

Introduction of the Medical Device Regulation 2017/745 (MDR) for CE Marking

Ms. Khwunsuda Anuan

Client manager – Regulatory Services - APAC Assessment Delivery Operations



bsi.

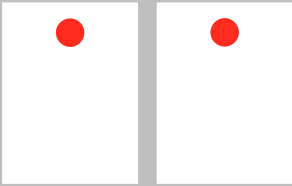
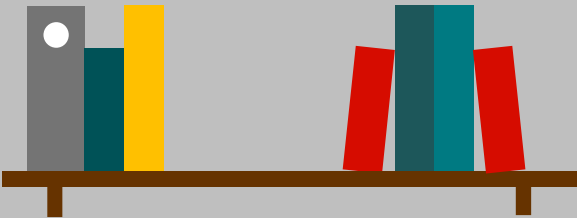
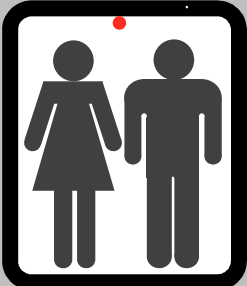
Benefits to you

Introduction the requirements of the European Medical Devices Regulation

Take the necessary steps for your organization to meet the MDR requirements

Maintain compliance to MDR and other/future documents related to Medical Device legislation

Welcome



Introductions

Introductions



Course aim

To provide the knowledge to requirements of the MDR in your organization, and to obtain and maintain CE marking for your product





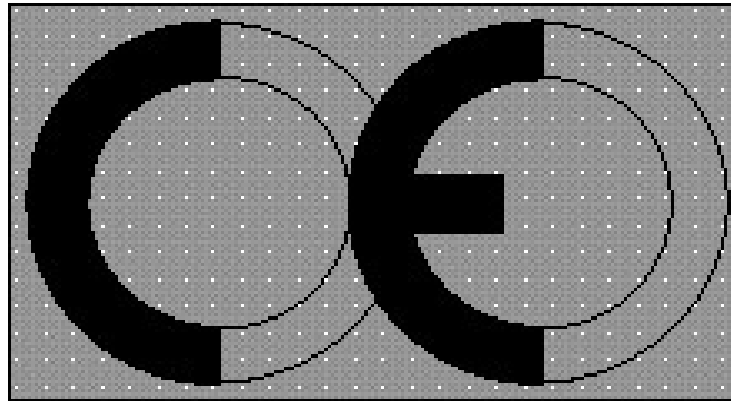
Some Regulatory Background

What is CE Marking?

Affixed by
manufacturer

A legal
mark

Law defines
appearance
and size

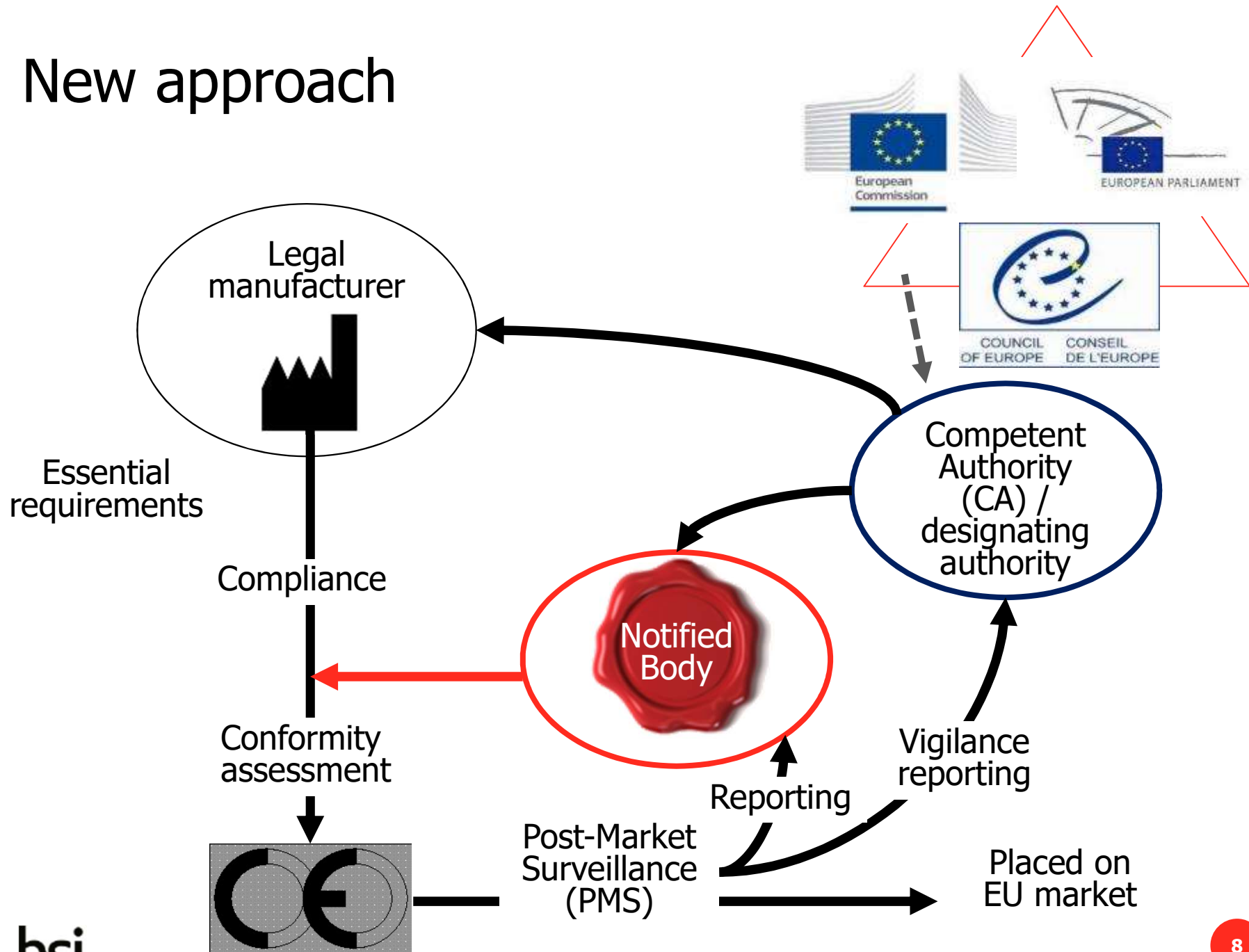


Manufacturer's
declaration

Certification
issued by
Notified
Bodies

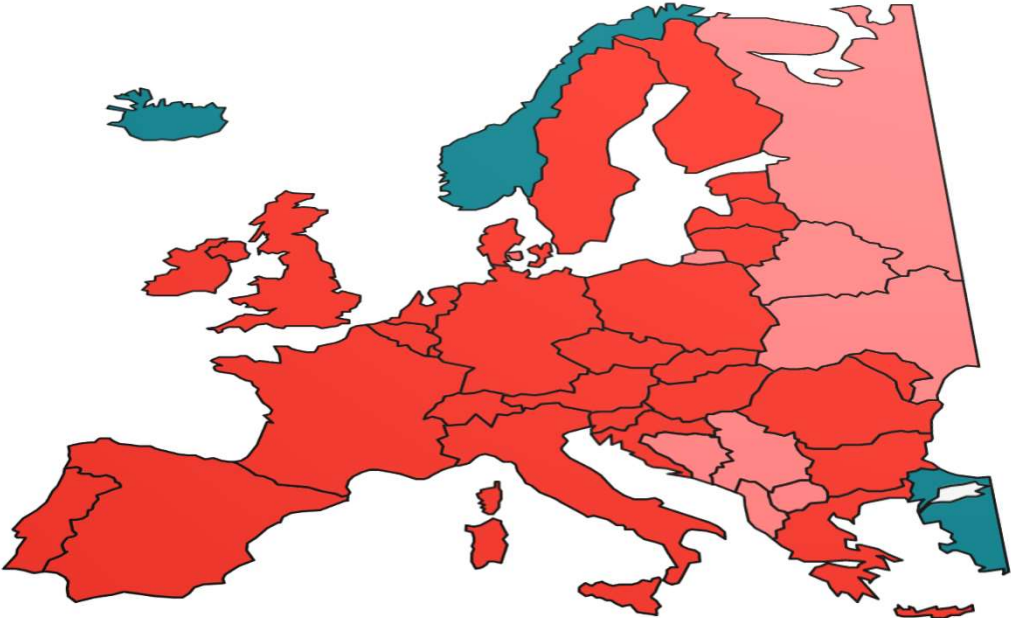
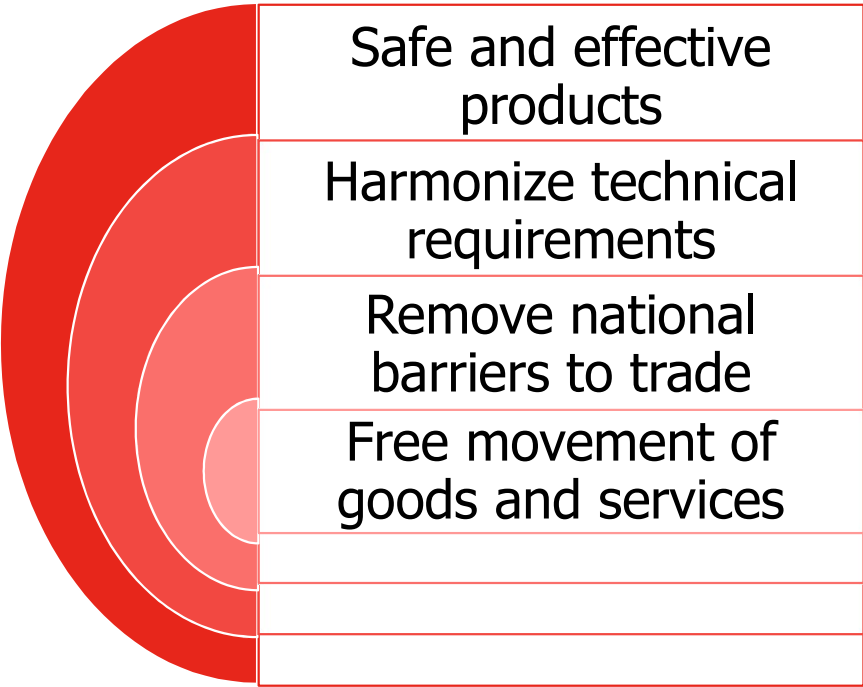
- CE mark is not:
- A voluntary quality mark
 - Owned by any particular company

New approach



Where is CE marking mandatory?

Within EU, European Economic Area (EEA), Switzerland, Turkey



MDD Amendments

Directive 93/42/EEC of 14 June 1993 concerning medical devices (OJ L169, 12/07/1993)

Amended by:

M1 Directive 98/79/EC, 27 October 1998
(L331, 17/12/1998)

M2 Directive 2000/70/EC, 16 November 2000
(L313, 13/12/2000)

M3 Directive 2001/104/EC, 7 December 2001
(L006, 10/01/2002)

M4 Regulation (EC) No 1882/2003, 29 September 2003
(L284, 31/10/2003)

M5 Directive 2007/47/EC , 5 September 2007
(L247, 21/09/2007)

Medical Device Regulation: What will Change?

Many new requirements placed on all players in the sector, including regulators, manufacturers, suppliers, sub-contractors, importers, authorised representatives, distributors and healthcare institutions.

Recital (4) sets expectations

- **Key elements of the existing regulatory approach**, such as the supervision of notified bodies, risk classification, conformity assessment procedures, performance evaluation and performance studies, vigilance and market surveillance **should be significantly reinforced**, whilst provisions ensuring **transparency and traceability** regarding in vitro diagnostic medical devices should be **introduced to improve health and safety**.

Why Not a New Directive?

Directives **vs** Regulations: Relationship with National Legislation

The Member States decide how and in what form Directives are put into local laws

Many countries use their Consumer Protection legislation

Regulations (MDR/IVDR) are law immediately throughout Member States once entered into OJ

MDD, AIMD and IVDD slow to adapt to technical progress

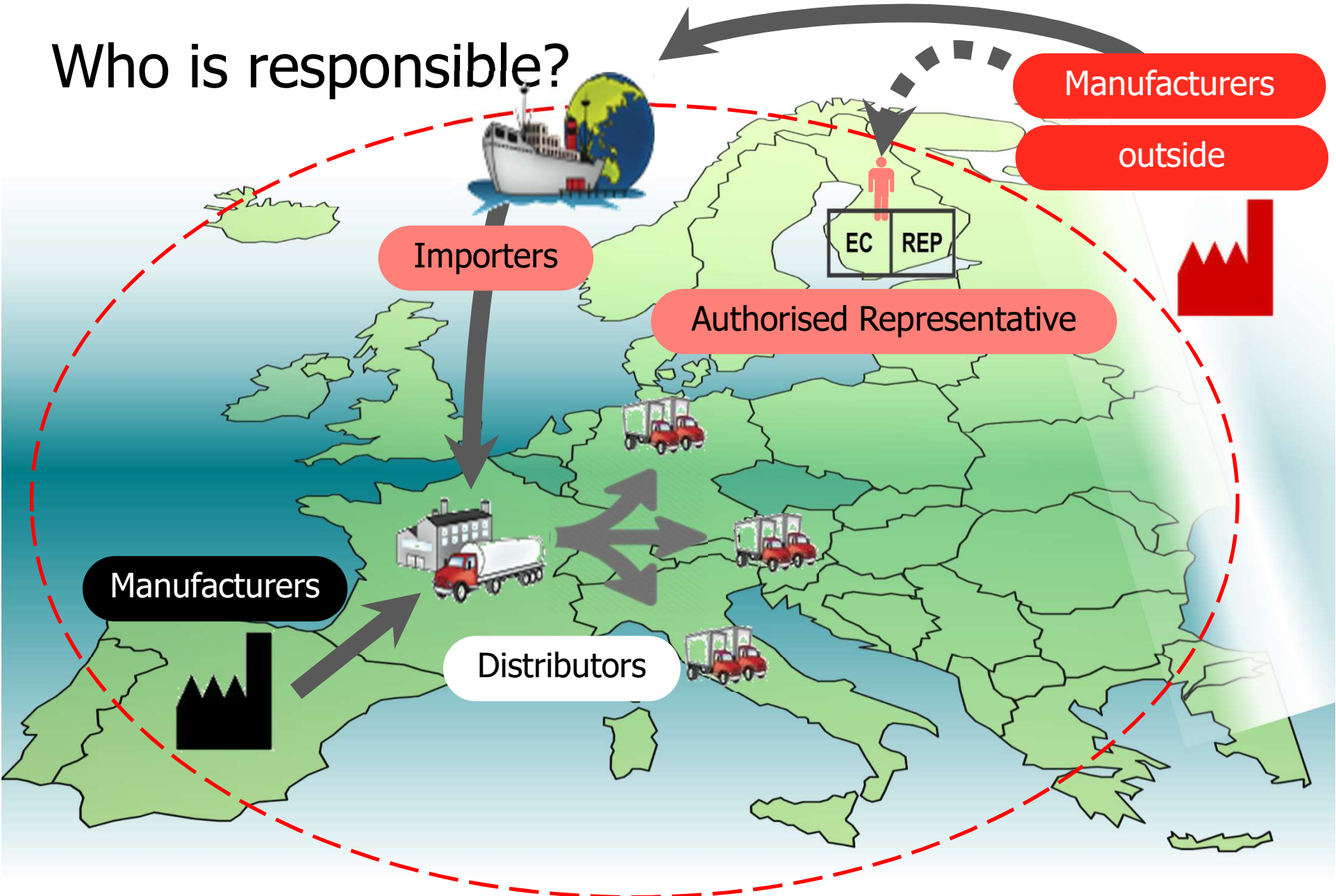
MDR 2017/745 and IVDR 2017/746: Top Level





General obligations

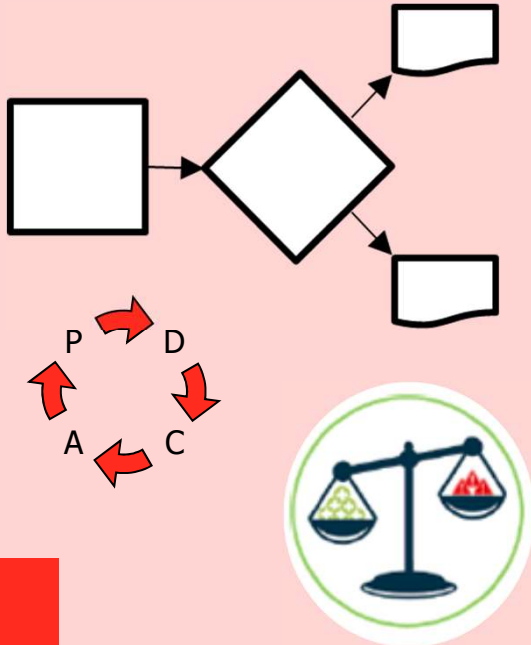
Who is responsible?



