

February 10, 2021

Kristen Bankert, Ph.D. BD Integrated Diagnostics Solution Division Becton, Dickinson and Company 7 Loveton Circle Sparks, MD 21152

Device:	BD SARS-CoV-2/Flu for BD MAX ystem
EUA Number:	EUA202975
Company:	Becton, Dickinson and Company (Br
Indication:	Simultaneous qualitative detection and decremation of nucleic acid from the SARS (nV-2, afluenza A, and/or influenza B in nasopharyngeal and and for asar state collected from individuals suspected of recurstory viral infection consistent with COVID-19 by their heith cale provider. Emergence use of this ten is limited to authorized laboratories.
Authorized Laboratories:	Laboratoria certified unor the Clinical Laboratory Improvement Ameriment of 1988 (2021A), 42 U.S.C. §263a, that meet requirements to perform moderate or high complexity tests.

Dear Dr. Bankert:

This letter is it responsed your¹ request that the Food and Drug Administration (FDA) issue an Emergency U. Acutorization (EUA) for emergency use of your product,² pursuant to Section 5 The Letteral Form, Drug, and Cosmetic Act (the Act) (21 U.S.C. §360bbb-3).

Or rebruary (2020, purplant to Section 564(b)(1)(C) of the Act, the Secretary of the Department of the and Human Services (HHS) determined that there is a public health emergency that has a significant potential to affect national security or the health and security of United 5 these citizens living abroad, and that involves the virus that causes COVID-19. Pursuant to action 564 of the Act, and on the basis of such determination, the Secretary of HHS then declared that circumstances exist justifying the authorization of emergency use of in

¹ For ease of reference, this letter will use the term "you" and related terms to refer to Becton, Dickinson and Company.

² For ease of reference, this letter will use the term "your product" to refer to the BD SARS-CoV-2/Flu for BD MAX System used for the indication identified above.

vitro diagnostics for detection and/or diagnosis of the virus that causes COVID-19 subject to the terms of any authorization issued under Section 564(a) of the Act.³

There are FDA-approved/cleared tests for influenza A virus and influenza B virus, but there are no FDA approved/cleared multiplexed tests for simultaneous qualitative detection and differentiation of SARS-CoV-2, influenza A virus and/or influenza B virus nucleic acids. Respiratory viral infections caused by the influenza A and B viruses and SARS-CoV-2 can have similar clinical presentation and diagnostic considerations. Thus, to differentially detect SARS-CoV-2, information from a test that detects and differentiates the virus that cause seasonal epidemics of flu, influenza A and 1 mot influenza C) is needed during the flu season that coincides with the COVIL 19 pandemic.

FDA considered the totality of scientific information available in an orizing the operatory use of your product for the indication above. A summary of the performance is formation of A relied upon is contained in the Instructions for Use (identified to bw).

Having concluded that the criteria for issuance of this authorization a der Section 564(c) of the Act are met, I am authorizing the emergency use of your product, description the Scope of Authorization of this letter (Section II), subject to the term of this authorization.

I. Criteria for Issuance of Authorization

I have concluded that the emergency us of your production meets the criteria for issuance of an authorization under Section 564(c) of the Act, because have concluded that:

- 1. The SARS-CoV-2 can cause a serie or life inreatening disease or condition, including severe respiratory class, to humans infected by this virus;
- 2. Based on the stality of a sintific evidence available to FDA, it is reasonable to believe that your reduct may be effect with diagnosing COVID-19, and that the known and potential benefits a your product when used for diagnosing COVID-19, outweigh the known and potential risks of your product; and

3 differences is no accuate approved, and available alternative to the emergency use of your product.⁴

II. S. De Authormation

I have concluded, pursuant to Section 564(d)(1) of the Act, that the scope of this authorization is limited to the indication above.

³ U.S. Department of Health and Human Services, *Determination of a Public Health Emergency and Declaration that Circumstances Exist Justifying Authorizations Pursuant to Section 564(b) of the Federal Food, Drug, and Cosmetic Act, 21 U.S.C.* § 360bbb-3. 85 FR 7316 (February 7, 2020).

⁴ No other criteria of issuance have been prescribed by regulation under Section 564(c)(4) of the Act.

