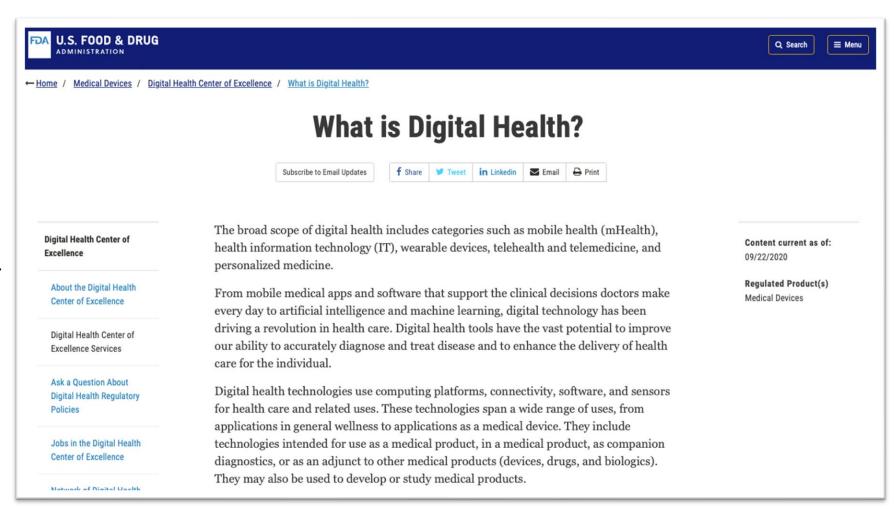
# Overview of FDA Regulation of Medical Devices & Digital Health

M. Jason Brooke, MSE, JD, CSQE Shelby Buettner, JD, MPA November 9, 2021

### Agenda

- FDA Legal and Regulatory Framework for Medical Devices
- New Paradigm for Software as a Medical Device
- Is the Software an FDA-Regulated Medical Device?



### FDA Legal & Regulatory Framework for Medical Devices

- Statute
  - Federal Food, Drug, and Cosmetic Act
- Regulations
  - Title 21 of the Code of Federal Regulations (CFR)
- Guidance Documents
  - Nonbinding recommendations
  - "Good Guidance Practices" (21 CFR 10.115)
- Other Resources
  - Databases
  - Programs and Pilots
  - Action plans
  - Proposed regulatory framework documents
  - Discussion papers and requests for feedback
  - Guiding principles documents
  - Reports
  - Safety communications



### FDA Legal & Regulatory Framework for Medical Devices

#### Class III

Pacemaker/Defibrillator, Neurostimulators, Artificial Pancreas, Novel Computer-Aided Diagnostic/Therapy\*

#### Class II

Cardiac Monitors, Peripheral Nerve Stimulators, Glucose Meters, Imaging Diagnostic Software, CGM Displays, DTx for ADHD

Mechanical Wheelchair, Surgical Staples (External), Orthotics, Liquid Bandages, Digital Otoscopes, Weight Scales, Blood Lancets

#### **Enforcement Discretion**

MDDS (Hardware), General Wellness Products\*, Self-Management Apps, Medication Reminders

#### Unregulated

Electronic health records, MDDS (Software), Exercise/Diet Logs

#### Section 201(h) defines "device"

*Generally* - any product, component, or accessory, that is:

- 1) Intended by its manufacturer
  - a) for use in the diagnosis, cure, mitigation, treatment, or prevention of a disease or medical condition; or
  - b) to affect the structure or any function of the body; and
- 2) Does not achieve its primary intended purposes through chemical action

Section 520(o) excludes software from the definition of device that:

- 1) Is intended for administrative support of a healthcare facility (e.g., processing and maintenance of claims or billing information, appointment schedules, health benefit eligibility, and laboratory workflow)
- 2) Is intended for maintaining or encouraging a healthy lifestyle and is unrelated to the diagnosis, cure, mitigation, prevention, or treatment of a disease or condition
- 3) Is intended to serve as an electronic patient record
- 4) Is a medical device data system...

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**CONTINUED** - Section 520(o) excludes software from the definition of device that:

- 5) a) Is not intended to acquire, process, or analyze a medical image or device signal or pattern;
  - b) Is intended for displaying, analyzing, or printing medical information:
  - c) Is intended for supporting or providing recommendations to a HCP about prevention, diagnosis, or treatment; and
  - d) Is intended to enable HCP to independently review the basis for recommendations and, hence, is not intended for HCP to primarily rely on the recommendations.