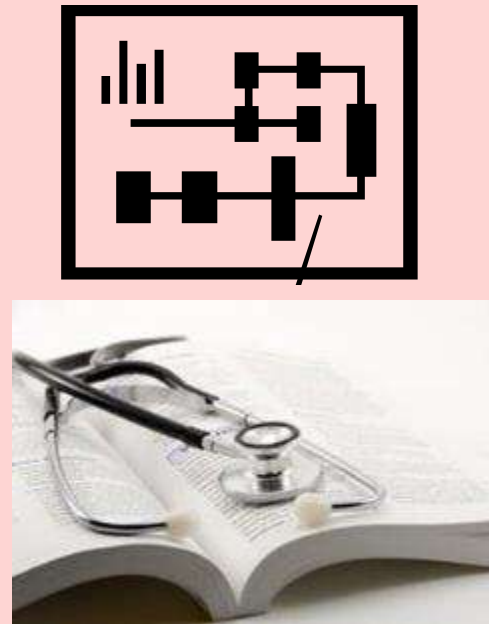
Most responsible: The manufacturer



Quality and Risk Management System



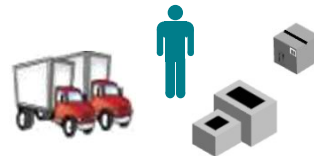
Conformity assessment Technical File



Post-market: Vigilance, Follow-up



Includes external resources



Conformity assessment is mandatory



Conformity assessment
mandatory



No grandfathering,
no certification transfer

Also for
self-certified
devices

Application
for
CE-certificates

Considering:

- Risk class?
- Scope of NB?
(Notified Body)
- Specific
procedures?

MDR Designated Notified Bodies End of May 2020

Search Criteria:

Regulation (EU) 2017/745 on medical devices

Legislation:
Procedure/
article or annex:

ALL



Products:

ALL



Horizontal technical
competence:

ALL



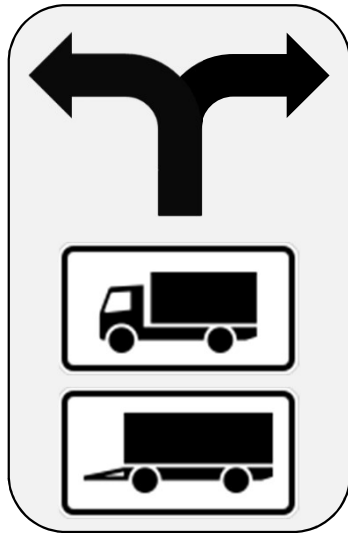
SEARCH

Body type ▲	Name ▲	Country ▲
▶ NB 0086	BSI Assurance UK Ltd	United Kingdom
▶ NB 2797	BSI Group The Netherlands B.V.	Netherlands
▶ NB 2409	CE Certiso Orvos- és Kórháztechnikai Ellenőrző és Tanúsító Kft.	Hungary
▶ NB 1912	DARE!! Services B.V.	Netherlands
▶ NB 0344	DEKRA Certification B.V.	Netherlands
▶ NB 0124	DEKRA Certification GmbH	Germany
▶ NB 2460	DNV GL Presafe AS	Norway
▶ NB 0051	IMQ ISTITUTO ITALIANO DEL MARCHIO DI QUALITÀ S.P.A.	Italy
▶ NB 2862	Intertek Medical Notified Body AB	Sweden
▶ NB 0483	MDC MEDICAL DEVICE CERTIFICATION GMBH	Germany
▶ NB 0482	MEDCERT ZERTIFIZIERUNGS- UND PRÜFUNGSGESELLSCHAFT FÜR DIE MEDIZIN GMBH	Germany
▶ NB 0050	National Standards Authority of Ireland (NSAI)	Ireland
▶ NB 0197	TÜV Rheinland LGA Products GmbH	Germany
▶ NB 0123	TÜV SÜD Product Service GmbH Zertifizierstellen	Germany

Scope of the MDR

1	Check device is within scope of MDR	(Chapter I, §1, §2, Annex XVI)
2	Determine risk class of device and applicable MDR codes	(Chapter V, §51 => Annex VIII) (Article 38, Regulation 2017/2185)
3	Select conformity assessment procedure	(Chapter V, §52)
4	Maintain QMS	(Chapter II, §10)
5	Identify applicable safety and performance requirements	(Chapter II, §5, Annex I)
6	Assemble Technical Documentation	(Annex I, Annex II, Annex XIV)
7	Apply conformity assessment procedure	(Annexes IX, X, XI A or XI B)
8	Assign Unique Identifications	(Chapter III, §27-34, Annex VI)
9	Complete Declaration of Conformity and affix CE mark	(Chapter II, §19 => Annex IV) (Chapter II, §20, => Annex V)
10	Post-market surveillance and updates	(Chapter VII, §83 to 86, Annex XIV => Annex III)

Relation of MDR to other Union Legislation



'One or the other'
Products covered by other Union legislations excluded

But devices in annex XVI
(without Medical Purpose)
included



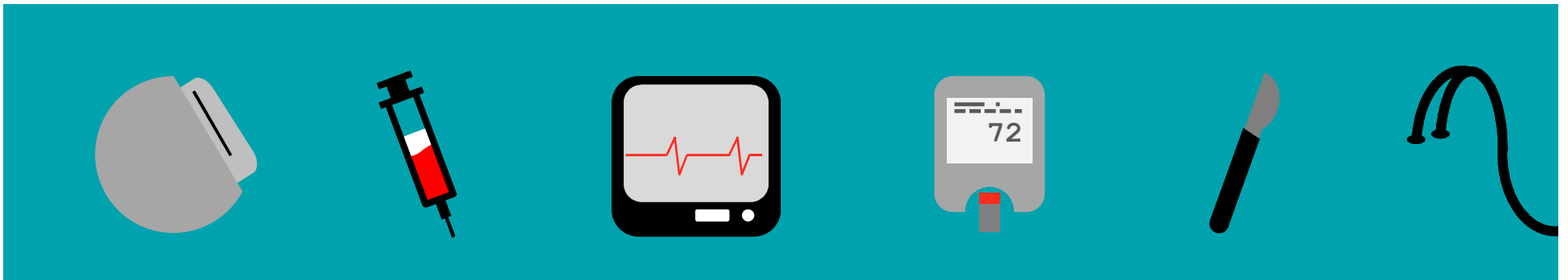
'Combinations'
Product parts must fulfil applicable parts of respective Union legislations



'Plus this'
Device must additionally fulfil other Union legislation

Definition: Medical device and accessories

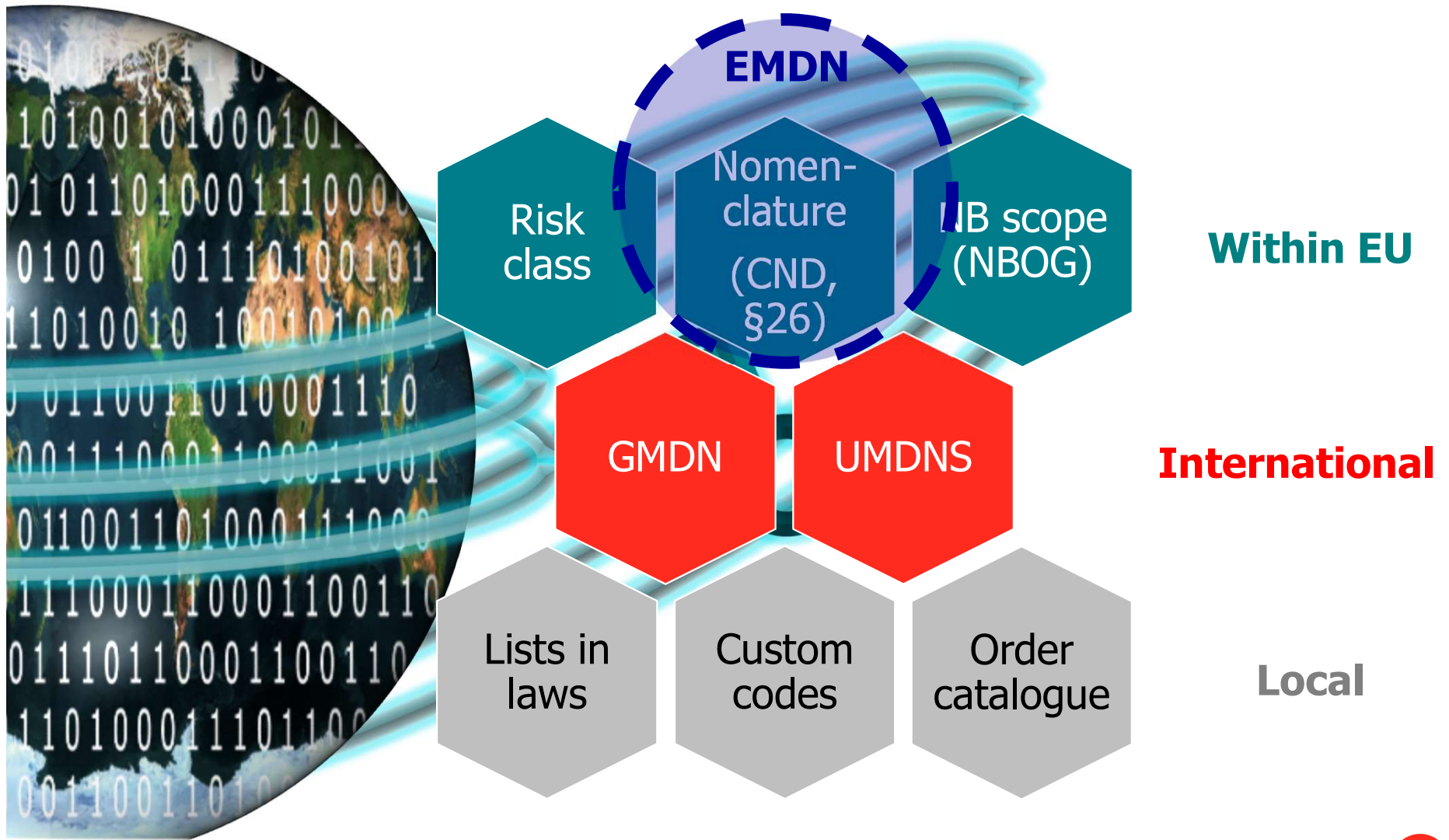
'Medical device' means any instrument, apparatus, appliance, software, implant, reagent, material or other article intended by the manufacturer to be used, alone or in combination, for **human beings** for one or more of the following **specific medical** purposes.



'Accessory for a medical device':

- Enable the medical device(s) to be used, or
- Assist the medical functionality

Different codes for Medical Devices



Is the Notified Body competent?

This depends on:

Legislative Framework

Which Regulation?

Route of Conformity Assessment

Which Annex?

If not:
Certificate
is void!

Products

'MDR'
codes?

MDR Codes: MDCG 2019-14, Explanatory note on MDR codes December 2019

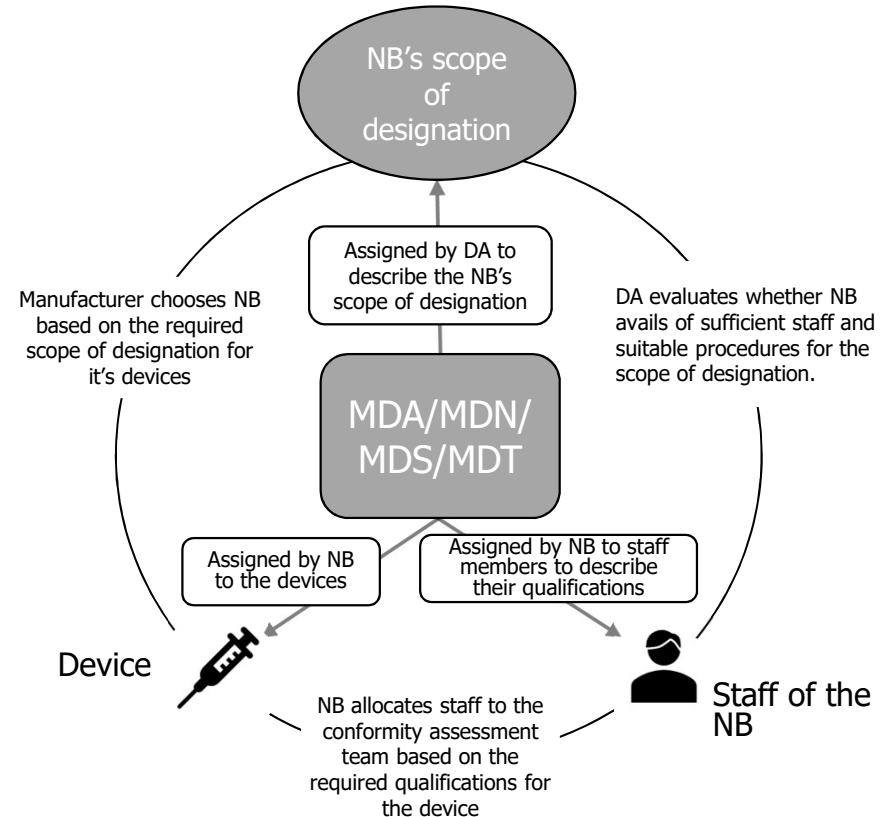
Main use to define the notified body scope of designation

Also used by the notified body to:

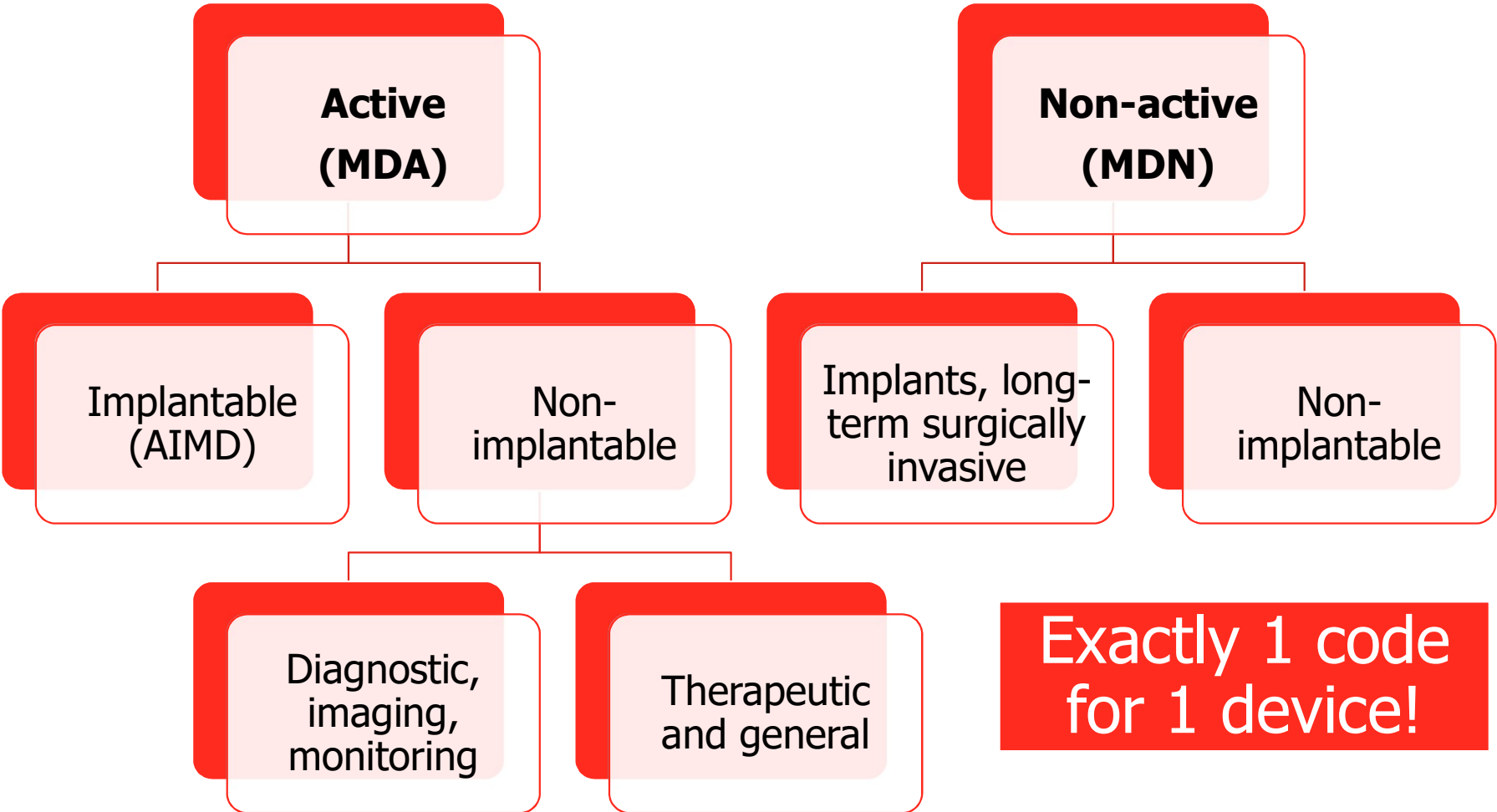
- Describe the individual qualification of the NBs staff members
- Describe the qualification required for assessing a device

Codes assigned to devices within the conformity assessment procedure

Reference: Commission Implementing Regulation (EU) 2017/2185.



