## **Medical Device Regulation**

Impact on in-house manufacturing of medical device software

Koen Cobbaert Expert Regulations, Standards and Quality Presented for Belgian Hospital Physicists Association 2020-02-07

#### EU Medical Device Regulations

### National Provisions



Medical Device Regulation Regulation (EU) 2017/745



In Vitro Diagnostic Medical Device Regulation (EU) 2017/746

| KONINKRIJK BELGIE   | ROYAUME DE BELGIQUE   |
|---|---|
| FEDERAAL AGENTSCHAP VOOR<br>GENEESMIDDELEN EN<br>GEZONDHEIDSPRODUCTEN   | AGENCE FEDERALE DES MEDICAMENTS I<br>DES PRODUITS DE SANTÉ  |
| VOORONTWERP VAN WET<br>BETREFFENDE MEDISCHE<br>HULPMIDDELEN   | AVANT-PROJET DE LOI RELATIVE AUX<br>DISPOSITIFS MÉDICAUX  |
| FILIP, KONING DER BELGEN,   | PHILIPPE ROI DES BELGES,  |
| Aan allen die nu zijn en hierna wezen zullen,   | A tous, présents et à venir,  |
| ONZE GROET.   | SALUT.  |
| Op de voordracht van Onze Minister van Sociale<br>Zaken en Volksgezondheid,   | Sur la proposition de Notre Ministre des Affaires<br>sociales et de la Santé publique,  |
| HEBBEN WIJ BESLOTEN EN BESLUITEN<br>WIJ:  | NOUS AVONS ARRETE ET ARRETONS :   |
| Onze Minister van Sociale Zaken en<br>Volkugezondheid is ermee belast het<br>voorontverp van wet, waarvan de tekst<br>volgt, in Onze naam aan de Wetgevende<br>Kamers voor te leggen en bij de Kamer van<br>volkuvertegenwoordigers in te dienen: | Notre Ministre des Affaires sociales et de la<br>Santé publique est chargée de présenter en notr<br>nom aux chambres législatives et de déposer à l<br>Chambre des représentants, l'avant-projet de lo<br>dont la teneur suit : |
| Hoofdstuk 1 - Toepassingsgebied, definities,<br>bevoegde autoriteit en administratieve<br>bepalingen  |   |

Related documents: Implementing and delegated acts, common specifications, device specific guidance

#### What software does the regulation affect?

#### Radiology

Computer aided detection for mammography

Tumor segmentation for diagnostic or treatment purposes

**Software intended for daily quality assurance** in mammography if it is intended to calibrate or specifically enable or directly assist diagnostic equipment (e.g. monitors, x-ray equipment...) to be used within safe and effective operating conditions.

#### Radiotherapy

...

Software that uses a patient's CT images to estimate proton Stopping Power Ratio (SPR), **predict dose distribution** and plan the patient's treatment with the aim to maximize the tumor control probability while minimizing the normal tissue complication probability.

**Modeling and treatment planning** software (e.g. 3D CT-based eye-modeling and treatment planning

#### **Nuclear medicine**

**Software** that processes data obtained from images to obtain other data (e.g. **converting count to activity**) for use in diagnostic or therapeutic care.

•••

...

#### Authorities issued civil and criminal penalties to people that do not comply

The nternational edition 🗸 Lifestyle More ~

isex Health&fitness Home&garden Women Family Travel Money

## Lumosity fined millions for making false claims about brain health benefits

The Federal Trade Commission also issued a general warning that it is on the lookout for companies cashing in on the popularity of healthrelated mobile apps



It seemed like a win-win for fans of the online "brain training" memory game Lumosity - as fun as Candy Crush (almost) but actually good for you: a mind gym to sharpen mental performance and, for older consumers, ward off senility.

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## Breast implants: PIP's Jean-Claude Mas gets jail sentence

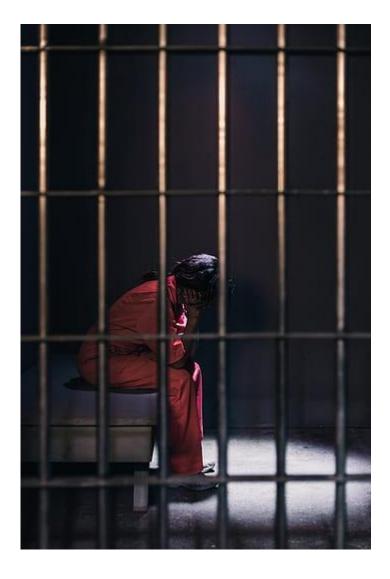
() 10 December 2013

🈏 🔗 🗹 < Share



The trial of Jean-Claude Mas, seen here arriving at court in Marseille, was one of the biggest trials in French legal history

