STN	Biologické hodnotenie zdravotníckych pomôcok Časť 4: Výber skúšok na interakcie s krvou (ISO 10993-4: 2017)	STN EN ISO 10993-4
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Biological evaluation of medical devices - Part 4: Selection of tests for interactions with blood (ISO 10993-4:2017)

Táto norma obsahuje anglickú verziu európskej normy. This standard includes the English version of the European Standard.

Táto norma bola oznámená vo Vestníku ÚNMS SR č. 04/18

Obsahuje: EN ISO 10993-4:2017, ISO 10993-4:2017

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English Version

Biological evaluation of medical devices - Part 4: Selection of tests for interactions with blood (ISO 10993-4:2017)

Évaluation biologique des dispositifs médicaux - Partie 4: Choix des essais pour les interactions avec le sang (ISO 10993-4:2017) Biologische Beurteilung von Medizinprodukten - Teil 4: Auswahl von Prüfungen zur Wechselwirkung mit Blut (ISO 10993-4:2017)

This European Standard was approved by CEN on 4 October 2017.

CEN members are bound to comply with the CEN/CENELEC Internal Regulations which stipulate the conditions for giving this European Standard the status of a national standard without any alteration. Up-to-date lists and bibliographical references concerning such national standards may be obtained on application to the CEN-CENELEC Management Centre or to any CEN member.

This European Standard exists in three official versions (English, French, German). A version in any other language made by translation under the responsibility of a CEN member into its own language and notified to the CEN-CENELEC Management Centre has the same status as the official versions.

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European foreword

The text of ISO 10993-4:2017 has been prepared by Technical Committee ISO/TC 194 "Biological and clinical evaluation of medical devices" of the International Organization for Standardization (ISO) and has been taken over as EN ISO 10993-4:2017 by Technical Committee CEN/TC 206 "Biological and clinical evaluation of medical devices" the secretariat of which is held by DIN.

This European Standard shall be given the status of a national standard, either by publication of an identical text or by endorsement, at the latest by April 2018, and conflicting national standards shall be withdrawn at the latest by April 2018.

Attention is drawn to the possibility that some of the elements of this document may be the subject of patent rights. CEN shall not be held responsible for identifying any or all such patent rights.

This document supersedes EN ISO 10993-4:2009 and EN ISO 10993-4:2017.

This document has been prepared under a mandate given to CEN by the European Commission and the European Free Trade Association, and supports essential requirements of EU Directives.

For relationship with EU Directives, see informative Annex ZA and Annex ZB, which is an integral part of this document.

The following referenced documents are indispensable for the application of this document. For undated references, the latest edition of the referenced document (including any amendments) applies. For dated references, only the edition cited applies. However, for any use of this standard 'within the meaning of Annex ZA', the user should always check that any referenced document has not been superseded and that its relevant contents can still be considered the generally acknowledged state-of-art.

When an IEC or ISO standard is referred to in the ISO standard text, this shall be understood as a normative reference to the corresponding EN standard, if available, and otherwise to the dated version of the ISO or IEC standard, as listed below.

NOTE 1 The way in which these referenced documents are cited in normative requirements determines the extent (in whole or in part) to which they apply.

Table — Correlations between undated normative references and dated EN and ISO standards

Normative references	Equivalent dated standard		
as listed in Clause 2 of the ISO standard	EN	ISO or IEC	
ISO 10993-1	EN ISO 10993-1:2009	ISO 10993-1:2009	
ISO 10993-12	EN ISO 10993-12:2012	ISO 10993-12:2012	

NOTE 2 This part of EN ISO 10993 refers to ISO 10993 1 which itself refers to ISO 14971. In Europe, it should be assumed that the reference to ISO 14971 is to EN ISO 14971:2012.

According to the CEN-CENELEC Internal Regulations, the national standards organizations of the following countries are bound to implement this European Standard: Austria, Belgium, Bulgaria, Croatia, Cyprus, Czech Republic, Denmark, Estonia, Finland, Former Yugoslav Republic of Macedonia, France, Germany, Greece, Hungary, Iceland, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Norway, Poland, Portugal, Romania, Serbia, Slovakia, Slovenia, Spain, Sweden, Switzerland, Turkey and the United Kingdom.

Endorsement notice

The text of ISO 10993-4:2017 has been approved by CEN as EN ISO 10993-4:2017 without any modification.

Annex ZA (informative)

Relationship between this European Standard and the essential requirements of Directive 93/42/EEC [OJ L 169] aimed to be covered

This European Standard has been prepared under a Commission's joint standardization request M/BC/CEN/89/9 concerning harmonized standards relating to horizontal aspects in the field of medical devices to provide one voluntary means of conforming to essential requirements of Council Directive 93/42/EEC of 14 June 1993 concerning medical devices [OJ L 169].