Authorized Product Details

Your product is an automated multiplexed real-time RT-PCR test intended for the simultaneous qualitative detection and differentiation of nucleic acid from SARS-CoV-2, influenza A, and/or influenza B in nasopharyngeal and anterior nasal swabs collected from individuals suspected of respiratory viral infection consistent with COVID-19 by their health care provider. The SARS-CoV-2, influenza A, and/or influenza B RNA is generally detectable in upper respiratory samples during the acute phase of infection. Positive results are indicative of active infection but do not rule out bacterial infection or co-infection with other pathogens not detail test. Clinical correlation with patient history and other diagnostic information is cessary to V-2, influenz determine patient infection status. Negative results do not preclude SARSand/or influenza B infection and should not be used as the sole basis f t or other treat patient management decisions. Negative results must be combined th clinical ervati patient history, and/or epidemiological information.

Testing is limited to laboratories certified under CLIA, 422.S.C. for, that mentrequirements to perform moderate or high complexity tests.

d to To use your product, the patient sample is first exp combination of lytic and extraction reagents realeasing nucleic acid from the target organ. S at is the aptured on magnetic acid is eluted and added into the affinity beads. After washing the magnetic e nuc PCR Catridge were the purified nucleic a d is then erse nscribed into cDNA followed by PCR amplification and detection using drolysis (Tad (an) probes. The materials or other ARS-CoV-2/ u for BD MAX System, which includes authorized materials included in the BD a for D MAX Sy em Master Mix, BD Respiratory for BD the following: BD SARS-CoV-2/ MAX System Extraction Tube, BD y for I MAX System Unitized Reagent Strip and espira. the BD Molecular Respiratory Samp Buffer Tupe.

Your product requires the following Rhose P (RP) control, or other authorized control materials (as may be requested under Condition Coelow), that are processed in the same way as the patient samples onen tested with your product. The control listed below must generate expected results in order or a tested be considered valid, as outlined in the Instructions for Use:

Vase there optical serves as both a sample extraction control (EC) and an internal and function control (IAC): The RP primer and probe set is included in each run to test for human RP, which controls for specimen quality and demonstrates that nucleic acid was generated by the extraction process.

You also a commend use of external positive and negative controls, or other authorized controls, to be run as callined in the Instructions for Use. Your product also requires the use of additional authorized materials and authorized ancillary reagents that are not included with your product and are described in the Instructions for Use.

The labeling entitled "BD SARS-CoV-2/Flu for BD MAX System" Instructions for Use and "BD SARS-CoV-2/Flu for BD MAX System" product information sheet (available at <u>https://www.fda.gov/medical-devices/coronavirus-disease-2019-covid-19-emergency-use-</u>

<u>authorizations-medical-devices/vitro-diagnostics-euas</u>), and the following fact sheets pertaining to the emergency use, is required to be made available as set forth in the Conditions of Authorization (Section IV), and are collectively referred to as "authorized labeling":

- Fact Sheet for Healthcare Providers: Becton, Dickinson and Company (BD) BD SARS-CoV-2/Flu for BD MAX System
- Fact Sheet for Patients: Becton, Dickinson and Company (BD) BD SARS-CoV-2/Flu for BD MAX System

The above described product, with the authorized labeling provided as set from in the Conditions of Authorization (Section IV), is authorized to be distributed to and used by authorized laboratories under this EUA, despite the fact that it does not meet certain requirements otherwise required by applicable federal law.

I have concluded, pursuant to Section 564(d)(2) of the Act, that his reachable to believe that the known and potential benefits of your product, when used constant, with the scope of Authorization of this letter (Section II), outweigh the known and potential risk of your product.

I have concluded, pursuant to Section 564(d)(3) of the Act aread on the totality of scientific evidence available to FDA, that it is reasonable to below a lat your product may be effective in diagnosing COVID-19, when used consister and the Science of Authorization of this letter (Section II), pursuant to Section 564(c)(20A) of the science.

FDA has reviewed the scientific information available to FDA, including the information supporting the conclusions described in 5 action I above and concludes that your product (as described in the Scope of Authorization of a colletter spection II)) meets the criteria set forth in Section 564(c) of the Act concerning afety and potential effectiveness.

The emergency use a your processing this EUA must be consistent with, and may not exceed, the terms of this letter, including the Scope of Authorization (Section II) and the Conditions of Authorization (Section IV). Subject to the terms of this EUA and under the circumstances to forther the Secretary of HHS's determination under Section 564(b)(1)(C) of the Act described under and the ecretary of HHS's corresponding declaration under Section 564(b)(1)(C) of 564(b)(1) or the Act, the product is authorized for the indication above.

