the submission relies upon the following information to provide detailed information and reasons for the recommended classification, the De Novo request provides the following:</p> <p>1. If the De Novo request explicitly cites conformance to any performance standards or voluntary standards, documentation establishing conformance to those standards.</p> <p>Check “N/A” only if no standards are cited.</p> <p><b>Comments:</b></p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

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<b>Elements of a Complete De Novo Request</b>				
<b>Check “Yes” if item is present, “N/A” if it is not needed, and “No” if it is not included but needed.</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>*Page #</b>
<p><b>*Requesters including the checklist with their De Novo request should identify the page numbers where requested information is located. Use the comments section for an element if additional space is needed to identify the location of supporting information.</b></p> <p>2. For a De Novo request that includes clinical studies, financial disclosure information is provided.</p> <p>As required by 21 CFR part 54, the requester must either provide:</p> <ul style="list-style-type: none"> <li>• a signed and dated Certification Form (3454); or</li> <li>• a signed and dated Disclosure Form (3455).</li> </ul> <p>For additional information, see the FDA guidance document entitled, “Financial Disclosure by Clinical Investigators” available at <a href="https://www.fda.gov/downloads/RegulatoryInformation/Guidances/UCM341008.pdf">https://www.fda.gov/downloads/RegulatoryInformation/Guidances/UCM341008.pdf</a>.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
a. For a Certification Form (3454): Is the required list of all investigators and sub-investigators attached to the form?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
b. For a Certification Form (3454): If box (3) is checked, does the form include an attachment with the reason(s) why financial disclosure information could not be obtained?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
c. For a Disclosure Form (3455): Does the requester provide details of the financial arrangements and interests of the investigator(s) or sub-investigator(s), along with a description of any steps taken to minimize potential bias?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				



422 **Appendix B. Recommended Content Checklist for De Novo**  
 423 **Classification Requests**

424 The following information is not intended to serve as a comprehensive review.  
 425 If you choose to incorporate the recommended content into your De Novo request, FDA  
 426 recommends that you include this completed checklist as part of the De Novo request.

<b>Recommended Elements for a De Novo Request</b>				
<b>Check “Yes” if item is present, “N/A” if it is not needed, and “No” if it is not included but needed.</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>*Page #</b>
<p><b>*Requesters including the checklist with their De Novo request should identify the page numbers where requested information is located. Use the comments section for an element if additional space is needed to identify the location of supporting information.</b></p>				
<b>A. Administrative Information</b>				
1. All content used to support the De Novo request is written in English (including translations of test reports, literature articles, etc.).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
2. De Novo request identifies the device trade/proprietary name.  FDA recommends use of the CDRH Premarket Review De Novo request Cover Sheet form (Form 3514).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
3. The De Novo request identifies prior related submissions for the same device included in the current De Novo request (e.g., prior De Novo decline order, prior deleted or withdrawn 510(k) or De Novo request, Pre-Submission, IDE, PMA, etc.).  <b><u>OR</u></b>  The De Novo request states that there were no prior De Novo requests or related submissions for the subject device.  Prior related submissions (or no prior related submissions) for this device should be included in Section F of the CDRH Premarket Review De Novo request Cover Sheet form (Form 3514). This information may also be included in the Cover Letter (i.e., as a statement that there were no prior submissions for the device, or a listing of the number(s) of the prior submission(s)).  For any identified prior related submissions for this De Novo request, address the applicable questions below:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				

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<b>Recommended Elements for a De Novo Request</b>				
<b>Check “Yes” if item is present, “N/A” if it is not needed, and “No” if it is not included but needed.</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>*Page #</b>
<p><b>*Requesters including the checklist with their De Novo request should identify the page numbers where requested information is located. Use the comments section for an element if additional space is needed to identify the location of supporting information.</b></p>				
<p>a. 510(k) # _____ Have the data presented in the De Novo request taken into account any safety or effectiveness concerns previously communicated during the review of the prior 510(k)(s) or through 510(k) correspondence?</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
<p>b. PMA # _____ Have the data presented in the De Novo request taken into account any safety or effectiveness concerns previously communicated during the review of the prior PMA(s) or through PMA correspondence?</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
<p>c. De Novo # _____ Have the data presented in the De Novo request taken into account any safety or effectiveness concerns previously communicated during the review of the prior De Novo request(s) or through De Novo correspondence?</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
<p>d. IDE # _____ Have the data presented in the De Novo request taken into account any safety or effectiveness concerns previously communicated during the review of prior IDE(s) or through IDE correspondence?</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
<p>e. Pre-Submission request # _____ Are all FDA concerns or action items previously presented to the requester in the Pre-Submission feedback or meeting minutes addressed in the De Novo request?</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
<b>B. Device Description</b>				
<p>1. The FDA assigned reference number (e.g., 510(k) #) for any medical devices, such as accessories or components, which are labeled to be used with the subject device and are already legally marketed.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
<b>C. Alternative Practices and Procedures</b>				