Once this standard is cited in the Official Journal of the European Union under that Directive, compliance with the normative clauses of this standard given in Table ZA.1 confers, within the limits of the scope of this standard, a presumption of conformity with the corresponding essential requirements of that Directive and associated EFTA regulations.

NOTE 1 Where a reference from a clause of this standard to the risk management process is made, the risk management process needs to be in compliance with Directive 93/42/EEC as amended by 2007/47/EC. This means that risks have to be reduced 'as far as possible', 'to a minimum', 'to the lowest possible level', 'minimized' or 'removed', according to the wording of the corresponding essential requirement.

NOTE 2 The manufacturer's policy for determining acceptable risk must be in compliance with Essential Requirements 1, 2, 5, 6, 7, 8, 9, 11 and 12 of the Directive.

NOTE 3 This Annex ZA is based on normative references according to the table of references in the European foreword, replacing the references in the core text.

NOTE 4 When an Essential Requirement does not appear in Table ZA.1, it means that it is not addressed by this European Standard.

Table ZA.1 — Correspondence between this European Standard and Annex I of Directive 93/42/EEC [OJ L 169]

Essential Requirements of Directive 93/42/EEC	Clause(s)/subclause(s) of this EN	Remarks/Notes
7.1 (First indent)	6.1	ER 7.1 (first indent) is only partly covered by ISO 10993-4, since the standard does not provide requirements on design and manufacture. However, this standard does provide a means to evaluate the compatibility of medical devices and materials intended for use in medical devices with blood. Other forms of toxicity and flammability are not dealt with in this standard.
7.1 (Second indent)	6.1	ER 7.1 (second indent) is only partly covered by ISO 10993-4, since the standard does not provide requirements on design and manufacture. However, this standard does provide a means to evaluate the compatibility of medical devices and materials intended for use in medical devices with blood.

General Note: Presumption of conformity depends on also complying with all relevant clauses/subclauses of ISO 10993-1.

WARNING 1 — Presumption of conformity stays valid only as long as a reference to this European Standard is maintained in the list published in the Official Journal of the European Union. Users of this standard should consult frequently the latest list published in the Official Journal of the European Union.

WARNING 2 — Other Union legislation may be applicable to the products falling within the scope of this standard.

Annex ZB (informative)

Relationship between this European Standard and the essential requirements of Directive 90/385/EEC [OJ L 189] aimed to be covered

This European Standard has been prepared under a Commission's joint standardization request M/BC/CEN/89/9 concerning harmonized standards relating to horizontal aspects in the field of medical devices to provide one voluntary means of conforming to essential requirements of Council Directive 90/385/EEC of 20 June 1990 on the approximation of the laws of the Member States relating to active implantable medical devices [OJ L 189].

Once this standard is cited in the Official Journal of the European Union under that Directive, compliance with the normative clauses of this standard given in Table ZB.1 confers, within the limits of the scope of this standard, a presumption of conformity with the corresponding essential requirements of that Directive and associated EFTA regulations.

NOTE 1 Where a reference from a clause of this standard to the risk management process is made, the risk management process needs to be in compliance with Directive 90/385/EEC as amended by 2007/47/EC. This means that risks have to be reduced 'as far as possible', 'to a minimum', 'to the lowest possible level', 'minimized' or 'removed', according to the wording of the corresponding essential requirement.

NOTE 2 The manufacturer's policy for determining acceptable risk must be in compliance with Essential Requirements 1, 4, 5, 8, 9 and 10 of the Directive.

NOTE 3 This Annex ZB is based on normative references according to the table of references in the European foreword, replacing the references in the core text.

NOTE 4 When an Essential Requirement does not appear in Table ZB.1, it means that it is not addressed by this European Standard.

Table ZB.1 — Correspondence between this European Standard and Annex I of Directive 90/385/EEC [OJ L 189]

Essential Requirements of Directive 90/385/EEC	Clause(s)/subclause(s) of this EN	Remarks/Notes
9 (first indent)	6.1	ER 9 (first indent) is only partly covered by ISO 10993-4, since the standard does not provide requirements on design and manufacture. However, this part of ISO 10993 does specify test methods for the assessment of the compatibility of medical devices and materials intended for use in medical devices with blood. Other forms of toxicity are not dealt with in this standard.
9 (second indent)	6.1	ER 9 (second indent) is only partly covered by ISO 10993-4, since the standard does not provide requirements on design and manufacture. However, this standard does provide a means to evaluate the compatibility of medical devices and materials intended for use in medical devices with blood.

General Note: Presumption of conformity depends on also complying with all relevant clauses/subclauses of ISO 10993-1.

WARNING 1 — Presumption of conformity stays valid only as long as a reference to this European Standard is maintained in the list published in the Official Journal of the European Union. Users of this standard should consult frequently the latest list published in the Official Journal of the European Union.

WARNING 2 — Other Union legislation may be applicable to the products falling within the scope of this standard.