#### Penalties are defined through national provisions and are of a often of a criminal nature



#### **Draft Belgian law**

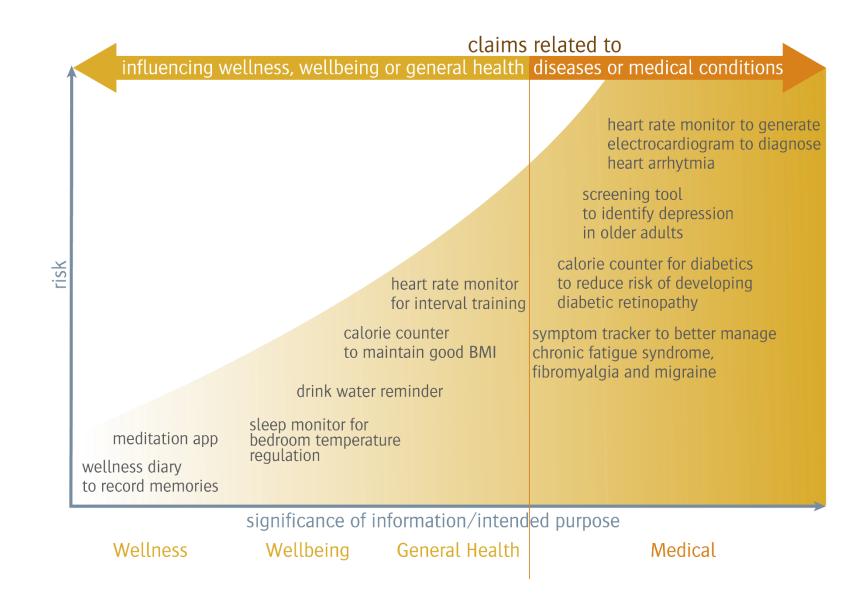
- Criminal fine 26-600€: non-compliance with EU MDR, not storing, making available to patient the implant card
- Criminal fine 200-50.000€ and/or imprisonment of 1 month to 1 year: not creating and communicating materiovigilance point-of-contact or (also applies to healthcare professionals): not reporting serious incidents to competent authority or using a medical device not in accordance to its instructions for use,
- Criminal fine 1.000-100.000€ and/or imprisonment of 1 to 3 year: failure to allow competent authority inspectors on your premises, in rooms or give access to documentation, purposely providing incomplete, false or incorrect information or pieces to competent authorities or obstruct authorities to perform their verification, failure to store UDI
- Criminal fine 2.000-200.000€ and/or imprisonment of 2-5 year: not complying with corrective actions imposed by competent authority

**The penalty increases one level in case of** fraud, a serious incident, criminal organization, repeating the breach in next 5 years or if offering devices/services through means of **mass deployment**, e.g. via computer systems or the internet.

## Is it, or is it not a medical device?

#### Independent of risk

Although there generally is some correlation, whether software is considered a medical device does <u>not</u> depend on whether it poses a risk or not, but on whether it meets the definition of a medical device.



#### Medical Device definition

**medical device** means any instrument, apparatus, appliance, software, implant, reagent, material or other article intended by the manufacturer to be used, alone or in combination, for human beings for one or more of the following specific medical purposes:

 diagnosis, prevention, monitoring, prediction, prognosis, treatment or alleviation of disease;

- diagnosis, monitoring, treatment, alleviation of, or compensation for, an injury or disability,

 investigation, replacement or modification of the anatomy or of a physiological or pathological process or state,

 providing information by means of in vitro examination of specimens derived from the human body, including organ, blood and tissue donations,

and which does not achieve its principal intended action by pharmacological, immunological or metabolic means, in or on the human body, but which may be assisted in its function by such means.

The following products shall also be deemed to be medical devices:

- Devices for the control or support of conception
- Products specifically intended for cleaning, disinfection or sterilization of medical devices, accessories of medical devices and products listed in Annex XVI

#### medical purposes

#### Diagnosis

**medical device** means any instrument, apparatus, appliance, software, implant, reagent, material or other article intended by the manufacturer to be used, alone or in combination, for human beings for one or more of the following specific medical purposes:

 diagnosis, prevention, monitoring, prediction, prognosis, treatment or alleviation of disease;

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**Diagnosis is the process of investigation** of the anatomy or morphology, the condition or the functions of the human body irrespective if these are physiological or pathological, **and subsequent interpretation** of this information **with a view to determining possible abnormalities**.