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<b>Recommended Elements for a De Novo Request</b>				
<b>Check “Yes” if item is present, “N/A” if it is not needed, and “No” if it is not included but needed.</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>*Page #</b>
<p><b>*Requesters including the checklist with their De Novo request should identify the page numbers where requested information is located. Use the comments section for an element if additional space is needed to identify the location of supporting information.</b></p>				
<p>1. The De Novo request contains a description of existing alternative practices or procedures used in diagnosing, treating, preventing, curing, or mitigating the disease or condition for which the device is intended or which similarly affect the structure and function of the body.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
<b>D. Classification Summary</b>				
<p>1. The De Novo request includes a classification summary that explains why the subject device is eligible for De Novo classification, including:</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
<p>a. The searches used to establish that no legally marketed device of the same type exists.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
<p>b. Based on the searches, a list of the classification regulations, PMAs, 510(k)s, and/or product codes regarding devices that are potentially similar to the subject device.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
<p>c. A rationale explaining how the subject device is different from the devices covered by the classification regulations, PMAs, 510(k)s, and/or product codes identified in the searches.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
<b>E. Classification Information and Supporting Data</b>				
<p>1. The De Novo request includes a summary of the probable risks to health associated with use of the device and the proposed mitigation measures, including general controls and, if recommended to be a class II device, special controls, for each identified risk. For each mitigation measure that involves specific performance testing or labeling, the De Novo request provides a reference to the associated section or pages for the supporting information in the De Novo request.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
<p>2. The De Novo request includes an executive summary of how the contents of the De Novo request support the recommended class, identification of risks to health and mitigation measures, and proposed general controls or general and special controls. This summary includes all nonclinical and clinical studies provided in support of the De Novo request.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

*Contains Nonbinding Recommendations*

*Draft – Not for Implementation*

<b>Recommended Elements for a De Novo Request</b>				
<b>Check “Yes” if item is present, “N/A” if it is not needed, and “No” if it is not included but needed.</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>*Page #</b>
<p><b>*Requesters including the checklist with their De Novo request should identify the page numbers where requested information is located. Use the comments section for an element if additional space is needed to identify the location of supporting information.</b></p>				
<b>Comments:</b>				
<p>3. The De Novo request provides a summary and full study report* for each nonclinical study provided in the De Novo request.</p> <p>*Full study report includes objective of the test, description of test methods and procedures, study endpoint(s), pre-defined pass/fail criteria, results summary, and discussion of conclusions.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
<p>4. <b>In Vitro Diagnostic (IVD) Devices:</b> If the device is an IVD, the De Novo request provides the following studies as appropriate, including associated protocol descriptions, study results, and line data:</p> <ul style="list-style-type: none"> <li>• Precision/reproducibility.</li> <li>• Accuracy (includes as appropriate linearity, calibrator or assay traceability, calibrator and/or assay stability protocol and acceptance criteria, assay cut-off, method comparison or comparison to clinical outcome, matrix comparison, and clinical reference range or cutoff).</li> </ul>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
<p>5. <b>Animal:</b> The De Novo request provides a summary and full study report for each animal study provided, including:</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
<p>a. A study protocol which includes all elements as outlined in 21 CFR 58.120.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
<p>b. A final study report which includes all elements outlined in 21 CFR 58.185.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
<p>6. <b>Clinical:</b> The De Novo request provides a summary and full study report for each clinical study provided, including:</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
<p>a. A final version of the study protocol. (If performed under IDE, this should be the final FDA-approved version of the clinical study protocol, incorporating any Notices of Changes.)</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
<p>b. A description of the study population and relationship to the proposed indications for use for the device.</p>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

*Contains Nonbinding Recommendations*

*Draft – Not for Implementation*

<b>Recommended Elements for a De Novo Request</b>				
<b>Check “Yes” if item is present, “N/A” if it is not needed, and “No” if it is not included but needed.</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>*Page #</b>
<b>*Requesters including the checklist with their De Novo request should identify the page numbers where requested information is located. Use the comments section for an element if additional space is needed to identify the location of supporting information.</b>				
<b>Comments:</b>				
c. Safety data, including all adverse reactions and complications, deaths, patient discontinuations, patient complaints, device failures (including unexpected software events if applicable), and replacements.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
d. Report forms for patients who died or who did not complete the investigation.  Check “N/A” only if no patients died or were discontinued.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
e. Study results.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
f. The results of any statistical analyses performed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
<b>F. Labeling</b>				
1. The De Novo request includes labeling that describes the device, its intended use, and the directions for its use.  See 21 CFR parts 801 and 809, as applicable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
a. Physician labeling  May include indications for use; contraindications, warnings, and precautions; and instructions for use.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
b. Patient labeling, if necessary  See the FDA guidance document entitled, “Guidance on Medical Device Patient Labeling,” available at ( <a href="https://www.fda.gov/downloads/MedicalDevices/DeviceRegulationandGuidance/GuidanceDocuments/ucm070801.pdf">https://www.fda.gov/downloads/MedicalDevices/DeviceRegulationandGuidance/GuidanceDocuments/ucm070801.pdf</a> ).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				
c. Technical/operators manual	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				

*Contains Nonbinding Recommendations*

*Draft – Not for Implementation*

<b>Recommended Elements for a De Novo Request</b>				
<b>Check “Yes” if item is present, “N/A” if it is not needed, and “No” if it is not included but needed.</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>*Page #</b>
<b>*Requesters including the checklist with their De Novo request should identify the page numbers where requested information is located. Use the comments section for an element if additional space is needed to identify the location of supporting information.</b>				
<b>G. Statements, Certifications, and Declarations of Conformity</b>				
1. Documentation is provided to establish that the requester followed the recommendations in applicable cross-cutting FDA guidance or otherwise met applicable statutory or regulatory criteria.  Check “N/A” only if no guidance/guidelines are used.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Comments:</b>				

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