



August 14, 2026

Medtronic Ireland
Michelle Greaney
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Re: K261428

Trade/Device Name: NC Euphora Rapid Exchange Balloon Dilatation Catheter
Regulation Number: 21 CFR 870.5100
Regulation Name: Percutaneous Transluminal Coronary Angioplasty (PTCA) Catheter
Regulatory Class: Class II
Product Code: LOX
Dated: April 30, 2026
Received: April 30, 2026

Dear Michelle Greaney:

We have reviewed your section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (the Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. Although this letter refers to your product as a device, please be aware that some cleared products may instead be combination products. The 510(k) Premarket Notification Database available at <https://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfpmn/pmn.cfm> identifies combination product submissions. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Additional information about changes that may require a new premarket notification are provided in the FDA guidance documents entitled "Deciding When to Submit a 510(k) for a Change to an Existing Device" (<https://www.fda.gov/media/99812/download>) and "Deciding When to Submit a 510(k) for a Software Change to an Existing Device" (<https://www.fda.gov/media/99785/download>).

Your device is also subject to, among other requirements, the Quality Management System Regulation (QMSR) (21 CFR Part 820), which includes, but is not limited to, ISO 13485 clause 7.3 (Design controls), ISO 13485 clause 8.3 (Nonconforming product), ISO 13485 clause 8.5.2 (Corrective action), and ISO 13485 clause 8.5.3 (Preventative action). Please note that regardless of whether a change requires premarket review, the QMSR requires device manufacturers to review and approve changes to device design and production (ISO 13485 clause 7.3 and ISO 13485 clause 7.5) and document changes and approvals in the Medical Device File (ISO 13485 clause 4.2.3).

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21 CFR Part 803) for devices or postmarketing safety reporting (21 CFR Part 4, Subpart B) for combination products (see <https://www.fda.gov/combination-products/guidance-regulatory-information/postmarketing-safety-reporting-combination-products>); good manufacturing practice requirements as set forth in the Quality Management System Regulation (QMSR) (21 CFR Part 820) for devices or current good manufacturing practices (21 CFR Part 4, Subpart A) for combination products; and, if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR Parts 1000-1050.

All medical devices, including Class I and unclassified devices and combination product device constituent parts are required to be in compliance with the final Unique Device Identification System rule ("UDI Rule"). The UDI Rule requires, among other things, that a device bear a unique device identifier (UDI) on its label and package (21 CFR 801.20(a)) unless an exception or alternative applies (21 CFR 801.20(b)) and that the dates on the device label be formatted in accordance with 21 CFR 801.18. The UDI Rule (21 CFR 830.300(a) and 830.320(b)) also requires that certain information be submitted to the Global Unique Device Identification Database (GUDID) (21 CFR Part 830 Subpart E). For additional information on these requirements, please see the UDI System webpage at <https://www.fda.gov/medical-devices/device-advice-comprehensive-regulatory-assistance/unique-device-identification-system-udi-system>.

Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to <https://www.fda.gov/medical-devices/medical-device-safety/medical-device-reporting-mdr-how-report-medical-device-problems>.

For comprehensive regulatory information about medical devices and radiation-emitting products, including information about labeling regulations, please see Device Advice (<https://www.fda.gov/medical-devices/device-advice-comprehensive-regulatory-assistance>) and CDRH Learn (<https://www.fda.gov/training-and-continuing-education/cdrh-learn>). Additionally, you may contact the Division of Industry and Consumer Education (DICE) to ask a question about a specific regulatory topic. See the DICE website (<https://www.fda.gov/medical-devices/device-advice-comprehensive-regulatory->

[assistance/contact-us-division-industry-and-consumer-education-dice](#)) for more information or contact DICE by email (DICE@fda.hhs.gov) or phone (1-800-638-2041 or 301-796-7100).

Sincerely,

JENNY R.

KATSNELSON -S

Digitally signed by JENNY R.
KATSNELSON -S
Date: 2026.08.14 15:47:27 -04'00'

for Lydia Glaw

Assistant Director

DHT2C: Division of Coronary and

Peripheral Intervention Devices

OHT2: Office of Cardiovascular Devices

Office of Product Evaluation and Quality

Center for Devices and Radiological Health

Enclosure

Indications for Use

510(k) Number (if known)

K261428

Device Name

Euphora Rapid Exchange (RX) Balloon Dilatation Catheter

Indications for Use (Describe)

The balloon dilatation catheter is indicated for balloon dilatation of the stenotic portion of a coronary artery or bypass graft stenosis for the purpose of improving myocardial perfusion. The balloon dilatation catheter is also indicated for postdeployment expansion of balloon expandable stents.