In this context investigation can include visualisation, detection or measurement.

### Excluded: electronic patient records, digital medical handbooks, ...

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a software program: a set of instructions that processes input data and creates output data

MDCG 2019-11 MDSW Guideline – Guidance on the Qualification and Classification of Software in MDR 2017/745 and IVDR 2017/746 (contains functional exemptions)

Can be programs, scripts, macros, firmware, cloud services...



### Qualification does not depend on technical complexity

**medical device** means any instrument, apparatus, appliance, software, implant, reagent, material or other article intended by the manufacturer to be used, alone or in combination, for human beings for one or more of the following specific medical purposes:

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Software may perform very basic calculations that could easily be repeated by the user on paper, but would still qualify as a medical device.

The qualification as a medical device generally\* only depends on whether the intended use meets the definition of a medical device.

\*See next slide for functional exemptions



#### Scripts that just parse data in a certain format are not medical devices

| 🜙 Ola Ihola   |  |   |                 | 2019/09/09 4:   | 13:59 HUS  | 6 Hospital 00.00.10.000 🛛 🗆 🗆     |      |
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| system administrat  | 📔 Save 🛛 🔛 Prepare 🦨 Sign 🛛 😣 Cance                | el  |                 |   |            |                                   |      |
| labor<br>ward   | View by problems interventions                     | yesterda  | y today         | tomorrow from   | 09/09/201  | 9 <b>v</b> until 09/09/2019       | € 🗸  |
|   | Problems   | Observations, resources,  | characteristics | Interventions   |            | Outcomes                          |      |
| <b>—</b>  | Type new problem $P$                               | Enter a new resource  | 9               | Type new intervention   | P          |                                   | 2    |
| patient search ward view  | The patient has limited mobility                   | R Patient actively helps r<br>R Patient actively offered        |                 | The patient bell is within reac<br>Provide assistance moving are              |            | Patient feels secure movir around | וץ   |
| worklist - medical  | D <sub>x</sub> Diarrhea                            | O Expressed fatigue   |                 | necessary   |            | Patient has no pain when          |      |
| <ul> <li>worklist - interventi</li> <li>appointment book</li> </ul> | Other interventions                                | <ul><li>O Pain after effort</li><li>C Short of breath</li></ul> |                 | Survey of pain using pain scal<br>per shift<br>Administration of analgesics a |            | moving around                     |      |
| open records  | 🏸 Asthmatic attack                                 |   |                 | accoring to doctor before mo  | bilization |                                   |      |
| Koen Cobbaert   | 🔆 Hypertension                                     |   |                 |   |            |                                   |      |
| Wilge De Backer   | Acute asthma attack                                |   |                 |   |            |                                   |      |
|   | $- D_x$ Health deficit 1                           |   |                 |   |            |                                   |      |
|   | <ul> <li>D<sub>x</sub> Health deficit 2</li> </ul> |   |                 |   |            |                                   |      |
| Medical Record  | D <sub>x</sub> Health deficit 3                    |   |                 |   |            |                                   |      |
| Graphical Overview<br>Nursing Care Proce                            | Some other plan                                    | Patient accepts offered h                                       | elp (Resource)  | ,   |            |                                   |      |
| Outcome Registrati  | <ul> <li>D<sub>x</sub> Health deficit 1</li> </ul> | Start   | 2019/09/09      |   |            |                                   |      |
| Alerts  | <ul> <li>D<sub>x</sub> Health deficit 2</li> </ul> | End   | / /             |   |            |                                   |      |
| Extra info _  | D <sub>x</sub> Health deficit 3                    | Extra info  |                 |   |            |                                   |      |
|   |  |   |                 |   |            |                                   |      |
|   |  |   |                 |   |            |                                   |      |
|   |  | Related diagnosis   | The patient has | s limited mobility, Health defici   | t 2        |                                   | •    |
|   |  | Documented by   |                 |   |            | ▼                                 |      |
|   |  | Documented on   | 2019/09/09, 3:  | 01:14   |            |                                   |      |
|   |  |   |                 |   |            |                                   |      |