E. Waiver Costain Requirements

I am we jug the following requirements for your product during the duration of this EUA:

• Carrent good manufacturing practice requirements, including the quality system requirements under 21 CFR Part 820 with respect to the design, manufacture, packaging, labeling, storage, and distribution of your product, but excluding Subpart H (Acceptance Activities, 21 CFR 820.80 and 21 CFR 820.86), Subpart I (Nonconforming Product, 21 CFR 820.90), and Subpart O (Statistical Techniques, 21 CFR 820.250).

IV. Conditions of Authorization

Pursuant to Section 564(e) of the Act, I am establishing the following conditions on this authorization:

Becton, Dickinson and Company (You) and Authorized Distributor(s)⁵

- A. Your product must comply with the following labeling requirements pursuant to FDA regulations: the intended use statement (21 CFR 809.10(a)(2), (b)(2)); 21 quart directions for use (21 U.S.C. 352(f)), (21 CFR 809.10(b)(5), (7), and (8)); appropriate limitations on the use of the device including information required under 21 CFR 9.10(a)(4); an any available information regarding performance of the device, including in uirements of the 21 CFR 809.10(b)(12).
- B. You and authorized distributor(s) must make your product available with the authorized labeling to authorized laboratories.
- C. You and authorized distributor(s) must make available on your the ke(s) the authorized labeling.
- D. You and authorized distributor(s) will allole a provical copy of the "BD SARS-CoV-2/Flu for BD MAX System" product information show with each shipped product to authorized laboratories, and will make the authorized 'BD SARS-CoV-2/Flu for BD MAX System" Instructions for the electronical available with the opportunity to request a copy in paper for an another such recreast, you must promptly provide the requested information without additional com
- E. You and authorized listributor) must inform authorized laboratories and relevant public health, thorities of this UA, including the terms and conditions herein, and any update made to your procession and authorized labeling.
- F. Through process of inventory control, you and authorized distributor(s) must maintain records of the authorized aboratories to which they distribute your product and number acy instribute.
- 3. You d outhorized distributor(s) must collect information on the performance of your product. You will report to FDA any suspected occurrence of false positive or false gative results and significant deviations from the established performance characteristics of the product of which you become aware.
- H. You and authorized distributor(s) are authorized to make available additional information relating to the emergency use of your product that is consistent with, and does not exceed, the terms of this letter of authorization.

⁵ "Authorized Distributor(s)" are identified by you, Becton, Dickinson and Company, in your EUA submission as an entity allowed to distribute your product.

Becton, Dickinson and Company (You)

- I. You must notify FDA of any authorized distributor(s) of your product, including the name, address, and phone number of any authorized distributor(s).
- J. You must provide authorized distributor(s) with a copy of this EUA and communicate to authorized distributor(s) any subsequent amendments that might be made to this EUA and its authorized accompanying materials (e.g., Fact Sheets).
- K. You may request changes to this EUA for your product, including the Scope of Authorization (Section II in this letter) or to the authorized lab iding requ s to ing, it make available additional authorized labeling specific to an thorized d ibutor Such additional labeling may use another name for the product at othery se mu consistent with the authorized labeling, and not exceed terms authorization of this letter. Any request for changes to this EUA should to the D e sub sion of Microbiology (DMD)/Office of Health Technology (OHT) **Office** in Vitro Diagnostics and Radiological Health (OIR)/Office Product E ion and Quality (CDRH) and Yequire appropriate (OPEQ)/Center for Devices and Radiologic Heal authorization from FDA prior to implementation
- L. You must comply with the following requirements prequant to FDA regulations: Subpart H (Acceptance Activities, 21 CF 820.80 and 1 CFR 820.86), Subpart I (Nonconforming Product, 21 CF 820.90), and subpart O (Statistical Techniques, 21 CFR 820.250).
- M. You must have lot release procedures and the lot release procedures, including the study design and statistic power, must ensure that the tests released for distribution have the clinical and analytical procedure claimed in the authorized labeling.
- N. If requered by FDC, you must submit lot release procedures to FDA, including sampling protocol testim protocols, and acceptance criteria, that you use to release lots of your product for haribution in the U.S. If such lot release procedures are requested by FDA, but use to release by FDA, but use to release by FDA, but use to release by FDA.
- O. You just evaluate the analytical limit of detection and assess traceability⁶ of your product White y FDA-recommended reference material(s). After submission to and neurrence with the data by FDA, you must update your labeling to reflect the additional testing. Such labeling updates will be made in consultation with, and require concurrence of, DMD/OHT7-OIR/OPEQ/CDRH.
- P. You will further evaluate the clinical performance of your product in an FDA agreed upon post authorization clinical evaluation study within 6 months of the date of this letter (unless otherwise agreed to with FDA). After submission to and concurrence with the data by FDA, you will update authorized labeling to reflect the additional testing.