### **Quality System Overview**

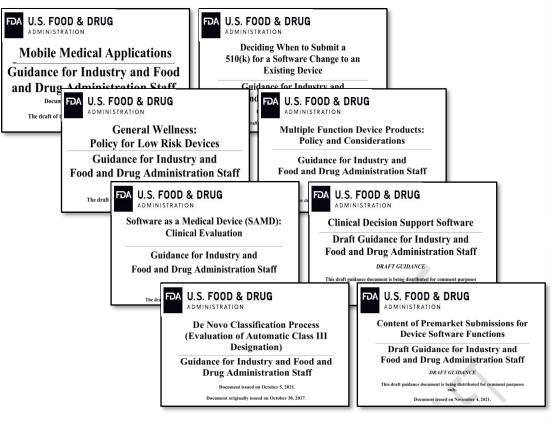
- Medical devices (including SaMD) must be developed within a Quality System that governs all activities of product development, post-market surveillance, and corporate governance related to product quality
- An organizational structure must be established and qualified personnel must be in place to support development and maintenance of the Quality System

21 CFR Part	Title	
1	General Enforcement	
7	General Recall Enforcement	
11	Electronic Records & Signatures	
50	Protection of Human Subjects	
801	Labeling	
803	Medical Device Reporting	
806	Reports of Corrections and Removals	
807	Registration & Listing	
810	Medical Device Recall Authority	
812	Investigational Device Exemptions	
820	<b>Quality System Regulation</b>	
830	Unique Device Identification	

#### Part 820 applies to almost all medical device manufacturers

- Any person who designs, manufacturers, fabricates, assembles, or processes a finished device (including spec developers)
- Exemptions for some Class I devices and IDE devices

Beginning in ~2010, the FDA embarked on a deregulatory journey in regards to digital health technologies







Shifting to a Total Product Lifecycle Approach



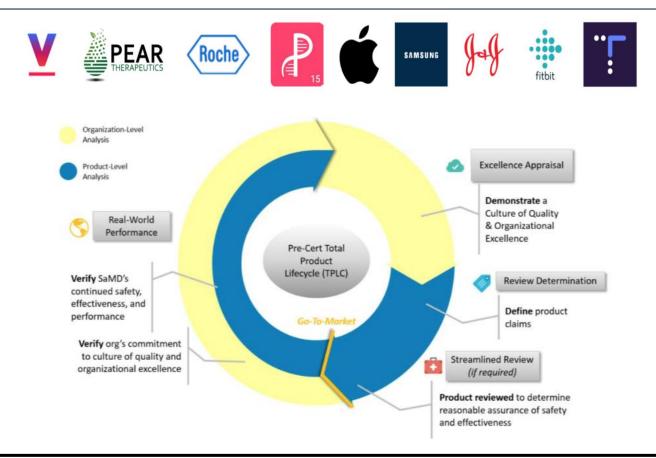
Reimagining digital health product oversight

- "FDA intends to develop a precertification program that could replace the need for a premarket submission for certain products and allow for decreased submission content and/or faster review of the marketing submission for other products."
- "[C]ollect real-world data postmarket that might be used . . . to affirm the regulatory status of the product, as well as to support new and evolving product functions."
- "[C]onsidering the role of third party certification in facilitating FDA determinations about precertification."



"FDA's traditional approach for the regulation of hardware-based medical devices is <u>not well-suited</u> for the faster, iterative design and development, and type of validation used for software device functions, including SaMD."

"An agile regulatory paradigm is necessary to accommodate the faster rate of development and potential for innovation in software-based products."



"In today's world of hardware-based medical devices, products are developed in months and years, but digital health products iterate more rapidly and frequently. These **iterations are often critical to manufacturers assuring that their products remain safe and effective**, and can protect the public from safety threats posed by their products."



**Developing a Software Precertification Program:** A Working Model

v1.0 - January 2019



 Demonstrate a culture of quality and organizational excellence through an Excellence Appraisal.