#### **Functional Exemptions**

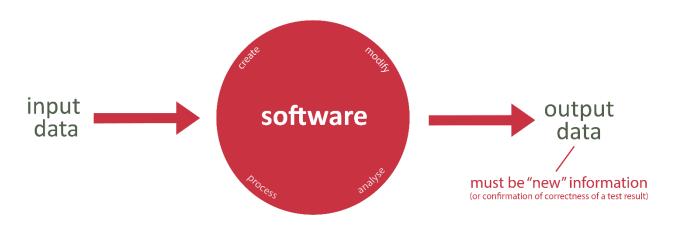
Even if the intended use of software is medical, if it only provides functionality to

- 1. communicate\*
- 2. store/archive
- 3. lossless compression\*\*
- 4. simple search\*\*\*

#### then it does not qualify as a medical device.

Source: MDSW Guideline – Guidance on the Qualification and Classification of Software in MDR 2017/745 and IVDR 2017/746 - Decision diagram 1, step 3

 \* communicate: transfer, data parsing, convert units (pound->kg), alter representation of information for embellishment or compatibility purposes
 \*\* lossless compression: compression procedure that allows the exact reconstruction of the original data
 \*\*\*simple search: retrieval of records by matching record metadata against record search criteria or retrieval of information



#### Software = a set of instructions that processes input data and creates output data

Source: MDSW Guideline – Guidance on the Qualification and Classification of Software in MDR 2017/745 and IVDR 2017/746



#### SIMPLE SEARCH

D2

D2 D2

retrieval of information or retrieval of records by matching record metadata against record search criteria

07

#### Beyond simple search

drug-drug interaction or allergy checks



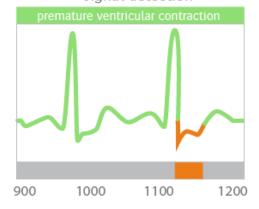
Fluoxetine + Phenelzine Warfarin + Diflunisal Penicillin + allergic patient

\*\*\*\*

The European Court issued a decision in the case C329/16 SNITEM & Philips France vs. the French State that the functionality involved in the drug-drug interaction checks is considered a medical device.

| Moomin S<br>Lighthouse 12<br>Moominvalley<br>Finland  | 456   | Hospital   | A  |  |  |  |  |  |
|---|---|--|--|--|--|--|--|--|
| laboratory report   |   |  |  |  |  |  |  |  |
| Name: Moominpappa Patient ID: PAC001<br>Date: 2018-02-01 08:22 Age: 48y 10m 26d<br>Doctor: Hammarsten Sex: Male<br>Test ID: B165AAF4    |   |  |  |  |  |  |  |  |
|   | COMPLETE  | BLOOD COUNT  |  |  |  |  |  |  |
| Test Name   | Result  | Normal Range   | Units  |  |  |  |  |  |
| Hemoglobin<br>RBC<br>HCT<br>MCV<br>MCH<br>RDW-CV<br>RDW-SD<br>WBC<br>NEU%<br>LVM%<br>MON%<br>EOS%<br>BAS%<br>LYM#<br>GRA#<br>PLT<br>ESR | 12<br>3.3<br>36<br>83<br>28<br>33<br>12<br>44<br>6.7<br>60<br>30<br>8<br>2<br>0<br>2<br>4.7<br>256<br>2 | $\begin{array}{c} 11.0 - 16.0\\ 3.5 - 5.50\\ 37.0 - 50.0\\ 82 - 95\\ 27 - 31\\ 32.0 - 36.0\\ 11.5 - 14.5\\ 35 - 56\\ 4.5 - 11\\ 40 - 70\\ 20 - 45\\ 2 - 10\\ 1 - 6\\ 0 - 2\\ 1.5 - 4.0\\ 2.0 - 7.5\\ 150 - 450\\ Up to 15\\ \end{array}$ | g/dL<br>10 <sup>^6</sup> /uL<br>%<br>fl<br>pg<br>g/dL<br>%<br>fl<br>10 <sup>^3</sup> /uL<br>10 <sup>^3</sup> /uL<br>10 <sup>^3</sup> /uL<br>10 <sup>^3</sup> /uL |  |  |  |  |  |
| Digitally signed by:<br>Dr. Toivo Hammersten<br>Moomin Public Key: E44311F4<br>Test id: B165AAF4  |   |  |  |  |  |  |  |  |