Type of Use (Select one or both, as applicable)

☒ Prescription Use (Part 21 CFR 801 Subpart D)

☐ Over-The-Counter Use (21 CFR 801 Subpart C)

CONTINUE ON A SEPARATE PAGE IF NEEDED.

This section applies only to requirements of the Paperwork Reduction Act of 1995.

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510(k) Summary per 21 CFR 807.92

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Date Prepared: July 17, 2026

Trade Name: NC Euphora Rapid Exchange (RX) Balloon Dilatation Catheter

Common Name: Percutaneous Transluminal Coronary Angioplasty (PTCA)
Catheter

Device Classification: Class II

Classification Name: Catheters, Transluminal Coronary Angioplasty, Percutaneous

Classification Panel: Cardiovascular

Classification Regulation: 21 CFR 870.5100

Product Code: LOX

Predicate Device:

Predicate Device Clearance/Approval #	Predicate Device Name	Clearance Date
K141090	NC Euphora Rapid Exchange Balloon Dilatation Catheter	August 15, 2014

Device Description:

The NC Euphora RX Balloon Dilatation catheter is a Percutaneous Transluminal Coronary Angioplasty (PTCA) Rapid Exchange System. The balloon at the distal end of the catheter can be inflated to a defined diameter at a specific pressure as defined in the product labelling. The proximal end of the catheter has a female luer for attachment to an inflation device. The catheter provides a lumen which enables the use of a guidewire to position the catheter. Radiopaque balloon marker bands enable accurate placement. Exit markers for brachial and femoral techniques are in place.

Indications For Use:

The balloon dilatation catheter is indicated for balloon dilatation of the stenotic portion of a coronary artery or bypass graft stenosis for the purpose of improving myocardial perfusion. The balloon dilatation catheter is also indicated for post deployment expansion of balloon expandable stents.

Comparsion of Technological Characteristics with the Predicate Device:

The NC Euphora RX Balloon Dilatation catheter has the same indication for use and principals of operation as the legally marketed predicate device (K141090). The technological and functional characteristics are substantially equivalent to the predicate device, in terms of design, dimensions and method of construction. The technological characteristics differ only with respect to the PTFE based, non-hydrophilic material change on the proximal shaft assembly. There are no other technological characteristic differences compared to the predicate device All other device materials remain identical. The purpose of the material is not changing as a result of the modification.

The material difference does not introduce new questions of safety or effectiveness compared to the predicate, and the device continues to meet its intended use.

Comparison to Predicate Devices

The subject device is substantially equivalent to the predicate device, which is Medtronic's own legally market device, and has comparable performance. There is no change in sterilization method, sterility assurance level and shelf life. The material difference does not introduce different questions of safety or effectiveness compared to the predicate.

Summary of Non-Clinical Data

The following non-clinical tests were performed to evaluate and demonstrate substantial equivalence between the subject device and the predicate device.

Biocompatibility Evaluation (conducted per ISO 10993 standards):

- Physical Information & Chemical Information (GlideMed Coating Formulation)
- Toxicological Risk Assessment
- Cytotoxicity
- Acute Systemic Toxicity
- Hemocompatibility
 - Hemolysis
 - Complement Activation
 - Partial Thromboplastin Time (PTT)
 - Platelet/Leucocyte Count
- Guinea Pig Maximization Sensitization
- Intracutaneous Irritation
- *In vitro* Skin Irritation
- Material Mediated Pyrogenicity

Performance Testing included:

- Hypotube Bond Outer Diameter
- Proximal Shaft Outer Diameter
- Hypotube/Transition Shaft Tensile
- Balloon Preparation, Deployment and Retraction
- PTFE Particulate Characterization Testing
- PTFE Durability Characterization Testing

All test results met the acceptance criteria, which are consistent with the predicate device, demonstrating that the subject device meets established performance specifications and is suitable for its intended use.

Summary of Clinical Data

No clinical testing was required for this 510(k) submission.

Conclusion from Data

The differences between the subject device and predicate device have been evaluated through non-clinical testing, which demonstrates that the subject device is substantially equivalent to the predicate device.