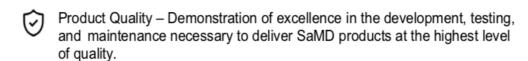
 Determine the <u>SaMD's</u> required review through <u>Review</u> <u>Determination</u>

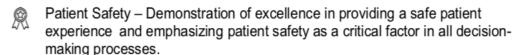


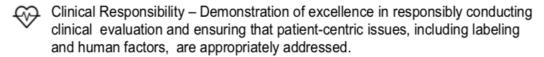
3. Conduct a Streamlined Review

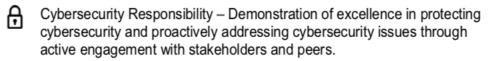


 Verify a <u>SaMD's</u> continued safety, effectiveness and performance and the organization's commitment to culture of quality through post-market <u>Real-World</u> <u>Performance</u>.









Proactive Culture – Demonstration of excellence in a proactive approach to surveillance, assessment of user needs, and continuous learning.



Developing a Software Precertification Program: A Working Model

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3. Conduct a Streamlined Review



 Verify a <u>SaMD's</u> continued safety, effectiveness and performance and the organization's commitment to culture of quality through post-market <u>Real-World</u> <u>Performance</u>. <u>Critical</u> = Life-threatening state of health, including incurable states; requires major therapeutic interventions

<u>Serious</u> = Moderate in progression, often curable; does not require major therapeutic interventions; intervention is normally not expected to be time critical

<u>Non-serious</u> = Slow with predictable progression of disease state; may not be curable; can be managed effectively; requires only minor therapeutic interventions; interventions are normally non-invasive

IMDRF Risk Categorization			Level of Review for Level 1 and Level 2 Precertified Organizations' SaMD		
Туре	Subtype	Description	Initial Product	Major Changes	Minor Changes
Type IV	(9)	Critical x Diagnose/Treat	Streamlined	Streamlined Review	No Review
Type III	(8)	Critical x Drive	Review	L1 - Streamlined Review L2 - No Review	
Type III	(7)	Serious x Diagnose/Treat			
Type II	(6)	Serious x Drive	L1 - Streamlined Review		
Type II	(5)	Non-serious x Diagnose/Treat		No Review	
Type II	(4)	Critical x Inform	L2 - No Review		
Type I	(3)	Non-serious x Drive			
Type I	(2)	Serious x Inform	No Review		
Type I	(1)	Non-serious x Inform			



Developing a Software Precertification Program: A Working Model

v1.0 - January 2019



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Determine the <u>SaMD's</u> required review through <u>Review</u>
 Determination



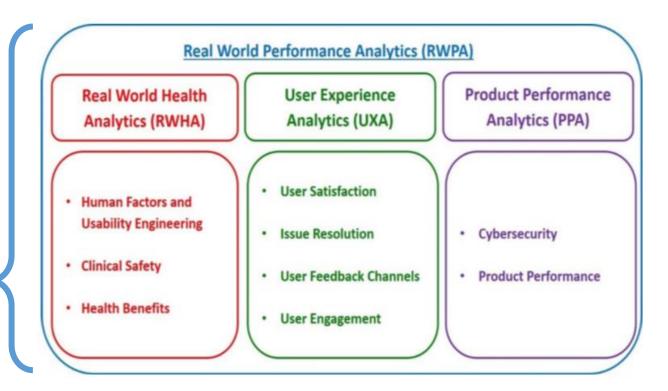
3. Conduct a Streamlined Review



 Verify a <u>SaMD's</u> continued safety, effectiveness and performance and the organization's commitment to culture of quality through post-market <u>Real-World</u> <u>Performance</u>. <u>Real-World Health Analytics</u> = analyses of real-world clinical outputs and outcomes related to the intended use of the SaMD product

<u>User Experience Analytics</u> = analyses of user experience outputs related to the real-world use of a SaMD product

<u>Product Performance Analytics</u> = analyses of outputs and outcomes demonstrating the real-world accuracy, reliability, and security of a SaMD product





Proposed Regulatory Framework for Modifications to Artificial Intelligence/Machine Learning (AI/ML)-Based Software as a Medical Device (SaMD)

Discussion Paper and Request for Feedback

#### **Total Product Lifecycle Approach**

- Establish clear expectations on quality systems and good ML practices (GMLP)\*
- Conduct premarket review and establish clear expectations to continually manage patient risks
- Expect manufacturers to monitor the device and incorporate a risk management approach in development, validation, and execution of the changes
- Enable increased transparency to users and FDA using postmarket real-world performance reporting