Code on design/intended purpose (MD*)

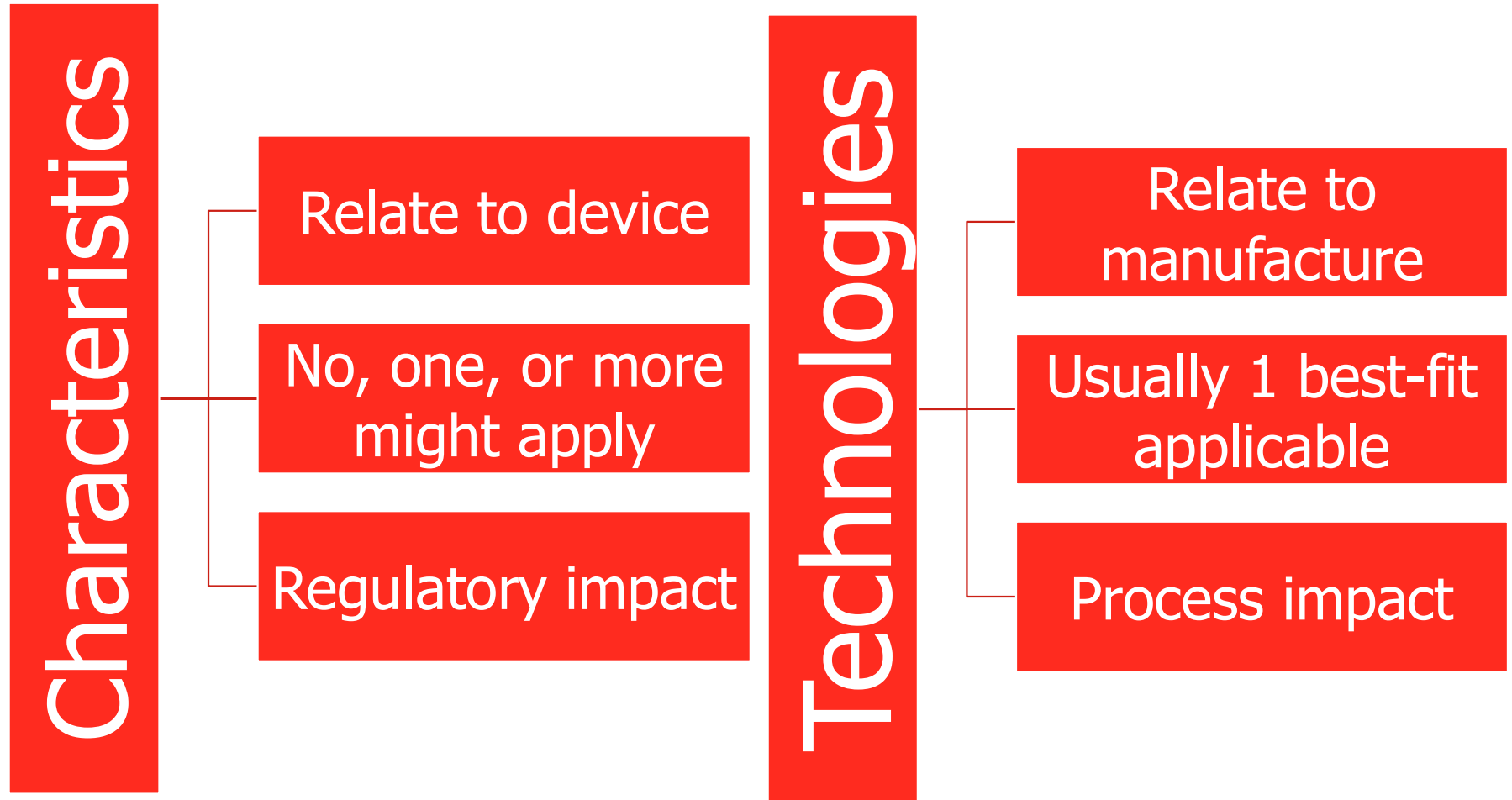


Reference: Commission Implementing Regulation (EU) 2017/2185.

Horizontal codes for designation of NB

MDS

MDT



Determine risk class and applicable MDR codes

1	Check device is within scope of MDR	(Chapter I, §1, §2, Annex XVI)
2	Determine risk class of device and applicable MDR codes	(Chapter V, §51 => Annex VIII) (Article 38, Regulation 2017/2185)
3	Select conformity assessment procedure	(Chapter V, §52)
4	Maintain QMS	(Chapter II, §10)
5	Identify applicable safety and performance requirements	(Chapter II, §5, Annex I)
6	Assemble Technical Documentation	(Annex I, Annex II, Annex XIV)
7	Apply conformity assessment procedure	(Annexes IX, X, XI A or XI B)
8	Assign Unique Identifications	(Chapter III, §27-34, Annex VI)
9	Complete Declaration of Conformity and affix CE mark	(Chapter II, §19 =>Annex IV) (Chapter II, §20, =>Annex V)
10	Post-market surveillance and updates	(Chapter VII, §83 to 86, Annex XIV => Annex III)

22 rules in the MDR: Annex VIII

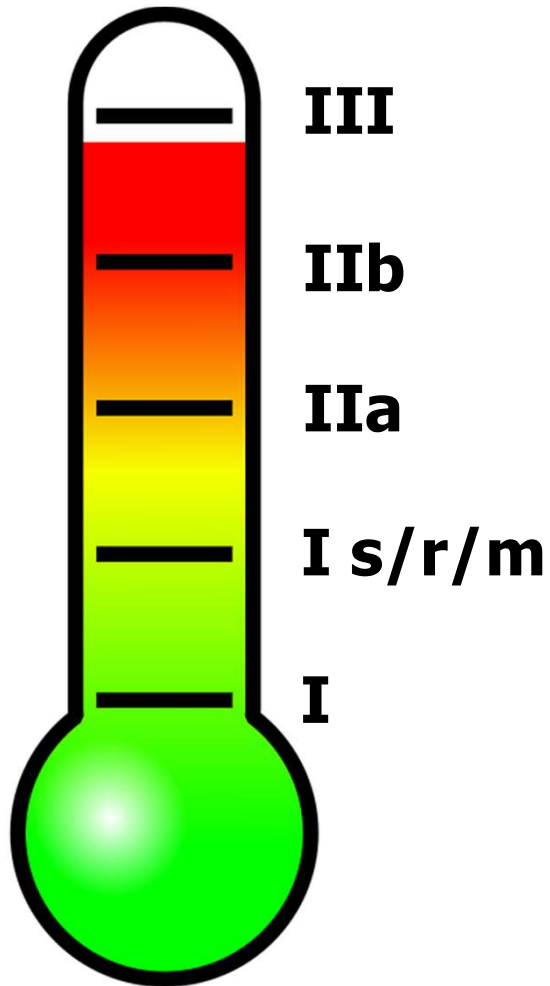
The table below sorts the classification rules.

Rules	Examples					
1 to 4 non- invasive						
5 to 8 invasive						
9 to 13 active						
14 to 22 special rules						

Classification rules: Criteria in the MDR

Criteria	Possible instances e.g.
Invasiveness	Indirect contact – skin – invasive – surgically invasive
Duration of use	Transient – short term – long term - implantable
Energy	Passive – active
Overall intention	Diagnostic – therapeutic – closed loop
Special concerns	Materials composition – indication of use.

Risk-based classification under MDR



The higher the risk,
the more scrutiny

s/r/m
=
sterile
re-usable
measuring

Select conformity assessment procedure

1	Check device is within scope of MDR	(Chapter I, §1, §2, Annex XVI)
2	Determine risk class of device and applicable MDR codes	(Chapter V, §51 => Annex VIII) (Article 38, Regulation 2017/2185)
3	Select conformity assessment procedure	(Chapter V, §52)
4	Maintain QMS	(Chapter II, §10)
5	Identify applicable safety and performance requirements	(Chapter II, §5, Annex I)
6	Assemble Technical Documentation	(Annex I, Annex II, Annex XIV)
7	Apply conformity assessment procedure	(Annexes IX, X, XI A or XI B)
8	Assign Unique Identifications	(Chapter III, §27-34, Annex VI)
9	Complete Declaration of Conformity and affix CE mark	(Chapter II, §19 => Annex IV) (Chapter II, §20, => Annex V)
10	Post-market surveillance and updates	(Chapter VII, §83 to 86, Annex XIV => Annex III)

Conformity Assessment

What
§2 (40)

The process demonstrating whether the requirements of this Regulation relating to a device have been fulfilled



Devices ...shall be designed and manufactured in such a way that,...., they are suitable for their intended purpose.

How
Annex I (1)

They shall be safe and effective...

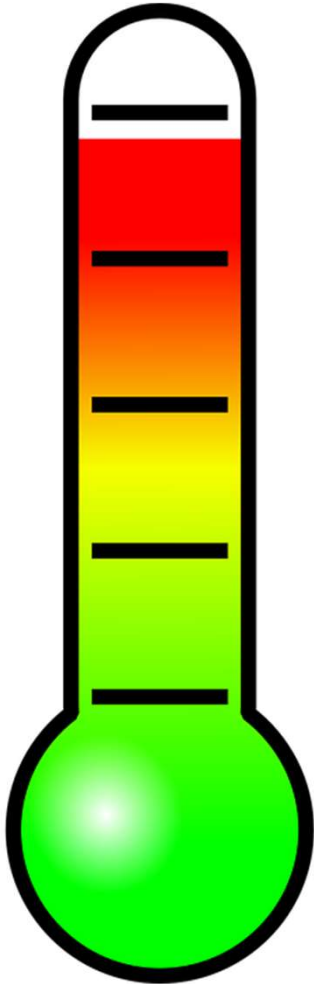
The higher the risk, the more assessment

Sampling increases

Individual devices
Narrowing product families
Broad product families

Assessors accumulate

Commission
Competent Authority
Notified Body
Manufacturer



Conformity assessment procedures...

...always assess the device is both correctly

Designed

and

Manufactured

More than one route may be available for a given classification

Manufacturer chooses the conformity assessment route

NB to verify appropriateness and assess against the chosen annexes

Specific annexes detail how

§52 gives possible combination of annexes depending on the risk class

Quality System Assessment Annexes

Annex IX, excl. Chapter II (Quality Management System):

- Focus on full lifecycle of the device (**Design, manufacture and final inspection**)
- ISO 13485
- Ensures there is a valid design process and that the device is manufactured, tested and inspected in compliance with the technical documentation

Annex XI Part A (Production Quality Assurance):

- Focus on manufacture and final inspection (**excluding design**)
- ISO 13485 (excluding design)
- Ensures device is manufactured, tested or inspected in compliance with the technical documentation

Product Assessment Annexes

Annex IX Chapter II (Assessment of Technical Documentation)

- Technical Documentation submitted for examination
- NB examines documentation
- One-off examination
- + module to demonstrate consistency of manufacture

Annex X (Type Examination)

- Device + documentation submitted for examination
- NB tests device to check it meets a certain 'type' typically described in Harmonised standards
- + examines documentation
- One-off examination
- + module to demonstrate consistency of manufacture

Annex XI Part B (Product Verification)

- NB examines every individual device; Tests typically defined in harmonised standards
- Devices verified against Technical Documentation and EC type examination certificate if applicable

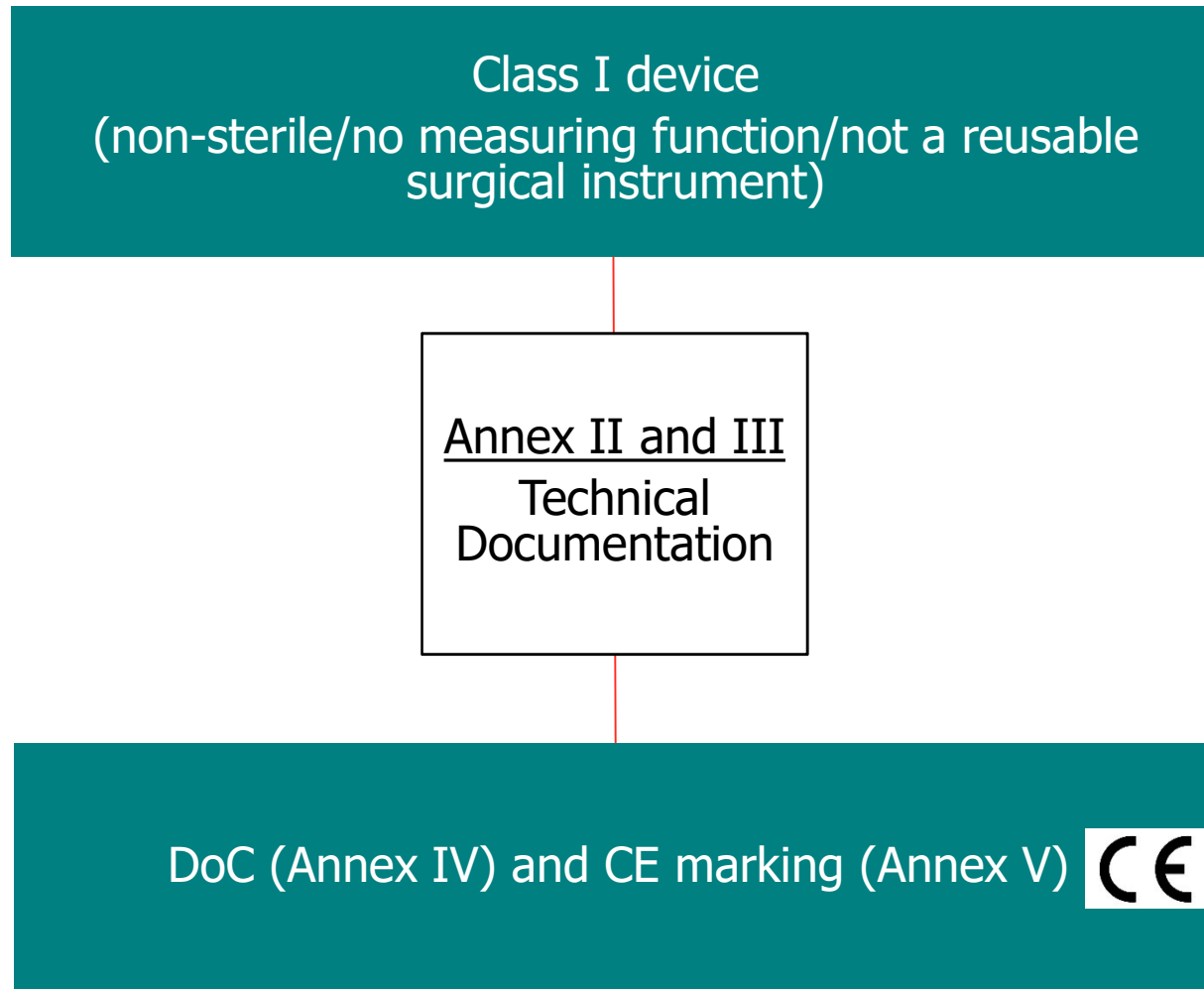
MDD and MDR Conformity Assessment Routes Compared

MDR	MDD	Focus of Annex
Annex IX Chapters I and III Quality Management System	Annex II excl Section 4 Full Quality Assurance	QMS based; Design, Manufacture, Final Inspection
Annex IX Chapter II Technical Documentation	Annex II Section 4 Design Examination	Product based; Documentation review
Annex X Type-Examination	Annex III Type Examination	Product based; Type Examination
Annex XI - Part B Product Verification	Annex IV Verification	Product based; Verification
Annex XI - Part A Production Quality Assurance	Annex V Production Quality Assurance	Product based; Manufacture, Final Inspection
No equivalent	Annex VI Product Quality Assurance	QMS based; Final Inspection
Article 19 + Annex II, III	Annex VII Declaration of Conformity	For class I devices

