

**Labeling of reagents (IVD, ASR, RUO, CE, FDA) and what are the consequences for you as a laboratory and for the patients**

Meeting May 18, 2011

**Danish Medical Devices Certification (DGM)**

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## Agenda

1. Who is DGM
2. The IVD Directive
  - IVD devices (and non IVD devices)
  - Essential Requirement (Annex I)
  - How to marketed a IVD device?
    - Annex II list A and B
    - (Self testing)
    - All other
3. Routes to the CE mark
4. Performance and other requirements
5. Benefits from using IVD devices



## DGM

- Established in 1993 by Danish Standards, Demko A/S, Rigshospitalet, Danish Medicines Agency, Statens Serum Institut og Dansk Teknologisk Institut
- Notified in 1995 by Ministry of Health for approval of medical devices and certification according to MD Directive
- Notified in 2001 by Ministry of Health for approval and certification according to the IVD Directive
- January 2007: DS Certification was formed (owned by DS)
- DGM has approximately 10 employees



## 98/79/EF In-vitro Diagnostic Directive

### Definition

**In vitro diagnostic medical devices' means any medical device which in a separate, sealed packet, container, analytical reagent, kit, instrument, apparatus, equipment, or system, whether used alone or in combination, intended by the manufacturer to be used in vitro for the examination of specimens, including blood and tissue donations, derived from the human body, solely or primarily for the purpose of providing information:**

- concerning a physiological or pathological state, or
- concerning a congenital abnormality, or
- to determine the safety and compatibility with potential recipients, or
- to assess the therapeutic response.

**This means that e.g. alcohol tests used by the police are not IVD  
This also means that Research Use Only (RUO) products and Analyte Specific Reagent (ASR) are not IVD devices**



## Annex I, Essential Requirements

§ A1-6 General requirements incl. **risk management**, manufacturing, **characteristics and performance**, **traceability**, **life**, transportation and storage

§ B1 Chemical and physical properties (and risks)

§ B2 Infection and microbial contamination

§ B 3 Properties on the manufacture and environments (combinations, risks, environment, **waste**, measuring scales and ergonomics)

§ B4 Devices which are instruments or devices with **measuring function**

§ B5 Radiation Protection

§ B6 Requirements for equipment which is connected as an energy source or equipped with such

§ B8 **Manufacturer information**



## Annex I, Essential Requirements

### § B7 Requirements for devices for self testing

- **Performance**
- **Easy to use**
- **The risk of user error is eliminated**
- **Instructions For Use**

**The requirements are the same for all CE marked IVD devices**



### 98/79/EF In-vitro Diagnostic Directive

**How to obtain the CE mark?**  
**First "classification":**  
**Devices included on Annex II:**  
**List A:**  
 Blood type quantification ASD-systems, disease (G, a, D, E, a) and Kist  
 Markers for HIV infection (HIV 1 and HIV 2), HTLV I and II and  
 Hepatitis B, C and D  
**List B:**  
 Blood types anti Duffy and anti Kidd  
 A number of markers e.g. for rubella chlamydia, Prostate  
 Specific Antigen (PSA), cytomegalovirus (CMV)  
 Devices for self testing of glucose  
**All other devices**  
 e.g. pH and Blood gases, Electrolytes, WBC, HbA2, EGFR,  
 ERPR and many many more

### Annex II, List A (e.g. blood type, HIV, hepatitis)

**Annex V – EC type examination**  
 • Approval of design  
 • Essential requirements  
 • Test reports  
 • Performance data incl. stability  
 • Risk analysis  
 • PMS  
 • Labeling

**Annex VII**  
 Ensuring Quality of production  
 • EN 13485 for the manufacturing process  
 • Organizational Structure  
 • Systematic quality control  
 • Methods of ensuring that the system can provide  
 Market Surveillance  
 Incident Reporting  
 Usability

**Annex IV**  
 Full quality assurance  
 • EN 13485 for the development and manufacturing process  
 • Documentation of the essential requirements  
 • Layman Trials Test Reports  
 • Performance data incl. stability  
 • Risk  
 • Labeling  
 • Changes approved by the NB  
 • Systematic quality control  
 • Methods of ensuring that the system can provide  
 Market Surveillance  
 Incident Reporting  
 Usability

**Annex III**  
 Full quality assurance  
 EN 13485 for the development and manufacturing process  
 Documentation of the essential requirements  
 Layman Trials Test Reports  
 Performance data incl. stability  
 Risk Analysis  
 Labeling  
 Changes approved by the NB  
 Systematic quality control  
 Methods of ensuring that the system can provide  
 Market Surveillance  
 Incident Reporting  
 Usability

**Batch verification**

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### Annex II, List B (and devices for self testing)

