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*Draft – Not for Implementation*

# Recommended Content and Format of Complete Test Reports for Non- Clinical Bench Performance Testing in Premarket Submissions

## Draft Guidance for Industry and Food and Drug Administration Staff

### *DRAFT GUIDANCE*

This draft guidance document is being distributed for comment purposes only.

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You should submit comments and suggestions regarding this draft document within 60 days of publication in the *Federal Register* of the notice announcing the availability of the draft guidance. Submit electronic comments to <https://www.regulations.gov>. Submit written comments to the Dockets Management Staff (HFA-305), Food and Drug Administration, 5630 Fishers Lane, rm. 1061, Rockville, MD 20852. Identify all comments with the docket number listed in the notice of availability that publishes in the *Federal Register*.

For questions about this document, contact the ODE Regulatory Advisors at [CDRH-ODERegAdvisors@fda.hhs.gov](mailto:CDRH-ODERegAdvisors@fda.hhs.gov).



U.S. Department of Health and Human Services  
Food and Drug Administration  
Center for Devices and Radiological Health

## **Preface**

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### **Additional Copies**

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37 Additional copies are available from the Internet. You may also send an e-mail request to  
38 [CDRH-Guidance@fda.hhs.gov](mailto:CDRH-Guidance@fda.hhs.gov) to receive a copy of the guidance. Please use the document  
39 number 18011 to identify the guidance you are requesting.

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# Recommended Content and Format of Test Reports for Complete Non- Clinical Bench Performance Testing in Premarket Submissions

## Draft Guidance for Industry and Food and Drug Administration Staff

*This draft guidance, when finalized, will represent the current thinking of the Food and Drug Administration (FDA or Agency) on this topic.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 and Scope

The Food and Drug Administration (FDA) has developed this document to describe relevant information that should be included in complete test reports for non-clinical bench performance testing provided in a premarket submission (i.e., premarket approval (PMA) applications, humanitarian device exemption (HDE) applications, premarket notification (510(k)) submissions, investigational device exemption (IDE) applications and De Novo requests).

For the purpose of this document, non-clinical bench performance testing is defined as performance testing that encompasses all bench testing and will be dependent upon the specifics of the actual device or device type. Non-clinical bench performance testing includes, but is not limited to: mechanical and biological engineering performance (such as fatigue, wear, tensile strength, compression, burst pressure); bench tests using animal or human tissue; and animal carcass or human cadaveric testing.

Non-clinical bench performance testing excludes biocompatibility evaluation, sterilization, and animal *in vivo* evaluation. Test reports for clinical studies, animal studies, and studies evaluating the performance characteristics of *in vitro* diagnostic devices are excluded from the scope of this document.

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81 The information listed below is intended to help ensure that clear and consistent information is  
82 provided in premarket submissions containing non-clinical bench performance testing.<sup>1</sup> The  
83 information in this guidance is intended to be used in conjunction with other FDA guidance  
84 documents, including device-specific guidances.

85  
86 FDA's guidance documents, including this guidance, do not establish legally enforceable  
87 responsibilities. Instead, guidances describe the Agency's current thinking on a topic and should  
88 be viewed only as recommendations, unless specific regulatory or statutory requirements are  
89 cited. The use of the word *should* in Agency guidance means that something is suggested or  
90 recommended, but not required.

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## 92 **II. Test Report Information**

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94 Complete test reports for non-clinical bench performance testing should include the objective of  
95 the test, description of test methods and procedures, pre-defined pass/fail criteria, test results, and  
96 discussion of conclusions. To facilitate FDA's review, we recommend that all premarket  
97 submissions containing complete test reports for non-clinical bench performance testing also  
98 include a summary report that summarizes the conducted testing.

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100 Complete test reports are not needed for Special 510(k)s or for tests for which a Declaration of  
101 Conformity to an appropriate FDA-recognized consensus standard is provided. For additional  
102 information regarding the use of consensus standards and a Declaration of Conformity, refer to  
103 the guidance on "[Recognition and Use of Consensus Standards](#)."<sup>2</sup>

### 104 **A. Summary Reports**

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106 We recommend that in the body of your submission you briefly describe all testing performed in  
107 a tabulated summary that includes the following:

108

109 1. Test performed

110

111 2. Objective of the test

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113 3. Brief description of the test methods/procedures, including sample size, device(s) tested,  
114 and any standard(s) utilized

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<sup>1</sup> The recommendations in this guidance are consistent with the least burdensome provisions (see Sections 513(c), 513(i), 515(c), 515(i) of the Federal Food, Drug, and Cosmetic Act) and guiding principles described in the draft guidance "The Least Burdensome Provisions: Concept and Principles" (<https://www.fda.gov/downloads/MedicalDevices/DeviceRegulationandGuidance/GuidanceDocuments/UCM588914.pdf>), which when finalized, will represent FDA's current thinking.