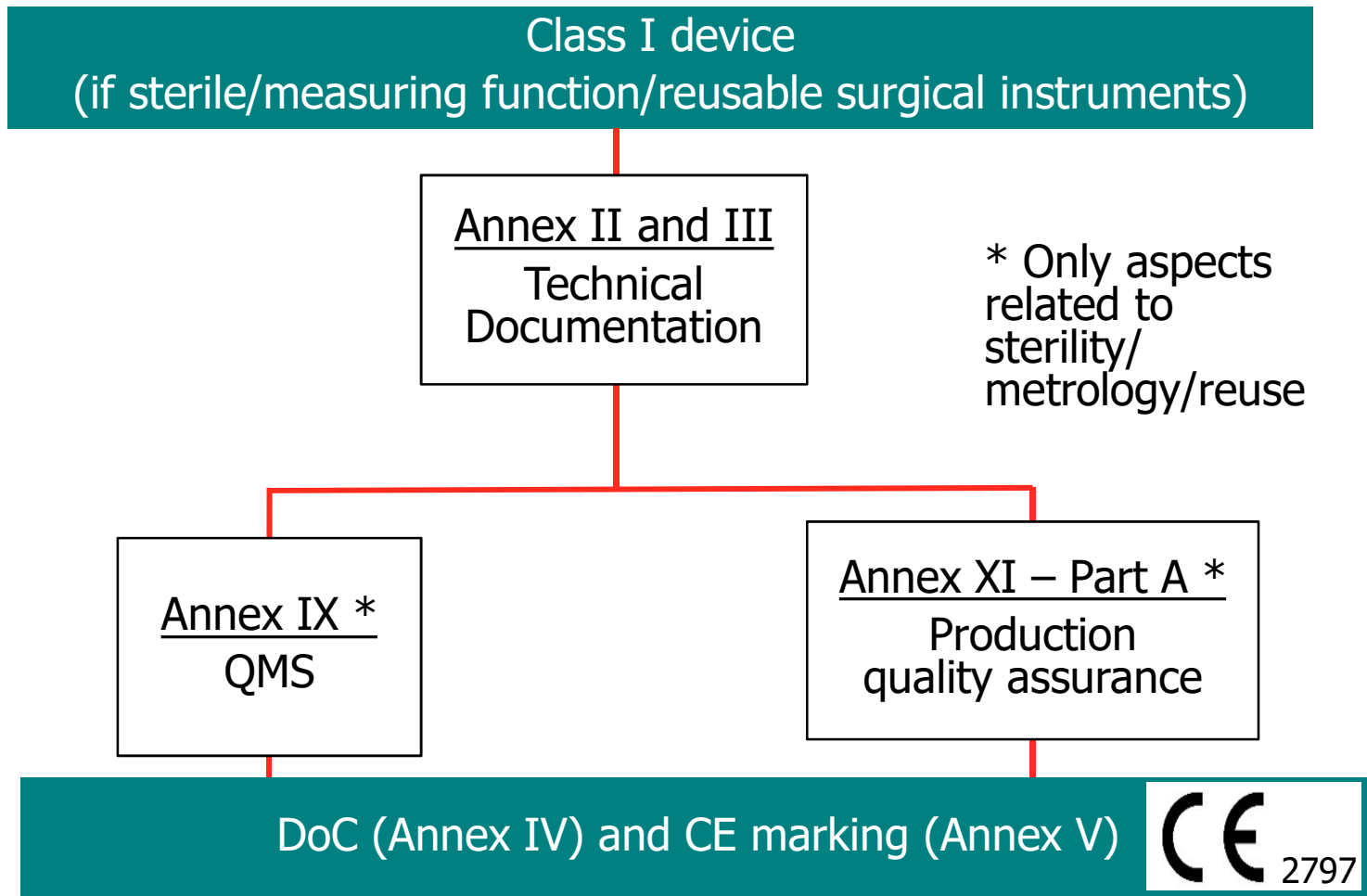
Certificates based on Annex IV of the directive will become void in 2022



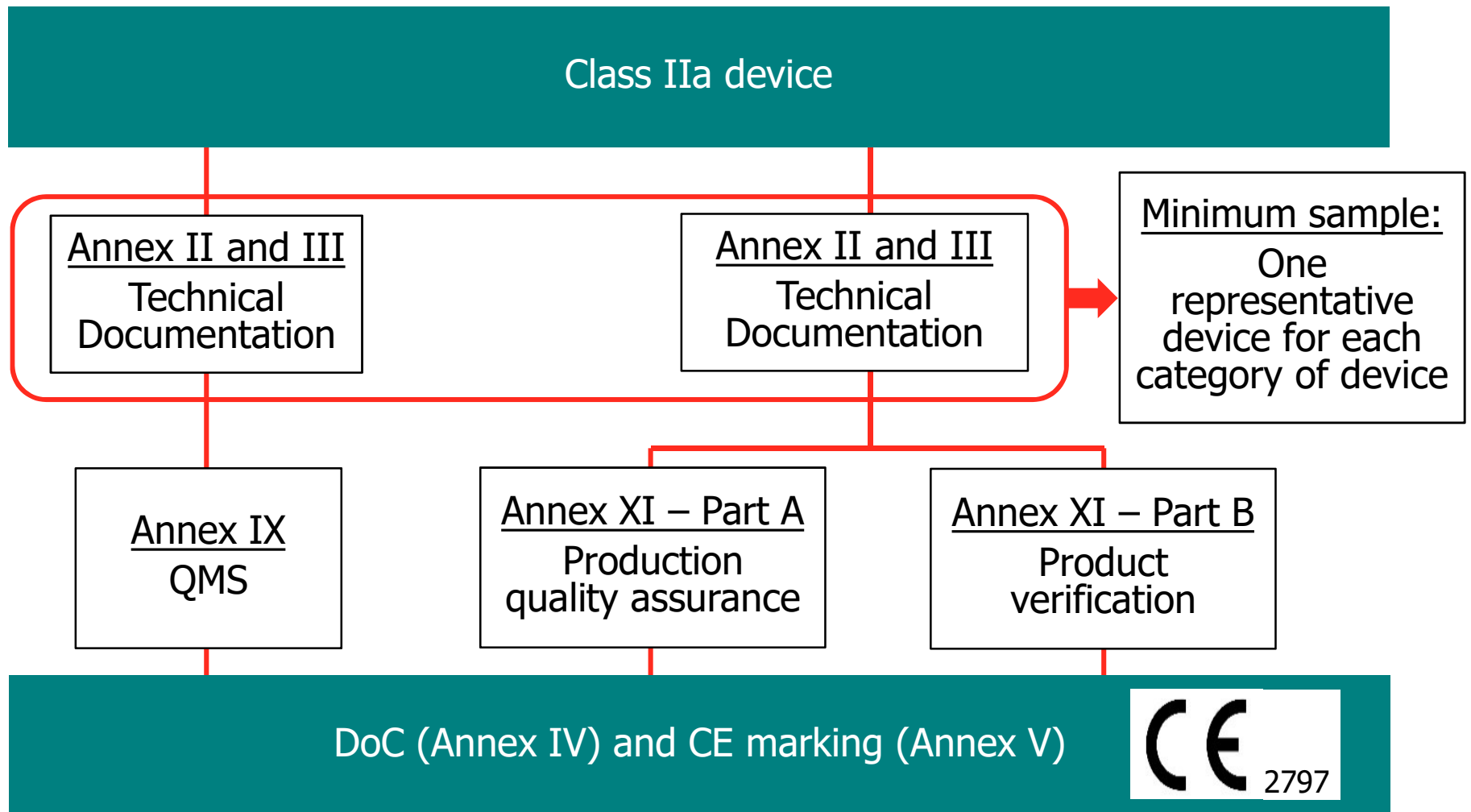
MDR Conformity Assessment Route Class I



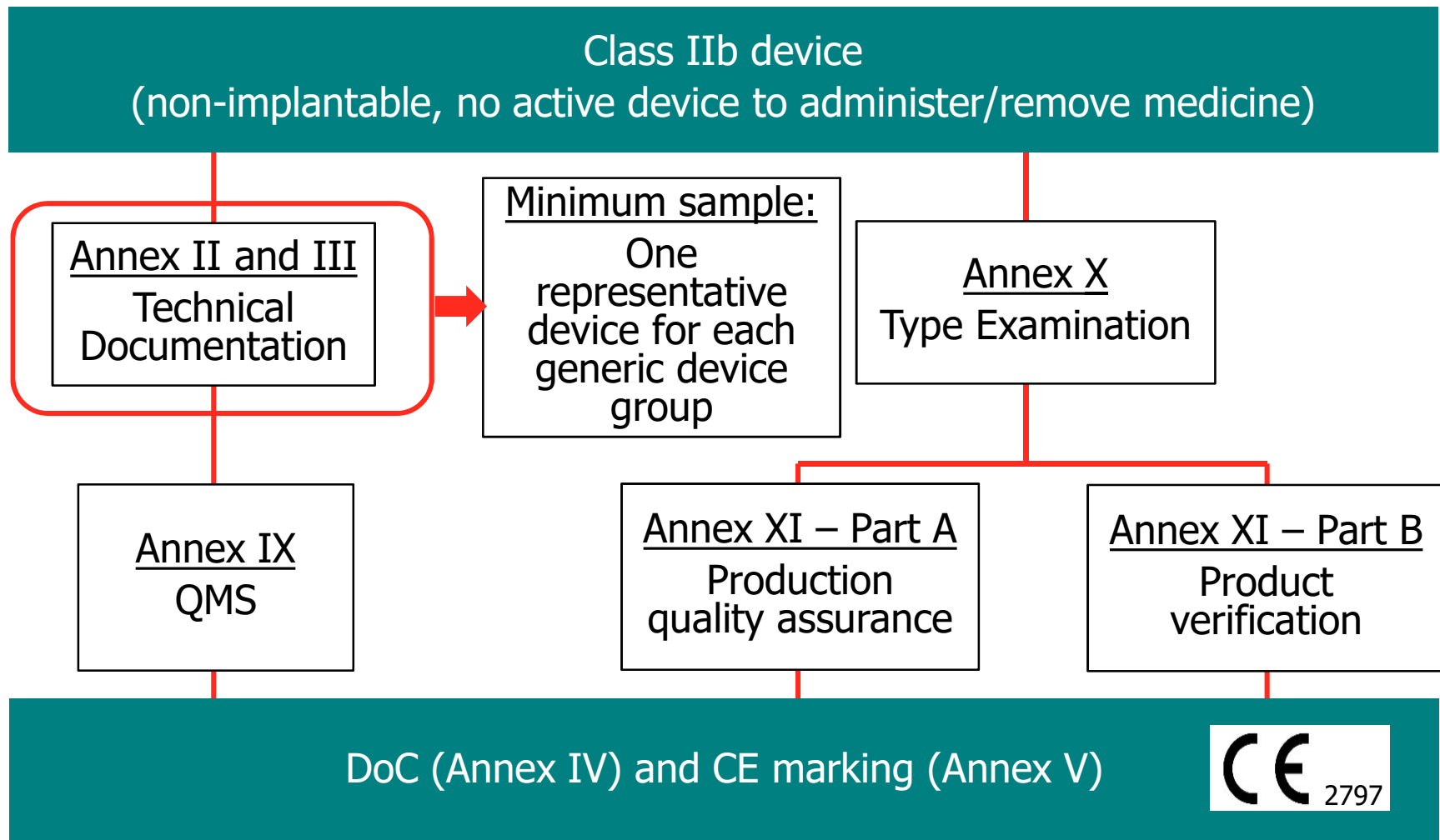
MDR Conformity Assessment Route Class I smr



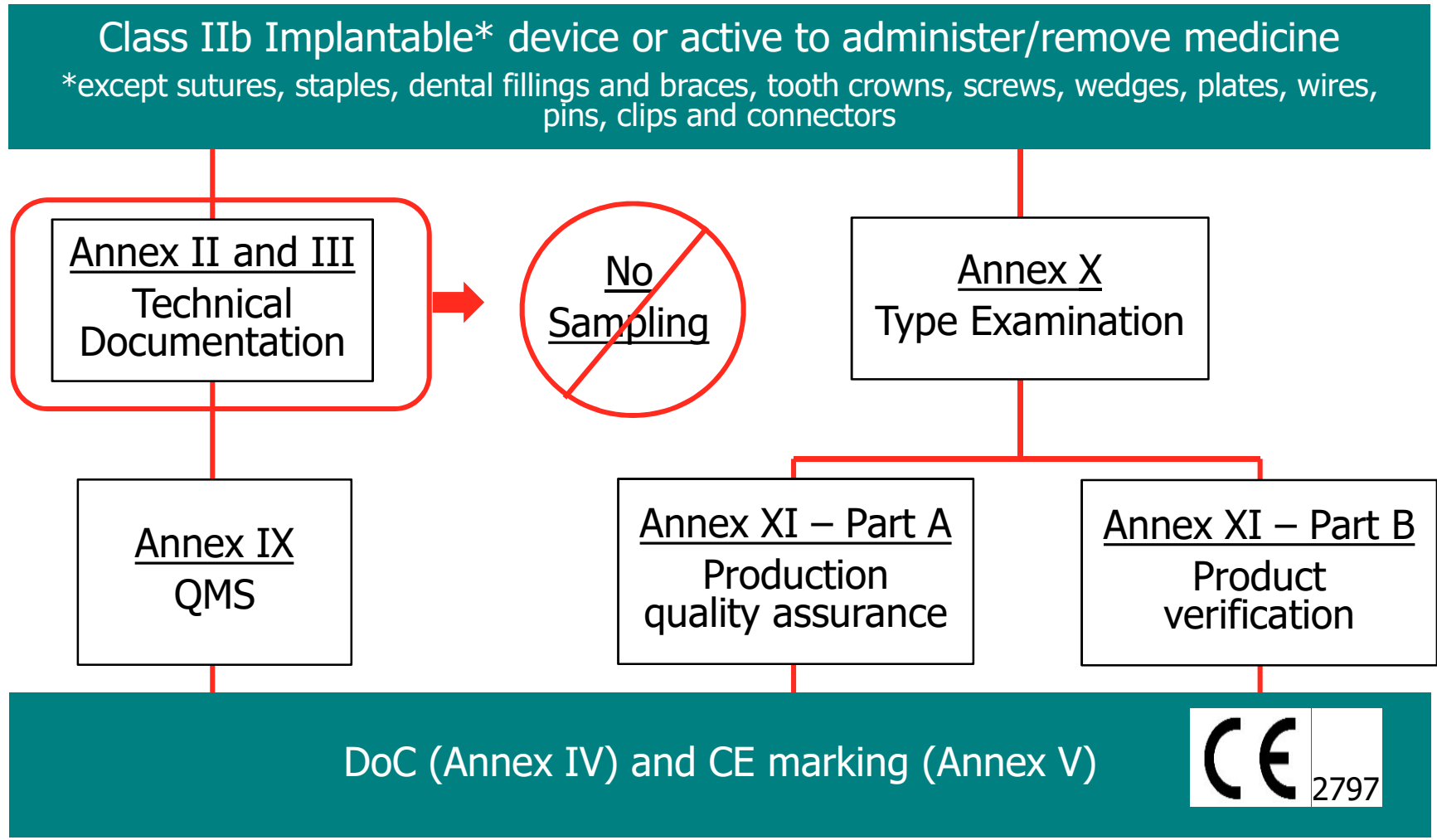
MDR Conformity Assessment Routes Class IIa