#### signal detection



### Population Health Software ≠ MD

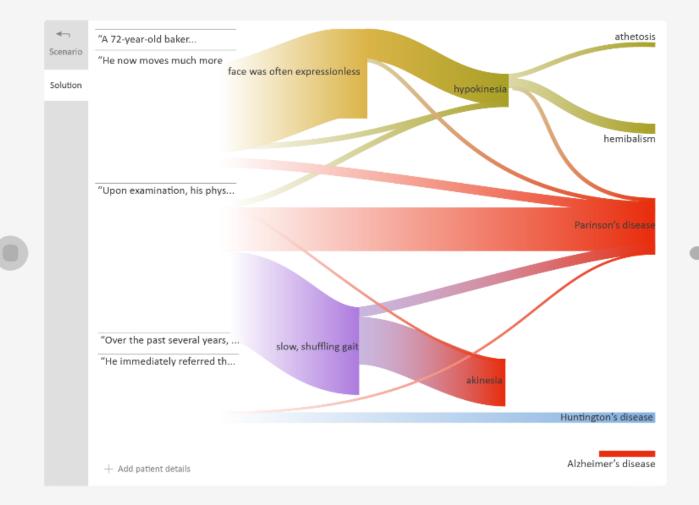


#### Clinical decision support = MD

Rules engines, semantic search engines, artificial intelligence or other algorithms that **combine information of an individual patient with scientific/medical guidelines, publications or other knowhow** to provide the user with

- information of options for treating, diagnosing, preventing or mitigating a disease or condition for that specific patient
- Information relevant to that specific patient by aggregating scientific/clinical information about e.g. disease, condition, drugs, medical devices, population, etc.
- Information to guides the user in next diagnostic or treatment interventions

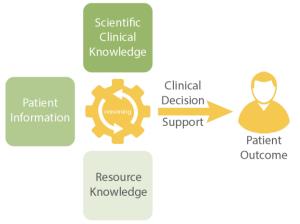


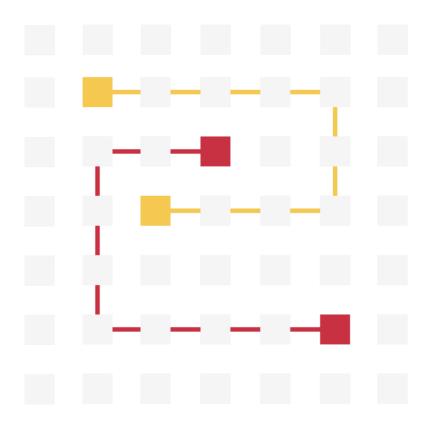


#### Resource management software and workflow engines

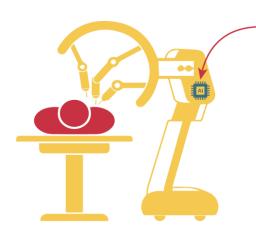
Resource management software intended for scheduling appointments and managing hospital resources efficiently are not medical devices.

Workflow engines that combine information of an individual patient with scientific/medical guidelines, publications or other knowhow to suggest the next step in the diagnostic or treatment pathway of the patient, or to triage patients, such software is considered decision support software and qualifies as a medical device.





## Software upgrades extending the original intended purpose



Requirements: Prove safety & performance Register it with authorities

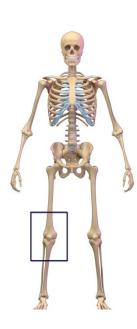
CE

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AI

Manufacturer places a device on the market.

**Health Institution** changes the device or upgrades a software so that it significantly changes performance, safety or intended purpose. This is also considered in-house manufacturing.



## Software accessories

Koen Cobbaert

#### Accessory



Accessory for a medical device means an article which, whilst not being itself a medical device, is intended by its manufacturer to be used together with one or several particular medical device(s) to **specifically enable** the medical device(s) to be used in accordance with its/their intended purpose(s) or to **specifically and directly assist** the medical functionality of the medical device(s) in terms of its/their intended purpose(s);

Source: MDR Article 2 definitions



A developer specifically enables the x-ray film to fulfill its intended purpose.

- Medical device: x-ray film
- Accessory: developer



A cushion containing ribs with 3 different dimensions. The cushion enables patients of different height to comfortably lift their legs so that their spine is straightened and the intervertebral disks become clearly visible on the scan, a condition for the scanner to accurately detect the edge of the lumbar vertebrae and measure accurately and precisely.

- Medical device: bone densitometer scanner
- Accessory: positioning cushion

#### Calibration of diagnostic monitors or other medical devices: accessories



**Software intended for daily quality assurance** in mammography if it is intended to calibrate or specifically enable or directly assist diagnostic equipment (e.g. monitors, x-ray equipment...) to be used within safe and effective operating conditions.