<sup>2</sup> <https://www.fda.gov/downloads/MedicalDevices/DeviceRegulationandGuidance/GuidanceDocuments/ucm077295.pdf>

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- 116 4. Pre-defined pass/fail criteria, including the clinical/scientific justification for the chosen  
117 criteria  
118  
119 5. Results summary  
120 a. For quantitative assessments, specify the mean, maximum, minimum, and  
121 standard deviation.  
122 b. Specify whether the acceptance criteria were met or not.  
123 c. Provide a brief explanation of any test failures and/or deviations.  
124  
125 6. Discussion of the conclusions  
126 a. Discuss the clinical significance of the conclusions.  
127 b. For 510(k) submissions, include an explanation of how the data generated  
128 supports a finding of substantial equivalence (e.g., comparison to predicate device  
129 testing, dimensional analysis).  
130  
131 7. Location (e.g., appendix and page number) in the submission for each test report  
132

133 **B. Test Reports**

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135 Complete test reports should include the following:

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137 **1. Test performed**

138 You should clearly state the test that was conducted.  
139  
140

141 **2. Objective of the test**

142 You should state the purpose of the test that was conducted.  
143  
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145 **3. Description of test methods and procedures**

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147 We recommend that you include the following items in the description of test methods  
148 and procedures:  
149

150 **a. Test Sample Information**

151 You should provide a description of the sample that is tested, whether that is the  
152 device itself or a part or attribute of the device (e.g., the device's material  
153 composition/properties or packaging). The tested devices should represent the  
154 final, finished device that has been subjected to all manufacturing processes  
155 (including sterilization), environmental conditioning and simulated transportation.  
156 If you conducted any testing on samples that are not the final, finished (e.g.,  
157 sterilized) product or subassemblies, we recommend that you indicate this in the  
158 test protocol and test summary table, and provide a justification explaining why  
159 this approach is appropriate. Also, we recommend that you specify the number of

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160 sterilization cycles and other conditioning (e.g., simulated use, environmental  
161 conditioning, distribution simulation) the samples have been exposed to prior to  
162 testing. If test samples were conditioned or sterilized in a manner that is different  
163 than what is intended for the marketed product, we recommend that you provide a  
164 justification for this being worst-case for all attributes being tested.  
165

#### **b. Test Sample Size/Selection**

166 We recommend providing a scientific rationale to support the number of samples  
167 tested. For 510(k) submissions, the sample size should provide reasonable  
168 assurance that the test results support the substantial equivalence of the device.  
169 The sample size selected should be supported by your risk assessment and  
170 sampling plan. Additionally, if one device model is used to represent all device  
171 models included in your submission, you should justify why the tested device is  
172 representative of the entire product matrix or explain why the tested device  
173 represents the worst-case design for that respective test. Finally, your test sample  
174 selection should consider both inter- and intra-lot variability by examining  
175 multiple manufacturing lots, when appropriate.  
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#### **c. Test Protocol**

178 The test protocol should contain enough detail that an individual familiar with  
179 testing of the device type will be able to interpret the purpose of the test, how the  
180 test was conducted, and whether the test setup is appropriate to assess the  
181 performance of the device type. The test protocol should include the test  
182 parameters, including an explanation of and rationale for critical test parameters.  
183 The test protocol should also include acceptance criteria with scientific or clinical  
184 justification for the relevancy of the acceptance criteria to the intended use of the  
185 device, test sample information, and test methodology.  
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188 If FDA-recognized consensus standards that include test methods are utilized  
189 during testing, providing the test protocol is unnecessary, even when a  
190 Declaration of Conformity to the standard is not provided. Instead, you should  
191 provide a full citation of the standard, including the version, and information  
192 regarding the extent to which the standard was followed, including deviations  
193 from the standard. When the FDA-recognized consensus standard includes  
194 choices related to, for example, what is to be tested, which test methods to use, or  
195 performance limits to assess conformity, you should include an explanation for  
196 the choices and selections made.  
197

#### **4. Pre-Defined Pass/Fail Criteria**

198 You should report the acceptance criteria that you use, including specifications or  
199 acceptance and rejection criteria, and a clinical/scientific justification for the specification  
200 or acceptance and rejection criteria based on the clinical requirements of the device.  
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205 **5. Test Results**

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We recommend that you include the following items in your test results:

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**a. Data Points**

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We recommend that you include all data points collected for the tests conducted to support the premarket submission, where appropriate. This data should be accompanied by a summary of the data (e.g., minimum, maximum, average and standard deviation). You should consider using consistent units throughout your testing. If the data reported is rounded, you should specify to which significant digit.

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**b. Data Analysis**

You should analyze the data, including any outlying points and anomalous results, and explain whether the data meet acceptance criteria. We recommend that you conduct data analyses for your test results using statistical analyses when appropriate, and specify whether the acceptance criteria were met. If the data analysis concludes that the acceptance criteria were not met for either individual samples or entire sample populations, we recommend that you discuss the potential reasons for test failure, determine if re-testing is appropriate, risk mitigation measure(s), and provide justification for why the results are considered acceptable and support a favorable decision on your premarket submission.

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**c. Protocol Deviations**

We recommend that you describe any protocol deviations, the activities executed to determine the source of the deviation, and the impact on the test results and conclusions you have drawn from the test.

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233 **6. Discussion of the conclusions**

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We recommend that you describe the conclusions drawn from the test results and the clinical significance of the conclusions.

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For 510(k) submissions, you should discuss how the conclusions demonstrate substantial equivalence of your device to the identified primary predicate device based on known clinical performance, device performance specifications publicly available, and/or relevance of your specified acceptance criteria to the intended use of the device.

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