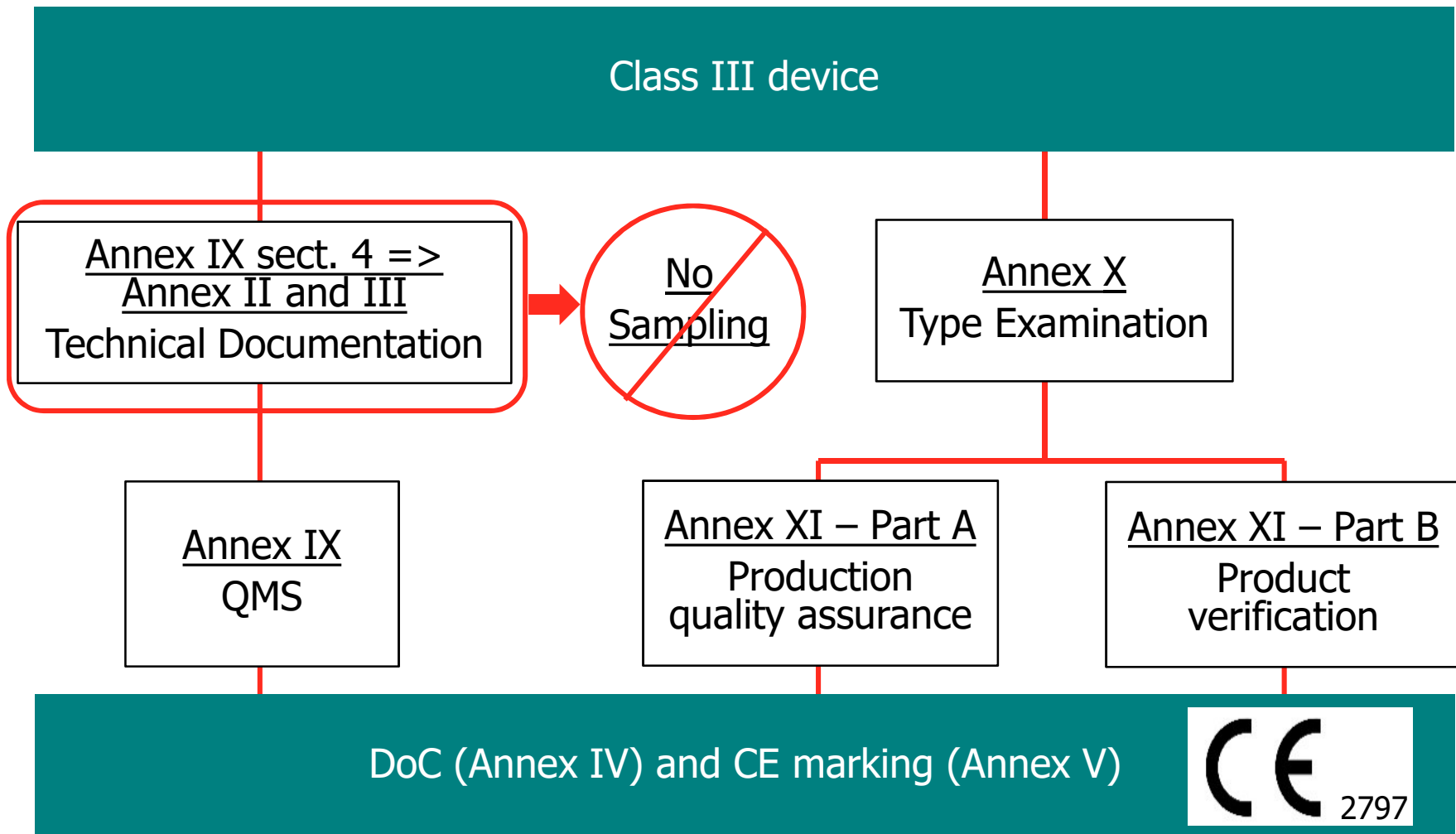
MDR Conformity Assessment Routes Class IIb



MDR Conformity Assessment Routes Class IIb Implantable* device or active to administer/remove medicine



MDR Conformity Assessment Routes Class III Device



MDR Conformity Assessment Route Custom Made Devices (except Class III implantable)

Custom made devices (except Class-III-implantable)

Annex XIII
Documentation
(instead of TD)

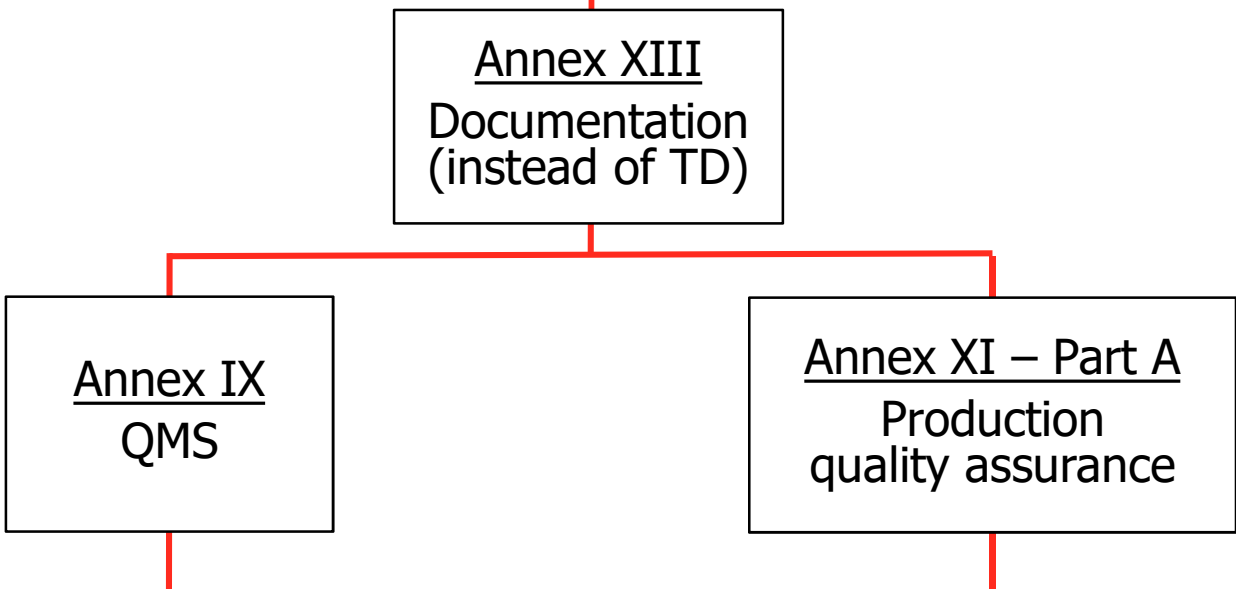
Annex XIV – Part B
Experience gained in post-production
including from PMCF

Name of person authorized to make out prescription, name of healthcare institution and name of particular patient and meets requirements of annex I



MDR Conformity Assessment Route Class III Implantable Custom Made Devices

Class III Implantable – Custom made devices



Name of particular patient, name of person authorized to make out prescription and name of healthcare institution and meets requirements of annex I



All Routes to Conformity require:

Technical documentation controlled




Sub-contractors/suppliers defined and controlled

Conformity assessment by a NB (except Class I, Custom-made non class III implantable devices)

Higher the risk -> More involvement of NB + involvement of other entities (CA, Expert panels etc) for some high-risk devices

All routes should give equivalent assurance of compliance

Specific additional procedures under the MDR: Additional actors to involve

Classified as	Incorporates	Composed of	Manufactured using
<p>Implantable class III</p> <p>Commission  Expert panel</p> <p>Active IIb to administer/remove medicinal product</p> <p>Commission  Expert panel</p> <p>Article 54 Clinical Evaluation Consultation Procedure (CECP)</p>	<p>Medicinal substances</p> <p>Medicinal Product authority (local or EMA)</p> <p>Blood derivatives</p> <p>EMA as Medicinal Product authority</p>	<p>Systematically absorbed substances</p> <p>Medicinal Product authority (local or EMA)</p>	<p>Cells or tissues of human origin</p> <p>Competent authority for cells/tissue</p> <p>Cells or tissues of animal origin</p> <p>Coordinating competent authority</p> <p> CA of member states (see 722/2012/EU)</p>
<p>Don't forget about eventual combination products!</p>			

Amend and maintain QMS

1	Check device is within scope of MDR	(Chapter I, §1, §2, Annex XVI)
2	Determine risk class of device and applicable MDR codes	(Chapter V, §51 => Annex VIII) (Article 38, Regulation 2017/2185)
3	Select conformity assessment procedure	(Chapter V, §52)
4	Maintain QMS	(Chapter II, §10)
5	Identify applicable safety and performance requirements	(Chapter II, §5, Annex I)
6	Assemble Technical Documentation	(Annex I, Annex II, Annex XIV)
7	Apply conformity assessment procedure	(Annexes IX, X, XI A or XI B)
8	Assign Unique Identifications	(Chapter III, §27-34, Annex VI)
9	Complete Declaration of Conformity and affix CE mark	(Chapter II, §19 => Annex IV) (Chapter II, §20, => Annex V)
10	Post-market surveillance and updates	(Chapter VII, §83 to 86, Annex XIV => Annex III)

All manufacturers need for conformity



Quality and Risk Management System

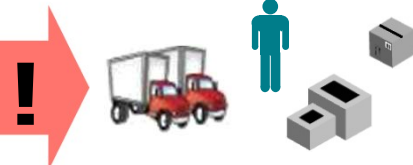
§10 (2) & (9)

- Annex I (3)

In case also

- Annex IX *or*
- Annex XI, A

Includes
External resources



Technical File

§10 (4)*

- Annex II
- Annex III

- *for custom made:
§10(5)
- Annex XIII (2)

Post-market: Vigilance, Follow-up

§10 (10) & (13)

- §83 (PMS)
- §87, §88 (reporting)
- §61, Annex XIV (PMCF)

- *for custom made:
- Annex XIII (5)

QMS Audits



Regular visits

- Announced
- Scheduled
- E.g. annually



Additional visits

- Announced
- On application
- E.g. extensions, significant changes



Unannounced audit visits

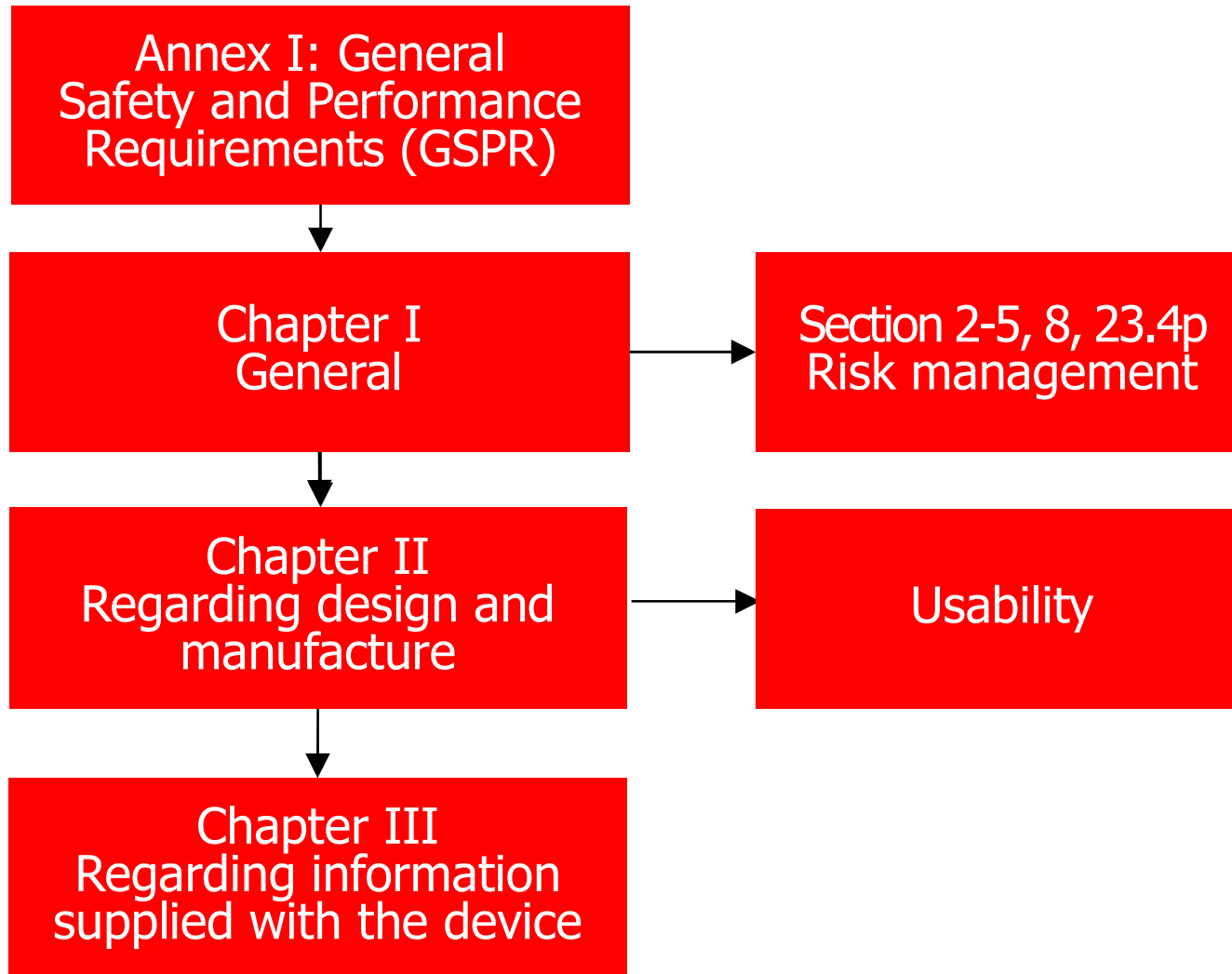
- Unannounced
- At random
- To verify device conforms to Tech. Doc.

By default at the premise of manufacturer or external partner

Identify applicable safety and performance requirements

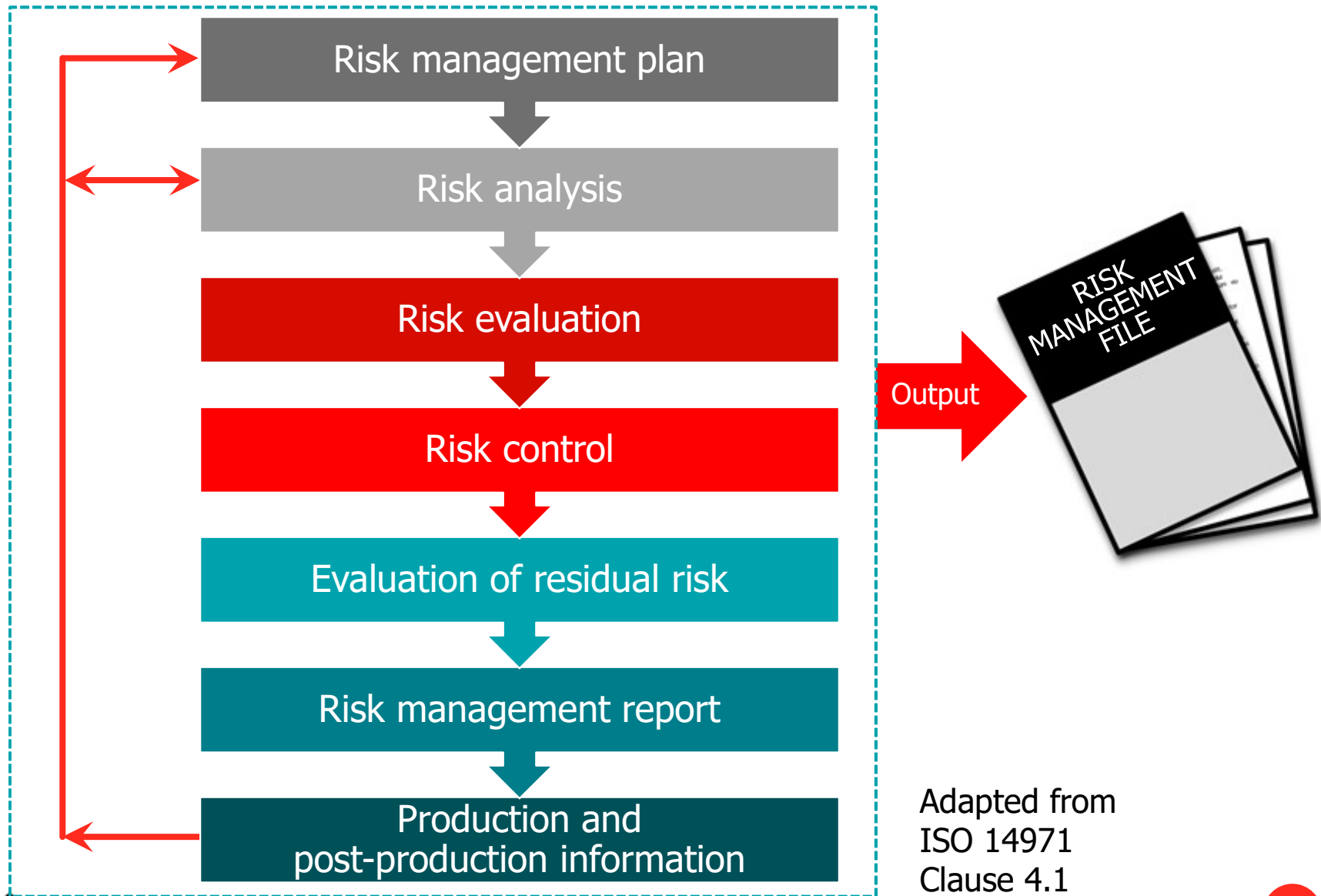
1	Check device is within scope of MDR	(Chapter I, §1, §2, Annex XVI)
2	Determine risk class of device and applicable MDR codes	(Chapter V, §51 => Annex VIII) (Article 38, Regulation 2017/2185)
3	Select conformity assessment procedure	(Chapter V, §52)
4	Maintain QMS	(Chapter II, §10)
5	Identify applicable safety and performance requirements	(Chapter II, §5, Annex I)
6	Assemble Technical Documentation	(Annex I, Annex II, Annex XIV)
7	Apply conformity assessment procedure	(Annexes IX, X, XI A or XI B)
8	Assign Unique Identifications	(Chapter III, §27-34, Annex VI)
9	Complete Declaration of Conformity and affix CE mark	(Chapter II, §19 =>Annex IV) (Chapter II, §20, =>Annex V)
10	Post-market surveillance and updates	(Chapter VII, §83 to 86, Annex XIV => Annex III)

All medical devices must fulfil...