**Annex V**  
 Design Examination NB  
 • Approval of design  
 • Documentation of the essential requirements  
 • Layman Trials Test Reports  
 • Performance data incl. stability  
 • Risk Analysis, Market Monitor  
 • Labeling

**Annex VII**  
 Ensuring Quality of production  
 • EN 13485 for the manufacturing process  
 • Organizational Structure  
 • Systematic quality control  
 • Methods of ensuring that the system can provide  
 Market Surveillance  
 Incident Reporting  
 Usability

**Annex IV**  
 Full quality assurance  
 • EN 13485 for the development and manufacturing process  
 • Documentation of the essential requirements  
 • Layman Trials Test Reports  
 • Performance data incl. stability  
 • Risk  
 • Labeling  
 • Changes approved by the NB  
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### 98/79/EF In-vitro Diagnostic Directive

All devices except devices for self-testing and Annex II devices

**Annex III**  
 EC Declaration of Conformity (sections 2 & 3)  
 Technical documentation  
 Documentation for the quality assurance system, design info, essential requirements (ER), performance data of the device risk analysis.

**Annex III**  
 EC Declaration of Conformity (sections 4 & 5)  
 Implementation of a quality assurance system relevant for the products manufactured

The system shall address:  
 • Structure of the organization  
 • Systematic quality control  
 • Methods to control the performance of the QS  
 • PMS  
 • Vigilance

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### 98/79/EF In-vitro Diagnostic Directive

Class	IVD Directive	Standards	FDA	Canada
List A	NB: ER, QS, Batch release	ISO 13485 CTS	510(k) CLIA GMP	13485 CMDCAS HC review
List B	NB: ER, QS	ISO 13485 CTS	510(k) CLIA GMP	13485 CMDCAS HC review
All others devices	ER	CLSI	510(k) CLIA GMP	13485 CMDCAS HC review

**Devices must be safe and effective**

### 98/79/EF In-vitro Diagnostic Directive

**Research Use Only (RUO) products**  
**MEDDEV 2.14/2 rev. 1, February 2004, IVD Guidance:**  
**Research Use Only products (and potential mis-use by diagnostic laboratories).**  
**For Research use only' products do not have an intended medical use**

**Consequently, when a medical purpose has been established based on sufficient and broadly agreed upon scientific, diagnostic and clinical evidence, the product must comply with the requirements of the Directive before the manufacturer can place it on the market with an intended IVD use.**

**Analyte Specific Reagent (ASR)**  
 ASRs are commercially marketed products that function as building blocks for in vitro diagnostics (IVD) tests, just as active pharmaceutical ingredients are the building blocks of finished drugs and therapeutic biologics.  
 ASRs are used as components of laboratory-developed tests and must meet the specified criteria stated in 21 CFR 802.30

### 98/79/EF In-vitro Diagnostic Directive

*So what are the benefits of using CE marked IVD devices?*

All devices must meet the Essential Requirements layout in Annex I of the Directive, which means it must be safe and effective.

**Safe:** Free from risk of: contamination, electrical shock, head bumps ...

**Effective:** Acknowledge performance traceable to recognized standards (NIST), documented stability, interferences documented, availability of QC systems

**Conclusion:** Only use CE marked products



13

### 98/79/EF In-vitro Diagnostic Directive

**Common Technical Specifications (2009/108/EC) - CTS Apply from 1 December 2009 (List A and List B)**

Examples:

**List A: Anti-HIV-1/2 (screening):**

**Samples: Sensitivity: 400 HIV-1 and 100 HIV-2**

**Samples: Specificity: > 5000**

**List B: Blood Typing**

**For product launch: 3000 samples**

*The CTS includes extensive requirements for these tests*



14

### 98/79/EF In-vitro Diagnostic Directive

*So what are the requirements for all the other tests?*

•Needs to be registered at the local Medicines Agency e.g. "Danish Medicines Agency"

•Must comply with the Essential Requirements – Annex I



15

The Essential Requirements are considered met when using harmonized documents compliance. Below a few parameter specific standards:



H20-A2 (01/18/2007)  
Reference Leukocyte (WBC) Differential Count (Proportional) and Evaluation of Instrumental Methods; Approved Standard - Second Edition

C30-A2 (08/01/2002)  
Point-of-Care Blood Glucose Testing in Acute and Chronic Care Facilities; Approved Guideline - Second Edition

C46-A2 (02/24/2009)  
Blood Gas and pH Analysis and Related Measurements; Approved Guideline - Second Edition

EP07-A2  
Interference Testing in Clinical Chemistry; Approved Guideline - Second Edition



16

# Thank you for your attention

## Questions?

For further information about DS Certificering A/S / DGM please refer to [www.dscert.dk](http://www.dscert.dk)

