

Department of Health and Human Services  
 Food and Drug Administration  
**STANDARDS DATA REPORT FOR 510(k)s**  
*(To be filled in by applicant)*

This report is to be completed by the applicant when submitting a 510(k) that references a national or international standard. A separate report is required for each standard referenced in the 510(k).

TYPE OF 510(K) SUBMISSION

Traditional       Special       Abbreviated

STANDARD TITLE <sup>1</sup>

**Please answer the following questions**

Yes    No

Is this standard recognized by FDA <sup>2</sup>? .....    

FDA Recognition number <sup>3</sup> ..... # \_\_\_\_\_

PROOF

Was a third party laboratory responsible for testing conformity of the device to this standard identified in the 510(k)? .....    

Is a summary report <sup>4</sup> describing the extent of conformance of the standard used included in the 510(k)? .....    

Does the test data for this device demonstrate conformity to the requirements of this standard as it pertains to this device? .....    

Were there any deviations or adaptations made in the use of the standard? .....    

If yes, were deviations in accordance with the FDA supplemental information sheet (SIS) <sup>5</sup>? .....    

Were deviations or adaptations made beyond what is specified in the FDA SIS? .....    

If yes, complete a summary report table.

Were there any exclusions from the standard? .....    

If yes, complete a summary report table.

Was a FDA guidance <sup>6</sup> document used in the preparation of this 510(k)? .....    

Guidance Title: \_\_\_\_\_

<p><sup>1</sup> The formatting convention for the title is: [SDO] [numeric identifier] [title of standard] [date of publication]</p> <p><sup>2</sup> Authority [21 U.S.C. 360d], <a href="http://www.fda.gov/cdrh/stdsprog.html">www.fda.gov/cdrh/stdsprog.html</a></p> <p><sup>3</sup> <a href="http://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfStandards/search.cfm">http://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfStandards/search.cfm</a></p> <p><sup>4</sup> The summary report should include: any adaptations used to adapt to the device under review (for example, alternative test methods); deviations from the standard; requirements not applicable to the device; and the name and address of the test</p>	<p>laboratory or certification body involved in conformance assessment to this standard. The summary report includes information on all standards utilized during the development of the device.</p> <p><sup>5</sup> The supplemental information sheet (SIS) is additional information which is necessary before FDA recognizes the standard. Found at <a href="http://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfStandards/search.cfm">http://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfStandards/search.cfm</a></p> <p><sup>6</sup> The online search of CDRH Guidance Documents can be found at <a href="http://www.fda.gov/cdrh/guidance.html">www.fda.gov/cdrh/guidance.html</a></p>
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**EXTENT OF STANDARD CONFORMANCE  
SUMMARY REPORT TABLE**

STANDARD TITLE

**CONFORMANCE WITH STANDARD SECTIONS\***

SECTION NUMBER	SECTION TITLE	CONFORMANCE? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
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TYPE OF DEVIATION †

DESCRIPTION

JUSTIFICATION

SECTION NUMBER	SECTION TITLE	CONFORMANCE? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
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TYPE OF DEVIATION †

DESCRIPTION

**PROOF**

JUSTIFICATION

SECTION NUMBER	SECTION TITLE	CONFORMANCE? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
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TYPE OF DEVIATION †

DESCRIPTION

JUSTIFICATION

\* For completeness list all sections of the standard and indicate whether conformance is met. Explanation of all deviations is required under "type of deviation", "description" and "justification" on the report. More than one page may be necessary.

† Types of deviations can include an exclusion of a section in the standard, a deviation brought out by the FDA supplemental information sheet (SIS), or an adaptation in the section.

**Paperwork Reduction Act Statement**

Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to:

Center for Devices and Radiological Health  
1350 Piccard Drive  
Rockville, MD 20850

*An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.*