...if requirements are applicable

Risk management process



Information supplied with the device

For the user

What to consider...

- Accessible
- Readable
- Understandable
- Relevant



Technical knowledge

Experience

Education, training

Language proficiency

Particular device and intended purpose

Situation and objective

Environment

Types of information supplied with the device

Labels



- On device
- Exempt possible: If not possible/appropriate, shift to package

Packaging



- On sterile packaging

STERILE

Instruction for use



- Together with device
- Exempt possible: Class I/IIa
- Exempt for eIFU (207/2012)

Implant card



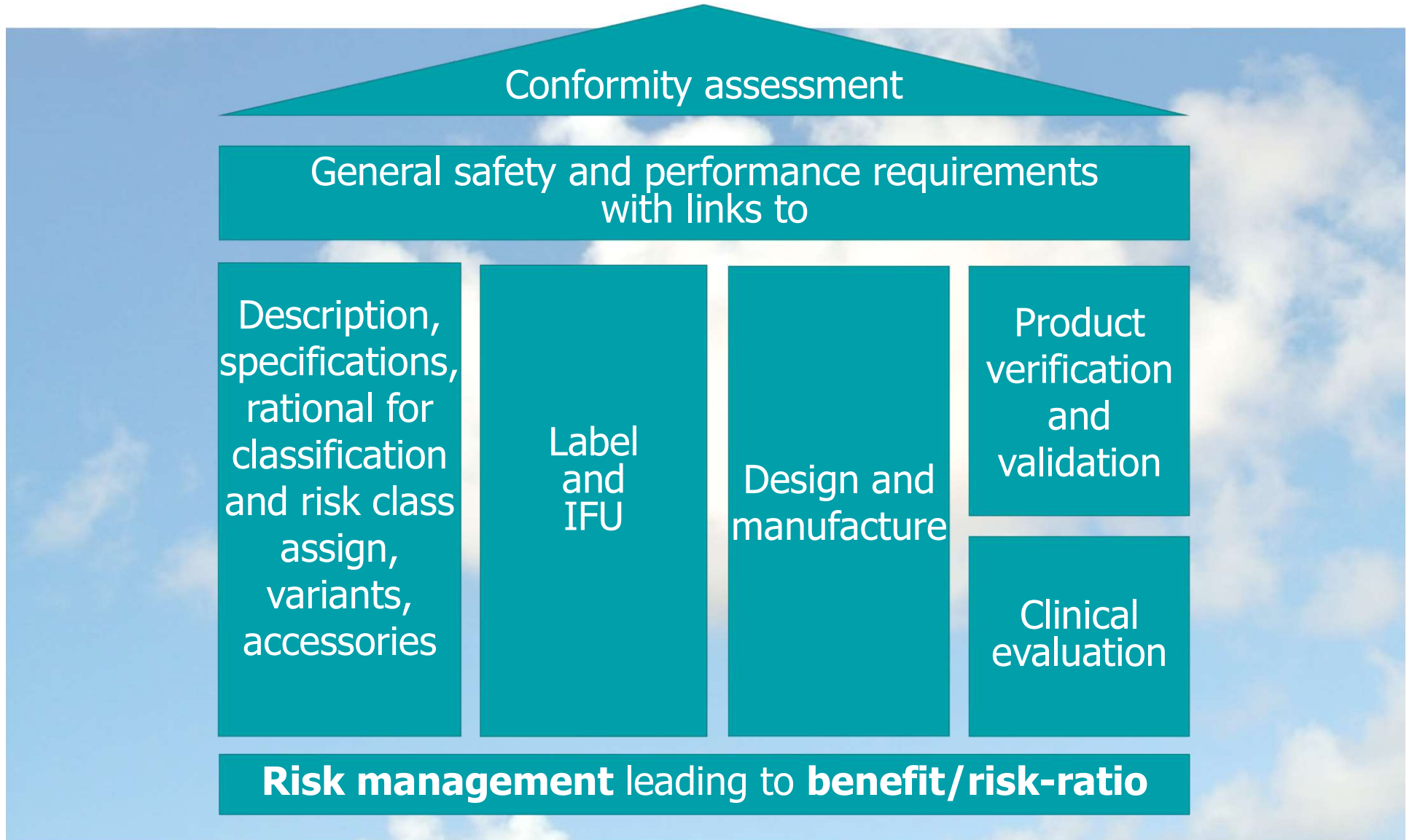
- Together with device
- See §18, not annex I
- Some items must be on card, others delivered with device
- Website obligatory

Certain information must be on manufacturer's website, if any

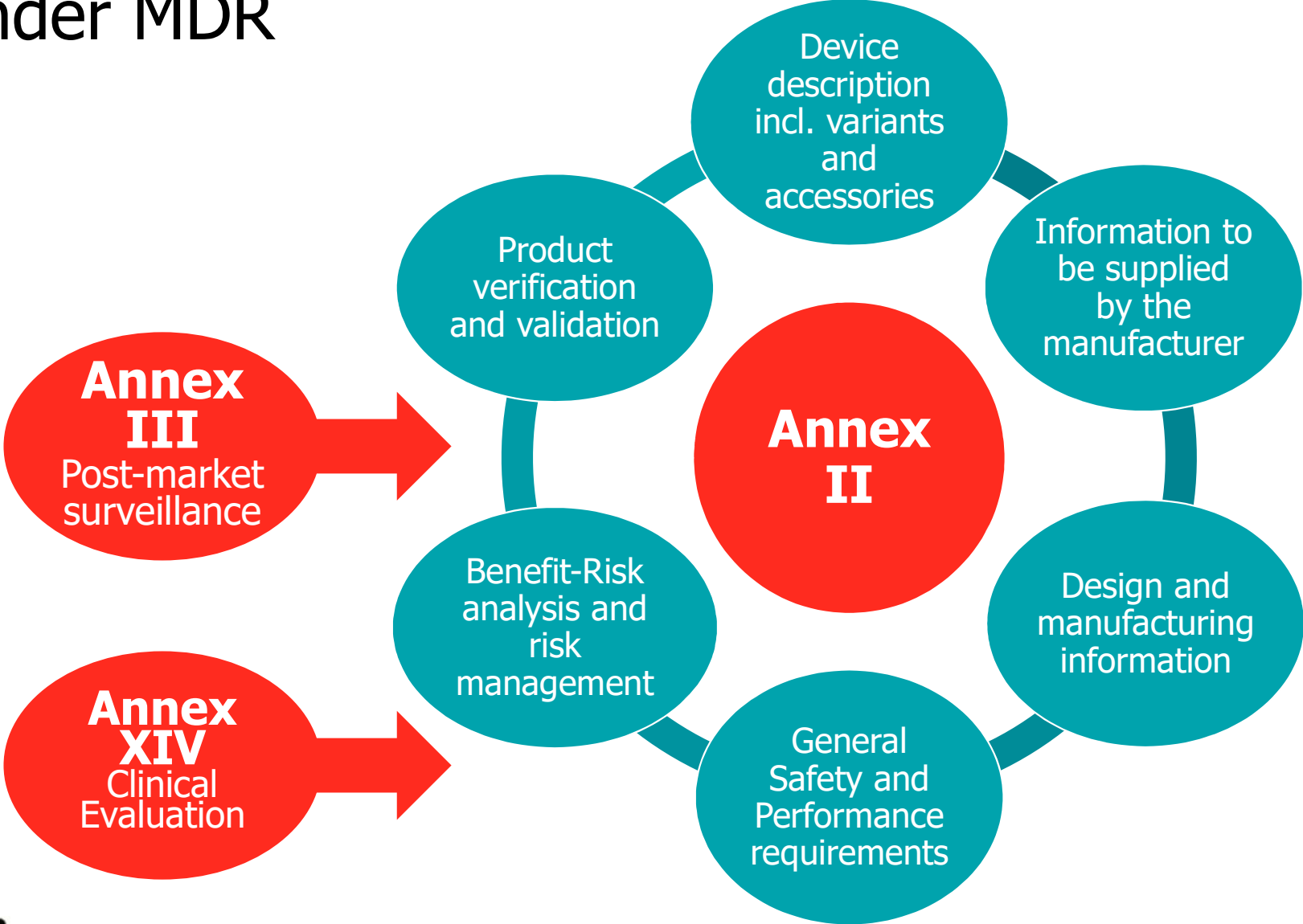
Assemble Technical Documentation

1	Check device is within scope of MDR	(Chapter I, §1, §2, Annex XVI)
2	Determine risk class of device and applicable MDR codes	(Chapter V, §51 => Annex VIII) (Article 38, Regulation 2017/2185)
3	Select conformity assessment procedure	(Chapter V, §52)
4	Maintain QMS	(Chapter II, §10)
5	Identify applicable safety and performance requirements	(Chapter II, §5, Annex I)
6	Assemble Technical Documentation	(Annex I, Annex II, Annex XIV)
7	Apply conformity assessment procedure	(Annexes IX, X, XI A or XI B)
8	Assign Unique Identifications	(Chapter III, §27-34, Annex VI)
9	Complete Declaration of Conformity and affix CE mark	(Chapter II, §19 => Annex IV) (Chapter II, §20, => Annex V)
10	Post-market surveillance and updates	(Chapter VII, §83 to 86, Annex XIV => Annex III)

Pillars of the Technical Documentation



Content of a Technical Documentation under MDR



Apply conformity assessment procedure

1	Check device is within scope of MDR	(Chapter I, §1, §2, Annex XVI)
2	Determine risk class of device and applicable MDR codes	(Chapter V, §51 => Annex VIII) (Article 38, Regulation 2017/2185)
3	Select conformity assessment procedure	(Chapter V, §52)
4	Maintain QMS	(Chapter II, §10)
5	Identify applicable safety and performance requirements	(Chapter II, §5, Annex I)
6	Assemble Technical Documentation	(Annex I, Annex II, Annex XIV)
7	Apply conformity assessment procedure	(Annexes IX, X, XI A or XI B)
8	Assign Unique Identifications	(Chapter III, §27-34, Annex VI)
9	Complete Declaration of Conformity and affix CE mark	(Chapter II, §19 => Annex IV) (Chapter II, §20, => Annex V)
10	Post-market surveillance and updates	(Chapter VII, §83 to 86, Annex XIV => Annex III)

Conformity assessment procedures...

...always assess the device is both correctly:

Designed

and

Manufactured

Specific annexes detail how

§52 gives possible combination of annexes
depending on the risk class

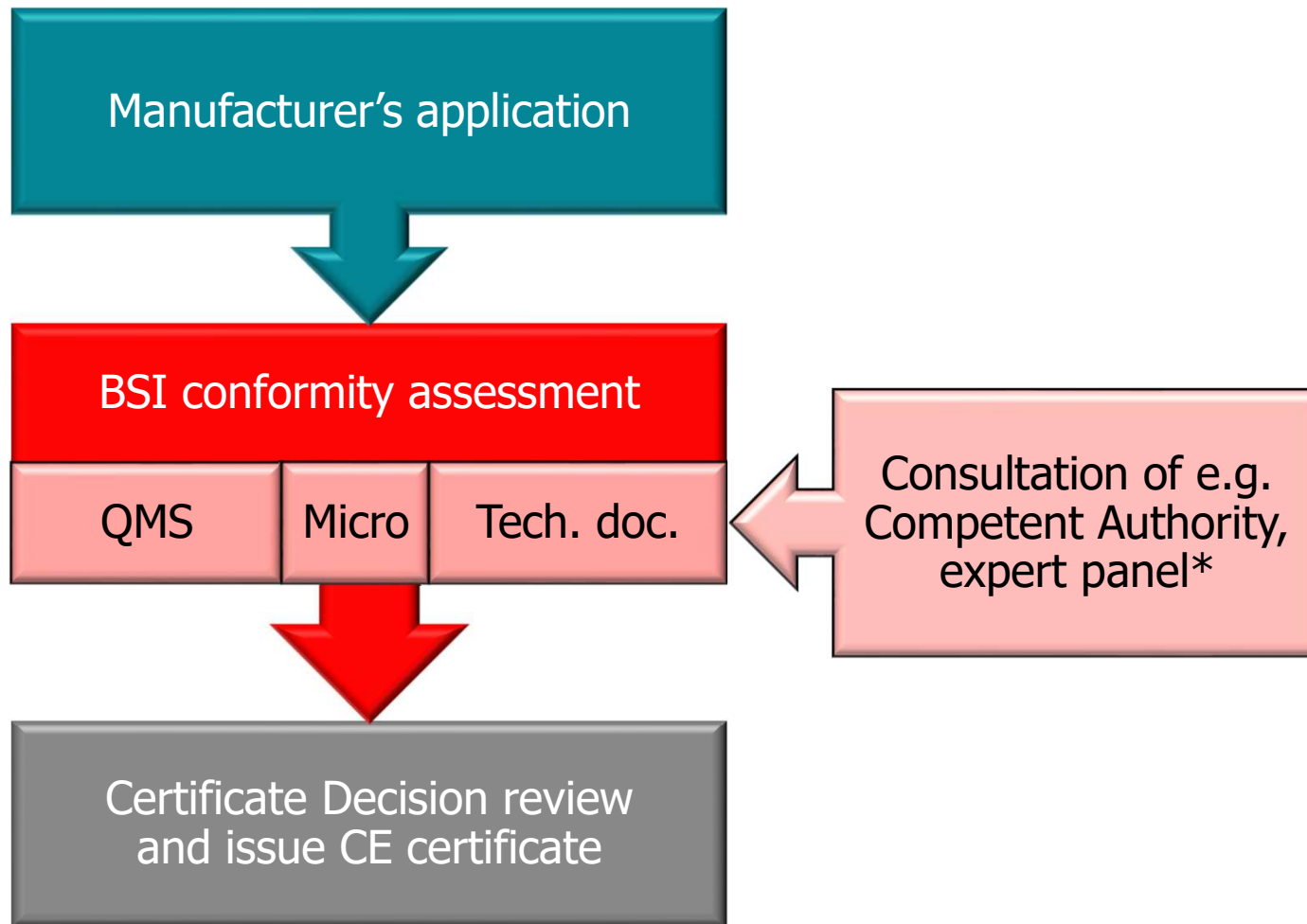
Sampling Class IIa and Class IIb devices for the assessment of the technical documentation

- MDCG Guidance published 11 December 2019
 - MDCG 2019-13 Guidance on sampling of MDR Class IIa / Class IIb and IVDR Class B / Class C devices for the assessment of the technical documentation
- <https://ec.europa.eu/docsroom/documents/38669>
- Category of devices (IIa)
 - the relevant MDA/MDN codes (MDR) according to Regulation (EU) 2017/2185 on the codes for the designation of notified bodies
- Generic device group (IIb non-implantable)
 - the 4th level of the European Nomenclature on Medical Devices (EMDN) (i.e. combination of one letter plus 6 digits)

Sampling Regimes for Conformity Assessment of Class IIa and Class IIb Devices

- **Class IIa Devices**: at Least one device from each device category reviewed prior to QMS certificate issue
- **Class IIb Devices**: at Least one device from each generic device group reviewed prior to QMS certificate issue
- After issuing the certificate, the notified body will **continue to assess** technical documentation in line with **the sampling plan**
- Surveillance assessment must include an assessment of the technical documentation which means that **at least one technical documentation** must be reviewed each year
- **Entire device range** must be covered during the period of validity of the certificates.
 - **Sample and assess** technical documentation between the issue of a certificate and its expiry date of
 - At least **one device** per category **for Class IIa**
 - At least **one device** per generic device group **for Class IIb**

Notified Body Annex IX conformity assessment process of BSI as an example



* Only if other actors must be involved

Surveillance of Technical Documentation



Sampling

- Announced
- Scheduled
- E.g. annually



Initial and Changes

- Announced
- On application
- E.g. initial, extensions, significant changes



Unannounced audit visits

- Unannounced
- At random
- To verify device conforms to Tech. Doc.