### Good Machine Learning Practice for Medical Device Development: Guiding Principles

October 2021

Good Machine Learning Practice for Medical Device Development:				
Guiding Principles				
Multi-Disciplinary Expertise Is Leveraged Throughout the Total Product Life Cycle	Good Software Engineering and Security Practices Are Implemented			
Clinical Study Participants and Data Sets Are Representative of the Intended Patient Population	Training Data Sets Are Independent of Test Sets			
Selected Reference Datasets Are Based Upon Best Available Methods	Model Design Is Tailored to the Available Data and Reflects the Intended Use of the Device			
Focus Is Placed on the Performance of the Human-AI Team	Testing Demonstrates Device Performance During Clinically Relevant Conditions			
Users Are Provided Clear, Essential Information	Deployed Models Are Monitored for Performance and Re-training Risks are Managed			



### **CDRH Proposed Guidances for Fiscal Year 2022**

# A-List: Prioritized Guidance Documents that CDRH Intends to Publish in FY2022

### **Final Guidance Topics**

Clinical Decision Support Software

### **Draft Guidance Topics**

- Computer Software Assurance for Production and Quality System Software
- Transition Plan for Medical Devices That Fall Within
   Enforcement Policies Issued During the Coronavirus Disease
   2019 (COVID-19) Public Health Emergency
- Cybersecurity in Medical Devices: Quality System Considerations and Content of Premarket Submissions
- Content of Premarket Submissions for Software as a Medical Device (SaMD) and Software in a Medical Device (SiMD)

# B-List: Guidance Documents that CDRH Intends to Publish, as Guidance Development Resources Permit in FY2022

### **Final Guidance Topics**

 Patient Engagement in the Design and Conduct of Medical Device Clinical Investigations

#### **Draft Guidance Topics**

- Content of Human Factors Information in Medical Device Marketing Submissions
- Marketing Submission Recommendations for A Change Control Plan for Artificial Intelligence/Machine Learning (AI/ML)-Enabled Device Software Functions
- Risk Categorization for Software as a Medical Device: FDA Interpretation, Policy, and Considerations

### Which Software IS an FDA-Regulated Medical Device?

- A. A software function that **stores, processes, and analyzes claims data** to help ensure timely and compliant billing
- B. A software function that **provides access to medical literature** with generic text search capabilities
- C. A software function that simulates various cardiac arrest scenarios to train a HCP in advanced CPR skills
- D. A software function that solely monitors and records daily energy expenditure and cardiovascular workout activities to allow awareness of one's exercise activities to improve or maintain good cardiovascular health
- E. A software function that **analyzes a previously stored electrocardiogram** for a particular patient and **provides a notification** as to the potential for atrial defibrillation

### Which Software IS an FDA-Regulated Medical Device?

- A. A software function that **helps asthmatics record (i.e., collect and log) inhaler usage, asthma episodes** experienced, location of user at the time of an attack, or environmental triggers of asthma attacks
- B. Software functions that use an attachment to a mobile platform to measure blood oxygen saturation for diagnosis of specific disease or condition
- C. Mobile apps that use GPS location information to alert asthmatics of environmental conditions that may cause asthma symptoms or alert an addiction patient (substance abusers) when near a pre-identified, high-risk location
- D. Software functions that **coach patients** with conditions (e.g., cardiovascular disease, hypertension, diabetes, or obesity) and promote strategies for **maintaining a healthy weight**, getting optimal nutrition, exercising and staying fit, managing salt intake, or **adhering to pre-determined medication dosing schedules** by simple prompting

### Which Software IS NOT an FDA-Regulated Medical Device?

- A. A software tool that **analyzes a patient's stored clinical information** based on specific clinical parameters **to make recommendations to a HCP** and opportunities for complementary tests, and the **basis for the recommendation is provided** so that the HCP does not rely primarily on the recommendation
- B. Software that manipulates or analyzes images and other data obtained from a radiological device (e.g., CT, bone density, and distance) to create 3D models of the region intended to be used in planning orthopedic/dental surgical treatments with a device
- C. Software intended for patients that **provides a questionnaire to assess a patient's level of stress and anxiety** (prior to any diagnosis of general anxiety disorder) **and recommends treatment options** based on the output of the assessment
- D. Machine-learning algorithm, for which the logic and inputs are not explained, that categorizes likely symptoms of seasonal influenza for each flu season based on location and current electronic health records of patients diagnosed or suspected to have influenza to assist HCPs in differentiating between common flu symptoms and other illnesses (e.g., common cold) in a particular season

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