## Conditions and Requirements for in-house manufacturers EU MDR/IVDR Article 5(5)

### In-house manufacturing: conditions



1. No equivalent device on market to meet specific needs of target patient population, or not at an appropriate level of performance (document justification)

Easy to justify for software. There is always a software feature the commercial solutions don't have.

2. Device is not manufactured on an industrial scale

Even though it can be distributed on an industrial scale, software is only manufacturered once (i.e. compiled). This requirement refers to "manufacturing", not distributing. So, this should never be an issue.

3. Don't transfer device to other legal entity

Don't sell it or give it away to other hospitals or doctors.

When the software is made by an IT department that is another legal entity of the hospital, consider a sub-contracting relationship ...see next slide

#### **Additional Belgian limitation:**

In-house manufacturing of devices using **ionizing radiation and implants** is not allowed. This list can be expanded.

#### Subcontractor control & quality agreements



You remain responsible as in-house manufacturer. The subcontractor works under your responsibility.

It is essential that you control the subcontractor's influence on the conformity of your device, for example by **auditing** or asking a **quality system that complies with ISO 13485** or **participate in their design review meetings**, or all of the above.

Script a meaningful **supplier quality agreement** that clearly delineates

- Their **role** as subcontractor and your role as in-house manufacturer
- That they are **not to place the device on the market**, not for money, but also not for free
- What deliverables/documentation is needed, what is expected in terms of processes, identification of incidents, nonconforming product disposition, CAPA responsibilities, frequency of audits, IP ownership, design changes, process changes, material changes, ...

#### Requirement 1: Cooperate with authorities

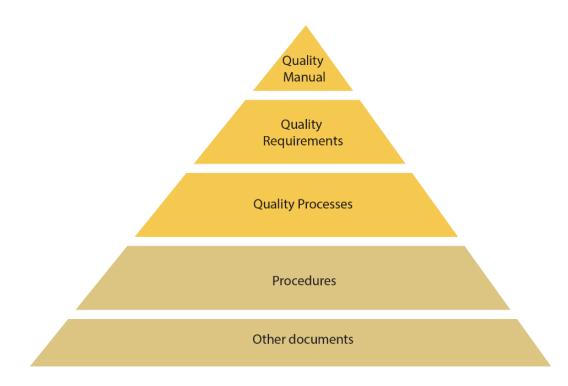


Register with FAGG and indicate the type of device you manufacture

Report serious injuries (applicable to all health institutions and healthcare professionals, if applicable: use materiovigilance point)

Be transparent and cooperative when receiving requests for information. Give full access during inspections.

## Requirement 2: Manufacture and use occurs under quality management system



A mature quality system self-identifies and corrects problems, assures a state of control and has a focus on prevention rather than correction, e.g. by monitoring regulatory changes across the world and proactively working towards compliance.

The **ISO 13485** standard is an effective solution to meet the comprehensive requirements for a quality management system for the manufacturing of medical devices. It provides a practical foundation for manufacturers to address the regulations and responsibilities as well as demonstrating a commitment to the safety and quality of medical devices.

ISO 13485 will likely be required in certain countries, but there are no indications that this is the case in Belgium.

## Requirement 3: Draft declaration of conformity Make it publicly available

| Declaration of Conformity  |
|--|
| Smart Sales Man Corp<br>SRN 7775001<br>Far W Street 3, Punta Gorda, Belize   |
| EU Authorized Representative: Marca SA<br>Address: Calle del Sol 1, 28000 Madrid, Spain  |
| Declares that the medical device:  |
| Name: My Medical App<br>Alternative trade name: MyMedApp<br>Basic UDI: 05414704218525<br>Category: ECG signal processing software<br>Application: neurology  |
| complies with:<br>- ISO 13485:2016 Medical devices – Quality management systems – Requirements for regulatory purposes<br>- EN ISO 14971:2012 Application of risk management to medical devices<br>- IEC 63204-2006 Medical devices oftware - software lifecycle processes<br>- IEC 63206-1:2015 Medical devices - Part 1: Application of usability engineering to medical devices<br>- IEC 63204-1:2016 Health Software – Part 1: General Requirements for product safety<br>- ISO 15223-1:2016 Symbols for medical device labels, labelling and information to be supplied |
| and with the requirements of Medical Device Regulation (EU) 2017/745<br>and that for this class IIb device the procedures of Annex IX have been<br>applied in order to mark the device with the CE-label.  |
| The notified body involved in the above specified procedure is<br>Intertek Semko AB holding the registration number 0413.  |
| This declaration is valid for 5 years after the signature date.  |
| Luiza Pérefras Barro,<br>Director Quality Assurance and Regulatory Affairs<br>Smart Sales Man Corp   |
| KC20180601 2018-06-01  |

The Declaration of Conformity (DoC) is a legally binding document that declares you are in compliance with the applicable legislation necessary to manufacturer and use your product in-house. Specifically, it states that your device conforms with the General Safety and Performance Requirements of the MDR or IVDR.