By default at the premise of manufacture or external partner

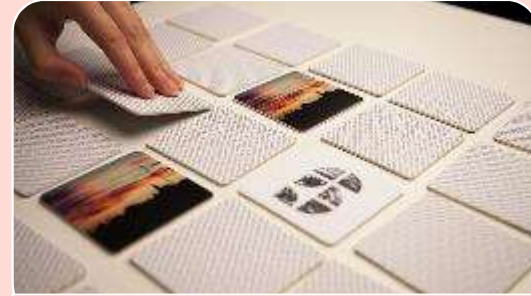
Will the technical file work?



Manually?



Easy play?



Memory?

Unambiguous

Up-to-date

Readily
searchable

Clear

Organized

Assign unique identifications

1	Check device is within scope of MDR	(Chapter I, §1, §2, Annex XVI)
2	Determine risk class of device and applicable MDR codes	(Chapter V, §51 => Annex VIII) (Article 38, Regulation 2017/2185)
3	Select conformity assessment procedure	(Chapter V, §52)
4	Maintain QMS	(Chapter II, §10)
5	Identify applicable safety and performance requirements	(Chapter II, §5, Annex I)
6	Assemble Technical Documentation	(Annex I, Annex II, Annex XIV)
7	Apply conformity assessment procedure	(Annexes IX, X, XI A or XI B)
8	Assign Unique Identifications	(Chapter III, §27-34, Annex VI)
9	Complete Declaration of Conformity and affix CE mark	(Chapter II, §19 =>Annex IV) (Chapter II, §20, =>Annex V)
10	Post-market surveillance and updates	(Chapter VII, §83 to 86, Annex XIV => Annex III)

European database on medical devices: §33

EUDAMED

Electronic system on registration of devices: Article 29

Electronic system on NBs and certificates: Article 57

(subsidiaries, experts, notified bodies, certificates)

+ **Summary of safety and performance**

Electronic system on vigilance and PMS: Article 92

(serious incidents, FSCA, periodic summary reports, trend reports FSN)

+ **Periodic Safety Update Report (PSUR)**

Electronic system on market surveillance: Article 100

(surveillance activities, devices presenting an unacceptable risk, non-compliant products, preventive health protection measures)

Electronic system on clinical investigation: Article 73

(sponsors, description of investigational device, status, adverse events)

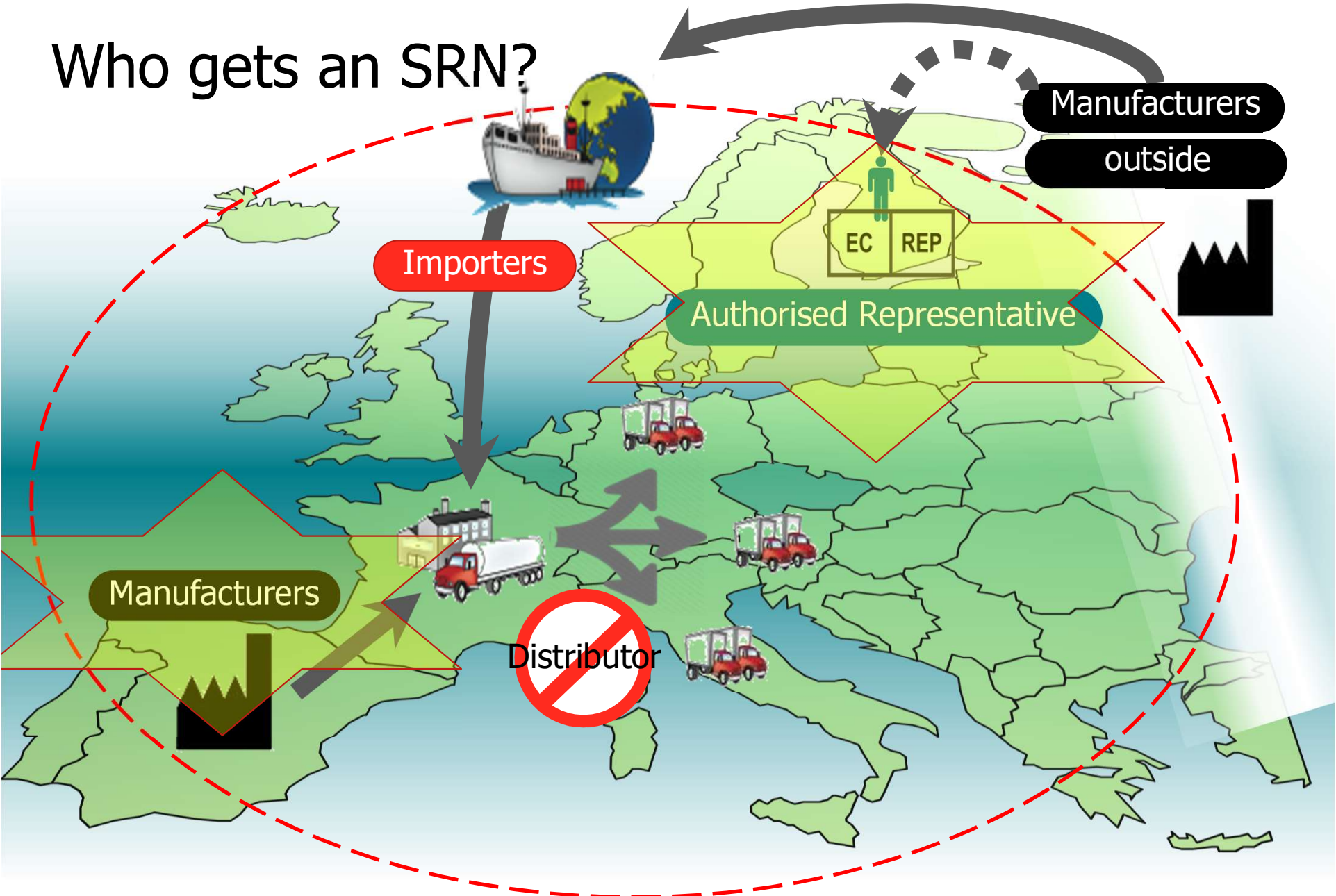
UDI database: Article 28

Electronic system on registration – Economic operators (SRN): Article 30

**Delayed
Until May
2022**

https://ec.europa.eu/growth/sectors/medical-devices/new-regulations/eudamed_en

Who gets an SRN?



UDI for devices

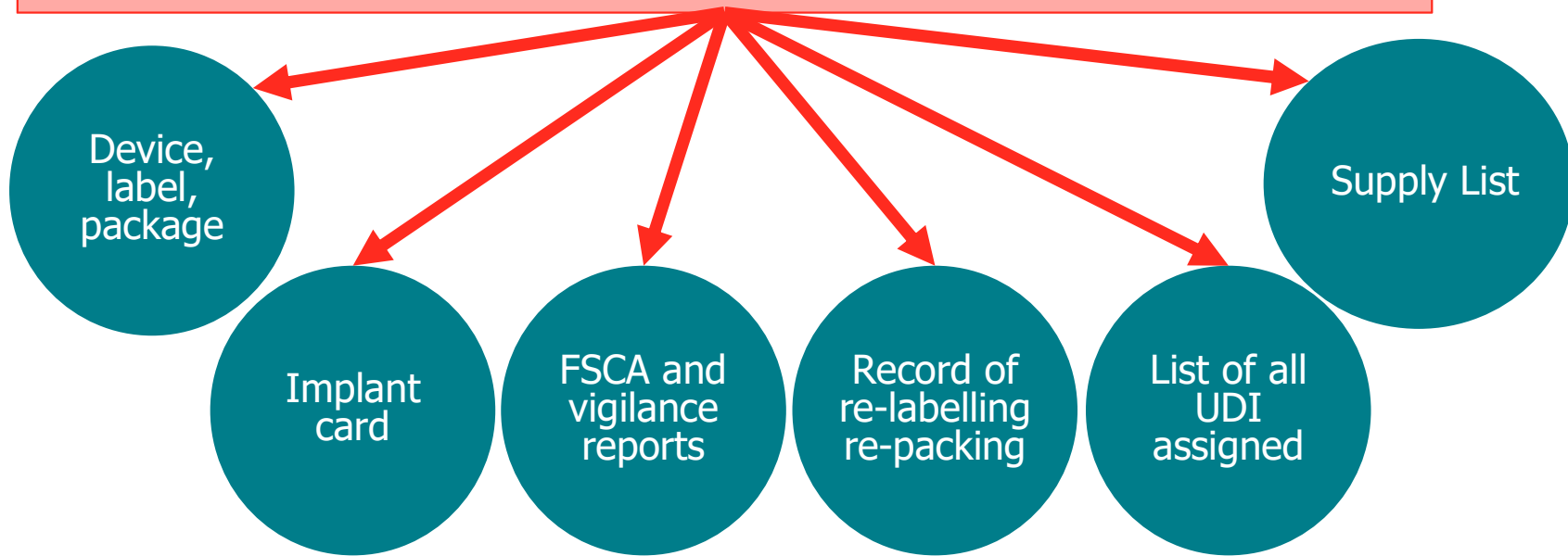
UDI – DI
'Device Identifier'
Specific to a model

UDI – PI
'Production Identifier'
Specific for LOT/batch/series



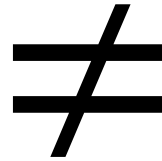
Shipping container

UDI 'Unique Device Identifier'



Difference in meaning

Basic
UDI-DI
identifies
Device
(group)



UDI-DI
ensures
identification
and
traceability of
a device

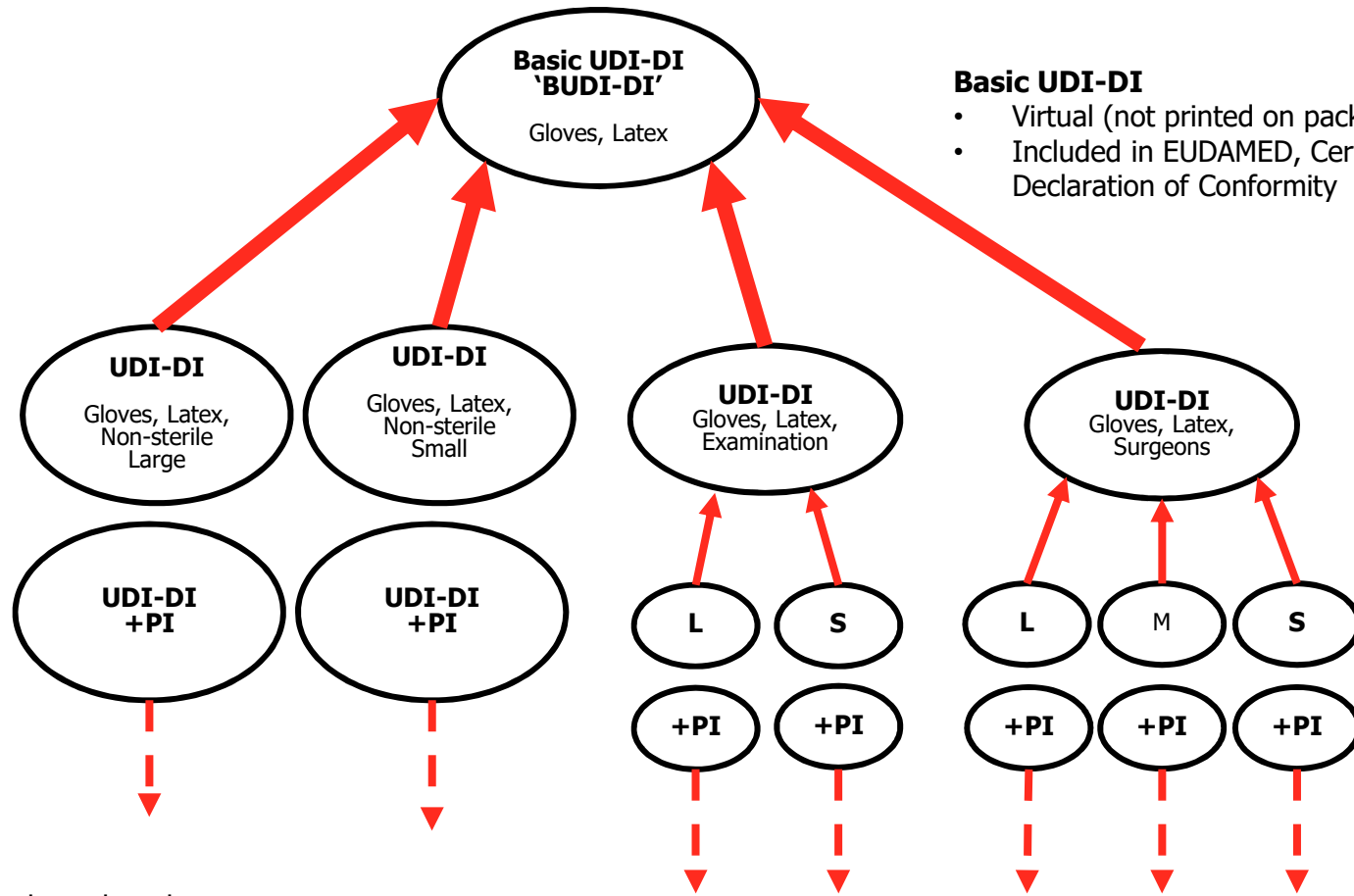
Connects devices with same:

- Intended purpose
- Risk class, and
- Essential manufacturing and design characteristics

- On device/label/packaging
- New one, if different name, trade name, device version, models, etc.

Each UDI-DI has exactly one Basic UDI-DI

Basic UDI-DI versus UDI DI



Basic UDI-DI

- Virtual (not printed on packaging)
- Included in EUDAMED, Certificate, Declaration of Conformity

Basic UDI-PI

- Printed on single pack and tertiary packaging levels
- Included in EUDAMED

Complete Declaration of Conformity (DoC) and affix CE Mark

1	Check device is within scope of MDR	(Chapter I, §1, §2, Annex XVI)
2	Determine risk class of device and applicable MDR codes	(Chapter V, §51 => Annex VIII) (Article 38, Regulation 2017/2185)
3	Select conformity assessment procedure	(Chapter V, §52)
4	Maintain QMS	(Chapter II, §10)
5	Identify applicable safety and performance requirements	(Chapter II, §5, Annex I)
6	Assemble Technical Documentation	(Annex I, Annex II, Annex XIV)
7	Apply conformity assessment procedure	(Annexes IX, X, XI A or XI B)
8	Assign Unique Identifications	(Chapter III, §27-34, Annex VI)
9	Complete Declaration of Conformity and affix CE mark	(Chapter II, §19 =>Annex IV) (Chapter II, §20, =>Annex V)
10	Post-market surveillance and updates	(Chapter VII, §83 to 86, Annex XIV => Annex III)

Declaration of Conformity: Annex IV

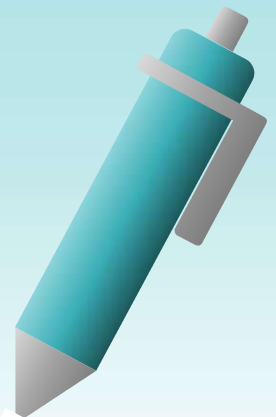
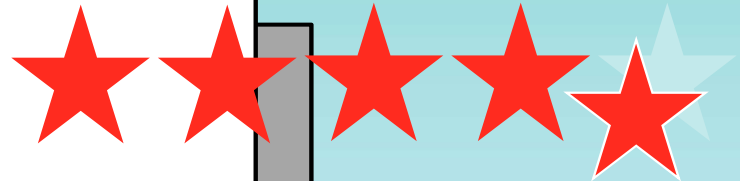
CE Declaration of Conformity

- Manufacturer:** Name, registered trade name/mark, registered place of business, SRN
- Device:** With product and tradename, risk class, basic UDI-DI
- Assessment:** CS and procedure used, IDs of NB & certificates

.....
.....
.....For other necessary information see Annex IV.....

A statement that the declaration of conformity is issued under the sole responsibility of the manufacturer.

A statement that the device is in conformity with this regulation, and if applicable, with the other relevant union legislation that makes provision for the issuing of a declaration of conformity.



26. May 2020

John Doe

John Doe,
CEO for
Manufacturer Ltd.

CE mark



**Do not change proportions!
Add number of NB, if involved!**

Where does the CE mark appear?