INTERNATIONAL STANDARD

ISO 10993-4

Third edition 2017-04

Biological evaluation of medical devices —

Part 4: **Selection of tests for interactions with blood**

Évaluation biologique des dispositifs médicaux — Partie 4: Choix des essais pour les interactions avec le sang





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Foreword

ISO (the International Organization for Standardization) is a worldwide federation of national standards bodies (ISO member bodies). The work of preparing International Standards is normally carried out through ISO technical committees. Each member body interested in a subject for which a technical committee has been established has the right to be represented on that committee. International organizations, governmental and non-governmental, in liaison with ISO, also take part in the work. ISO collaborates closely with the International Electrotechnical Commission (IEC) on all matters of electrotechnical standardization.

The procedures used to develop this document and those intended for its further maintenance are described in the ISO/IEC Directives, Part 1. In particular the different approval criteria needed for the different types of ISO documents should be noted. This document was drafted in accordance with the editorial rules of the ISO/IEC Directives, Part 2 (see www.iso.org/directives).

Attention is drawn to the possibility that some of the elements of this document may be the subject of patent rights. ISO shall not be held responsible for identifying any or all such patent rights. Details of any patent rights identified during the development of the document will be in the Introduction and/or on the ISO list of patent declarations received (see www.iso.org/patents).

Any trade name used in this document is information given for the convenience of users and does not constitute an endorsement.

For an explanation on the voluntary nature of standards, the meaning of ISO specific terms and expressions related to conformity assessment, as well as information about ISO's adherence to the World Trade Organization (WTO) principles in the Technical Barriers to Trade (TBT) see the following URL: www.iso.org/iso/foreword.html.

This document was prepared by Technical Committee ISO/TC 194, *Biological and clinical evaluation of medical devices*.

This third edition cancels and replaces the second edition (ISO 10993-4:2002), which has been technically revised.

It also incorporates the Amendment ISO 10993-4:2002/Amd 1:2006.

The following changes were made:

- a) some definitions have been revised and new definitions have been added;
- b) Tables 1 and 2 have been consolidated into a single new <u>Table 1</u> with test categories and headers reorganized to emphasize and include material and mechanical-induced haemolysis testing and *in vitro* and *in vivo* testing for assessment of risk for thrombosis;
- c) Tables 3 and 4 have been consolidated into a single new <u>Table 2</u> with a simplified list of suggested and most common tests;
- d) Annex B has been updated to cover only the most common practiced tests for assessing blood interactions;
- e) Annex C has been added to cover the topic of *in vivo* thrombosis and methods for testing;
- f) Annex D, which was Annex C in the previous edition, has been updated and now includes added information on mechanically-induced haemolysis;
- g) Annex E has been added to cover the topic of complement testing and best test method practices;
- h) Annexes F and G have been added to present the less common tests used to assess interactions with blood and the tests that are not recommended for preclinical assessment of medical device blood interaction, respectively. Many of these methods were previously included in Annex B;

- i) subtle language refinements can be found throughout the revised document;
- j) the Bibliography has been reorganized by common subjects of interest and updated with additional and more current references.

Introduction

The selection and design of test methods for the interactions of medical devices with blood should take into consideration device design, materials, clinical utility, usage environment and risk benefit. This level of specificity can only be covered in vertical standards.

The initial source for developing this document was the publication, *Guidelines for blood/material interactions*, Report of the National Heart, Lung, and Blood Institute[14] chapters 9 and 10. This publication was subsequently revised[15].

Biological evaluation of medical devices —

Part 4:

Selection of tests for interactions with blood

1 Scope

This document specifies general requirements for evaluating the interactions of medical devices with blood.

It describes

- a) a classification of medical devices that are intended for use in contact with blood, based on the intended use and duration of contact as defined in ISO 10993-1,
- b) the fundamental principles governing the evaluation of the interaction of devices with blood,
- c) the rationale for structured selection of tests according to specific categories, together with the principles and scientific basis of these tests.

Detailed requirements for testing cannot be specified because of limitations in the knowledge and precision of tests for evaluating interactions of devices with blood. This document describes biological evaluation in general terms and may not necessarily provide sufficient guidance for test methods for a specific device.

The changes in this document do not indicate that testing conducted according to prior versions of this document is invalid. For marketed devices with a history of safe clinical use, additional testing according to this revision is not recommended.

2 Normative references

The following documents are referred to in the text in such a way that some or all of their content constitutes requirements of this document. For dated references, only the edition cited applies. For undated references, the latest edition of the referenced document (including any amendments) applies.

ISO 10993-1, Biological evaluation of medical devices — Part 1: Evaluation and testing within a risk management process

ISO 10993-12, Biological evaluation of medical devices — Part 12: Sample preparation and reference materials

koniec náhľadu – text ďalej pokračuje v platenej verzii STN