FAGG has the possibility to define what information such DoC must contain (no specs published today).

On the left is what normal manufacturers use, i.e. not all elements you see in this example apply to in-house manufactuers . There is no mandatory format.

#### Requirement 4: Draw up technical documentation

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| 1( | D    | P | OST-MARKET SURVEILLANCE                                    |
| 1  | 1    | S | UPPORTING DOCUMENTS  |
| 12 | 2    | R | EVISION RECORD   |

Draws up documentation that makes it possible to have an understanding of the manufacturing facility, the manufacturing process, the design and performance data of the devices, including the intended purpose, and that is sufficiently detailed to enable the competent authority to ascertain that the general safety and performance requirements set out in Annex I to the Regulation are met;

There is no prescribed format. The table of content shown on the left is just one possible example.

## Requirement 5: Ensure device is manufactured in accordance to documentation

i.e. apply design controlled processes

### General Safety and Performance Requirements

- 1. Performance, safety, effectiveness
- 2. Reduce risks as far as possible
- 3. Risk management system
- 4. Risk control measures
- 5. Use error
- 6. Lifetime of the device
- 7. Transport and Storage
- 8. Known and foreseeable risks, side effects, benefit-risk
- 9. Devices listed in Annex XV
- 10. Chemical, physical and biological properties
- 11. Infection and microbial contamination
- 12. Devices incorporating a substance considered to be a medicinal product
- 13. Devices incorporating materials of biological origin
- 14. Construction of devices and interaction with their environment

- 15. Devices with a diagnostic or measuring function
- 16. Protection against radiation
- 17. Electronic programmable systems
- 18. Active devices and devices connected to them
- 19. Particular requirements for active implantable devices
- 20. Protection against mechanical and thermal risks
- 21. Protection against the risks posed to the patient or user by supplied energy or substances
- 22. Protection against the risks posed by medical devices intended by the manufacturer for use by lay persons
- 23. Label and instructions for use

#### General Safety and Performance Requirements - Checklist

|    | Harmonized<br>Standards prove   |          | GSPR prove S  | Common<br>pecification | s   |
|----|---|----------|---|------------------------|---|
| #  | Description   | A<br>N/A | Common specification, standard, sub clause or ref.  | Complies<br>Yes/No     | Reference Justification   |
| Ch | apter I – General Requirements  |          |   |                        |   |
| 1  | Devices shall achieve the performance intended by their<br>manufacturer and shall be designed and manufactured in such a<br>way that, during normal conditions of use, they are suitable for<br>their intended purpose. They shall be safe and effective and shall<br>not compromise the clinical condition or the safety of patients, or<br>the safety and health of users or, where applicable, other persons,<br>provided that any risks which may be associated with their use<br>constitute acceptable risks when weighed against the benefits to<br>the patient and are compatible with a high level of protection of<br>health and safety, taking into account the generally acknowledged<br>state of the art. | A        | IEC 82304 (see table ZZ.1)<br>ISO 14971-1 (see table ZZ.1)<br>EN ISO 60601-1-6 (see table ZZ.1) | Yes<br>Yes<br>Yes      | Risk management report ( <u>54543654</u> )<br>Clinical evaluation report ( <u>54534243</u> )<br>Verification & Validation report ( <u>5246866</u> )<br>Summary of safety and clinical performance<br>( <u>5545467</u> ) |
| 2  | The requirement in this Annex to reduce risks as far as possible means the  | A        | ISO 14971-1 (see table ZZ.1)  | Yes                    | Risk management report ( <u>54543654</u> )  |

# Requirement 6: Review clinical experience from use of device and take all necessary corrective actions



The incident definition does not require that somebody was actually seriously injured, it is sufficient that a serious injury could have happened or can happen if the event occurs again. FAGG can determine content of what you must submit.

#### **Examples of incidents that could be reportable**

- An alarm failed to sound.
- Dosages were too fast, too slow or were stopped inconsistent with the data on the display unit.
- Display unit values were inconsistent with other visual outputs of the device, for example, name of patient on screen not correct.
- The system simply stopped.
- The device performed in a manner completely unplanned, when several conditions occurred simultaneously.
- Data were lost or corrupted.
- A calculation or other function was missing, or an instruction was omitted from the user manual.