Device itself



Packaging
(if not on device)



Sales packaging



Sterile
Packaging

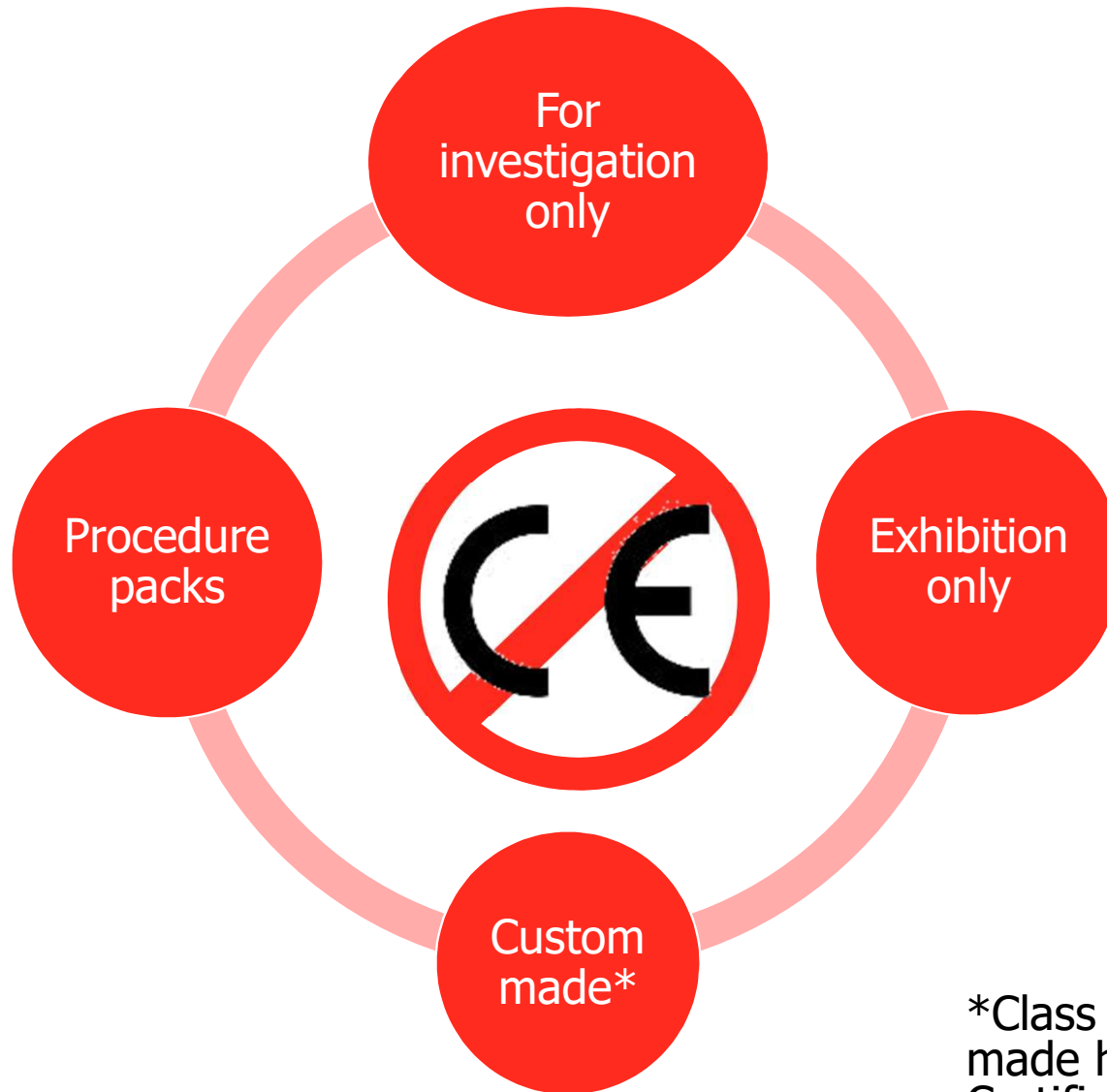


Instruction for
Use



Promotional
Material
(if mentioning
conformity)

CE mark is prohibited for



*Class III custom made has NB Certificate but no CE Mark

Post-market Surveillance (PMS)

1	Check device is within scope of MDR	(Chapter I, §1, §2, Annex XVI)
2	Determine risk class of device and applicable MDR codes	(Chapter V, §51 => Annex VIII) (Article 38, Regulation 2017/2185)
3	Select conformity assessment procedure	(Chapter V, §52)
4	Maintain QMS	(Chapter II, §10)
5	Identify applicable safety and performance requirements	(Chapter II, §5, Annex I)
6	Assemble Technical Documentation	(Annex I, Annex II, Annex XIV)
7	Apply conformity assessment procedure	(Annexes IX, X, XI A or XI B)
8	Assign Unique Identifications	(Chapter III, §27-34, Annex VI)
9	Complete Declaration of Conformity and affix CE mark	(Chapter II, §19 =>Annex IV) (Chapter II, §20, =>Annex V)
10	Post-market surveillance and updates	(Chapter VII, §83 to 86, Annex XIV => Annex III)

§2 definitions: PMS

Definition (§2 MDR)

- All activities carried out:
- By the manufacturers in cooperation with other economic operators
- To institute and keep up to date a systematic procedure
- To proactively collect and review experience gained from their devices
- Placed on the market, made available on the market or put into service
- For the purpose of identifying any need to immediately apply any necessary corrective or preventive actions

Issues to consider:

- Be comprehensive
- Involve your distributors
- EN ISO 13485:
Documented procedure
- Sit and wait is not enough
- Know your devices
- Be ready to act



Also for devices
CE marked
under the Directive

Post-market reports

Kind of report	Update at least	Risk
SSCP Summary of Safety and Clinical Performance	Annual	Implantable and class III
PSUR Periodic Safety Update report	Annual	Class III
PSUR Periodic Safety Update report	Annual	Class IIb
PSUR Periodic Safety Update report	Bi-annual	Class IIa
PMS report Post-market surveillance report	When necessary	Class I

Contents of Periodic Safety Update Report (PSUR)

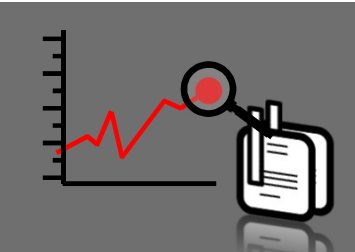
- Throughout lifetime
- Considering PMS Plan (and other plans)
- Available Information:

PMS

Summary of data / conclusions



Benefit/risk conclusion



Population, use frequency

PMCF

Main findings of Post-market Clinical Follow-up

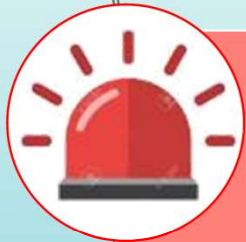
€ Sales Data, Sales Volume

Alarming issues



Complaint:

- Communication about:
- Related to deficiency of a device,
- Which is outside manufacturer's control



Adverse event:

- Untoward, unintended, abnormal
- Regardless of any relation to device



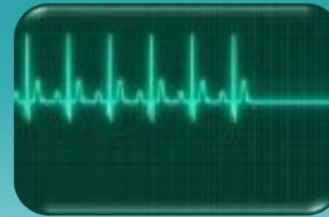
Incident:

- Malfunction, deterioration, inadequate information, undesirable side-effect
- of a device which is made available

When is an incident serious?

- **Directly or indirectly**
- **Led, might have led or might lead to any of the following:**

Serious deterioration of state of health



Death



Serious public health threat



Reporting timelines for serious incidents

In doubt? Report!

<i>In case of</i>	<i>Manufacturer reports immediately after it</i>	<i>But at latest within</i>
Any serious incident	Established <u>casualty</u> or it is reasonably possible	15 days after awareness of incident
Death	Established or suspected <u>casualty</u>	10 days after awareness of incident
Unanticipated serious incident	Established or suspected <u>casualty</u>	10 days after awareness of incident
Serious public health threat	Becomes <u>aware of threat</u>	2 days after awareness of <u>threat</u>



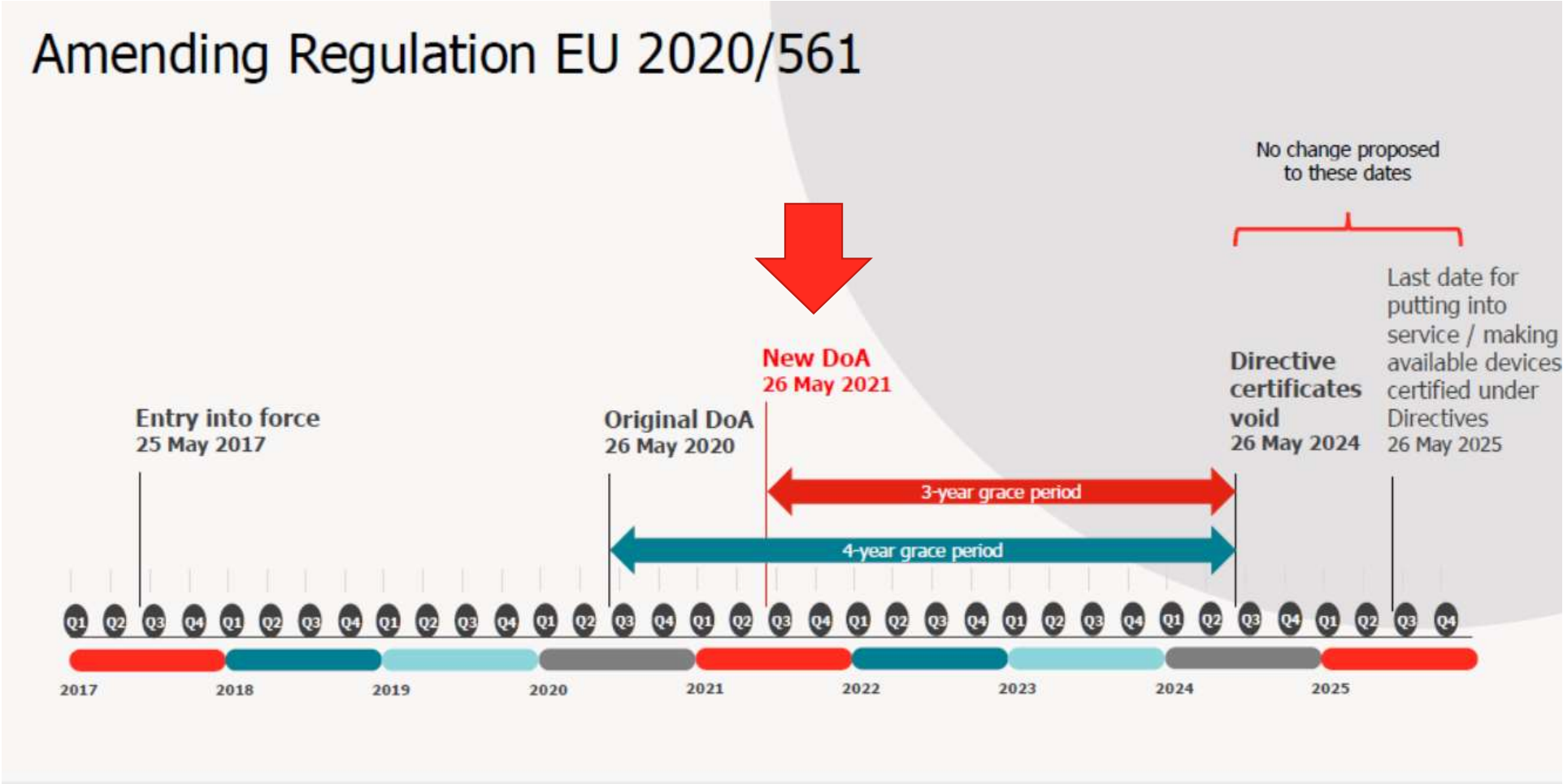
Recap and transition arrangements

MDR CE marking

1. Check device is within scope of MDR
1. (Chapter I, §1, §2, Annex XVI)
2. Determine risk class of device and applicable 'NBOG' codes
2. (Chapter V, §51 => Annex VIII)
(Article 38, Regulation 2017/2185)
3. Select conformity assessment procedure
3. (Chapter V, §52)
4. Maintain QMS
4. (Chapter II, §10)
5. Identify applicable safety and performance requirements
5. (Chapter II, §5, Annex I)
6. Assemble Technical Documentation
6. (Annex I, Annex II, Annex XIV)
7. Apply conformity assessment procedure
7. (Annexes IX, X, XI A or XI B)
8. Assign Unique Identifications
8. (Chapter III, §27-34, Annex VI)
9. Complete declaration of conformity (DoC) and affix CE mark
9. (Chapter II, §19 => Annex IV)
(Chapter II, §20, => Annex V)
10. Post-market surveillance and updates
10. (Chapter VII, §83 to 86, Annex XIV => Annex III)

Transition timelines for the MDR

Amending Regulation EU 2020/561



Amending Regulation EU 2020/561 → MDR Article 120 (3)

After 26 May 2021 (instead of 26 May 2020), devices with a NB certificate under MDD/AIMDD, Class I devices that are up-classified under MDR can only be placed on market if:







- They continue to comply with applicable Directives
- There are no significant changes in the design or intended purpose

However, the following MDR requirements will apply from 26 May 2021

- post-market surveillance
- market surveillance
- vigilance
- registration of economic operators
- registration of devices

Impact on Priorities

The following devices/products need MDR certificates by 26 May 2021 (instead of 26 May 2020) for continued market viability:

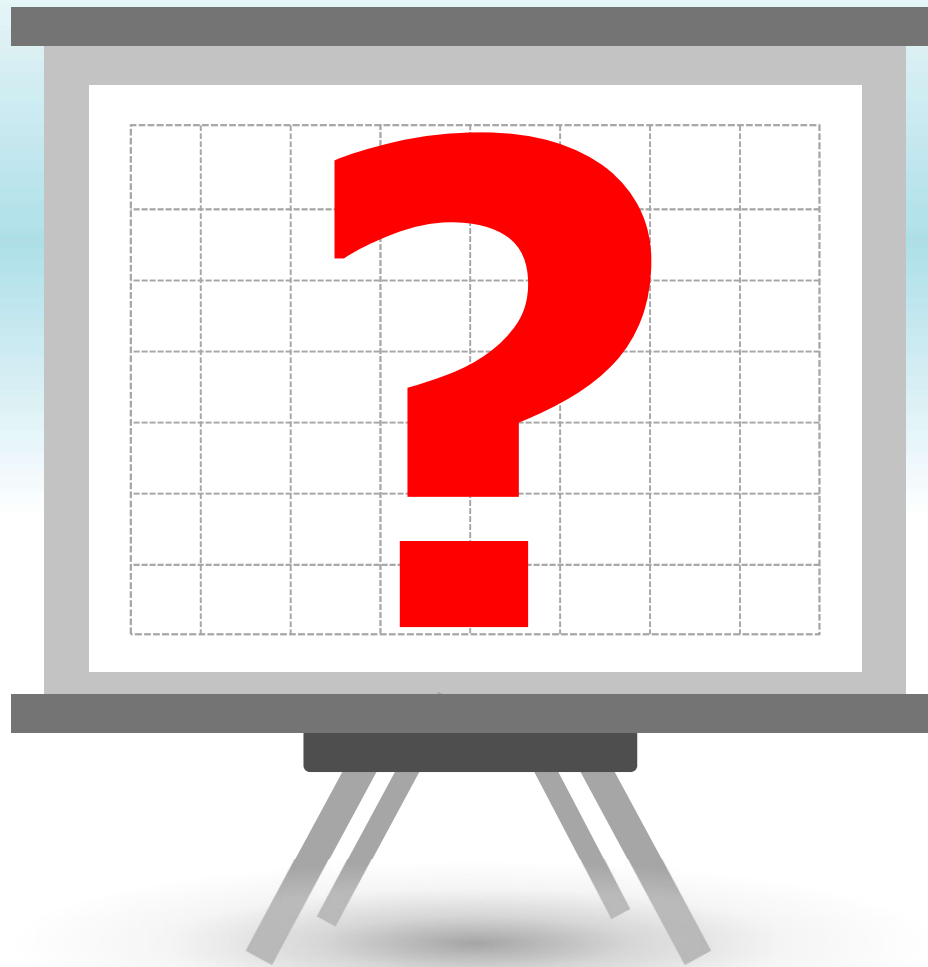
-  Devices utilising Human tissue derivatives
-  Article 117 Drug/Device combinations
-  Custom-made Class III implants
-  Devices without a medical purpose – Annex XVI
- ~~ Class I re-usable surgical instruments~~
- ~~ Software that was Class I under MDD and now up-classified~~

Transition timeline is 6 months from date of CS publication or 26 May 2021, whichever is latest

2nd Corrigendum extended transition to 26 May 2024

NBs cannot accept applications until the CS is published

Course review and final questions



bsi.

...making excellence a habit.™