⁶ Traceability refers to tracing analytical sensitivity/reactivity back to an FDA-recommended reference material.

Such labeling updates will be made in consultation with, and require concurrence of DMD/OHT7-OIR/OPEQ/CDRH.

Q. You must have a process in place to track adverse events, including any occurrence of false results with your product and report to FDA pursuant to 21 CFR Part 803.

Authorized Laboratories

- R. Authorized laboratories using your product must include with test result epone all authorized Fact Sheets. Under exigent circumstances, other appropriate methods disseminating these Fact Sheets may be used, which may include in a media.
- S. Authorized laboratories using your product must use your product as outload in the authorized labeling. Deviations from the authorized proclaures, including the authorized instruments, authorized extraction methods, whorized clinical specimen types, authorized control materials, authorized other ancihor reagents are authorized materials required to use your product are not permuted.
- T. Authorized laboratories that receive your product rest notify the relevant public health authorities of their intent to run your product prover intracting esting.
- U. Authorized laboratories using your product have process in place for reporting test results to healthcare providers an relevant public health authorities, as appropriate.
- informatio V. Authorized laboratories m on the performance of your product and col RH (v report to DMD/OHT7-OIR/ PEOA email: CDRH-EUAu (Becton, Dickinson and Company Customer Reporting@fda.hhs.gov) and Technical Support 800.638.8 63) any suspected occurrence of false positive or false negative result and sign ant viations from the established performance s of your product which they become aware. characteris
- W. All labeletory prosonnel using your product must be appropriately trained in RT-PCR techniques to use appropriate laboratory and personal protective equipment when the authorized labeling.

Buston, Dick pson and Company (You), Authorized Distributor(s) and Authorized Laboratories

X. Yt authorized distributor(s), and authorized laboratories using your product must ensur that any records associated with this EUA are maintained until otherwise notified by FDA. Such records will be made available to FDA for inspection upon request.

Conditions Related to Printed Materials, Advertising and Promotion

Y. All descriptive printed matter, advertising, and promotional materials relating to the use of your product shall be consistent with the authorized labeling, as well as the terms set

forth in this EUA and meet the requirements set forth in section 502(a), (q)(1), and (r) of the Act and FDA implementing regulations.

- Z. No descriptive printed matter, advertising, or promotional materials relating to the use of your product may represent or suggest that this test is safe or effective for the detection of SARS-CoV-2.
- AA. All descriptive printed matter, advertising, and promotional materials relating to the use of your product shall clearly and conspicuously state that:
 - This product has not been FDA cleared or approved, but has then authorized for emergency use by FDA under an EUA for use by authorized lateratories;
 - This product has been authorized only for the detation of proleic action SARS-CoV-2, influenza A, and influenza B, not for any ther visuses or pathogens; and
 - The emergency use of this product is only a thorized is the detation of the declaration that circumstances exist justifying the authorized in of emergency use of in vitro diagnostics for detection as Vor excession of COVID-19 under Section 564(b)(1) of the Federal Food, Drug, and Smetic Ace, 21 U.S.C. § 360bbb-3(b)(1), unless the declaration of emergency instead of authorization is revoked sooner.

The emergency use of your product as escribed in this etter of authorization must comply with the conditions and all other terms of this authorization.

V. Duration of Authorization

This EUA will be effective and if the declaration that circumstances exist justifying the authorization of the energency strength witro diagnostics for detection and/or diagnosis of COVID-19 is terrelated under Section (4b)(2) of the Act or the EUA is revoked under Section 564(g) and the Act



Sincerely,

RADM Denise M. Hinton Chief Scientist Food and Drug Administration

Enclosure Technical correction: Febuary 11, 2021