Justify based on specific needs target population why there is no equivalent device on the market.

Plan risk management and clinical evaluation (identify state of the art, explore what would be considered sufficient clinical data).

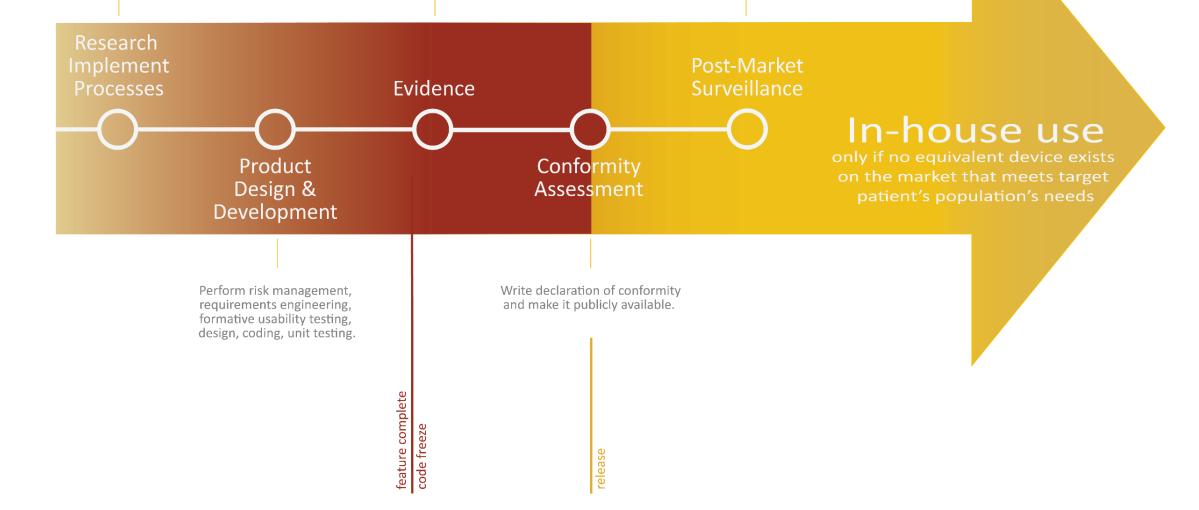
Implement quality management system with product design processes.

Perform technical & clinical testing, summative and usability testing. Review labels and manuals. Demonstrate compliance with general safety and performance requirements.

> Compile technical file, clinical evaluation report, risk management file and design history file.

Review experience gained from clinical use of the devices and take all necessary corrective actions.

Cooperate with authorities. On request provide them information and allow them to inspect your site.



#### Timeline

| May 2020 |    |    |    |    |    |    |  |  |  |  |
|----------|----|----|----|----|----|----|--|--|--|--|
| S        | М  | Т  | w  | Т  | F  | S  |  |  |  |  |
|          |    |    |    |    | 1  | 2  |  |  |  |  |
| 3        | 4  | 5  | 6  | 7  | 8  | 9  |  |  |  |  |
| 10       | 11 | 12 | 13 | 14 | 15 | 16 |  |  |  |  |
| 17       | 18 | 19 | 20 | 21 | 22 | 23 |  |  |  |  |
| 24       | 25 | 26 | 27 | 28 | 29 | 30 |  |  |  |  |
| 31       |    |    |    |    |    |    |  |  |  |  |

Tuesday, May 26th 2020

As of May 26, 2020 all-in-house manufactured devices that are put into service, must comply.

Devices that were put into service prior to May 26, 2020 must not comply.

Updates or upgrades to devices put into service prior to May 26, 2020, must comply.

#### Want to know more?

MDCG 2019-XX – Guidance on Qualification and Classification of Software in Regulation (EU) 2017/745 – 'MDR' and Regulation (EU) 2017/746 – 'IVDR' MDCG 2019-11 MDSW Guideline – Guidance on the Qualification and Classification of Software in MDR 2017/745 and IVDR 2017/746 Adopted Oct 2019

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Borderline manual on qualification and classification for MDR 2017/745 and IVDR 2017/746 Adoption date not determined yet



https://management-forum.co.uk/product/details/2149/medical-devicesoftware-complying-with-the-mdr-fda-regulations



http://www.mdti-global.co.uk/event/medicaldevicesoftware

Koen Cobbaert

