

1 **Premarket Notification**
2 **Requirements Concerning Gowns**
3 **Intended for Use in Health Care**
4 **Settings**

6 **Draft Guidance for Industry and**
7 **Food and Drug Administration Staff**

8
9 ***DRAFT GUIDANCE***

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13 **Document issued on June 30, 2015.**

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24 For questions about this document, contact the Division of Anesthesiology, General Hospital,
25 Respiratory, Infection Control, and Dental Devices, 301-796-5580, and Elizabeth Claverie,
26 301-796-6298, Elizabeth.claverie@fda.hhs.gov.



U.S. Department of Health and Human Services
Food and Drug Administration
Center for Devices and Radiological Health
Office of Device Evaluation
Division of Anesthesiology, General Hospital, Respiratory,
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Preface

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53 *This draft guidance, when finalized, will represent the current thinking of the Food and*
54 *Drug Administration (FDA or Agency) on this topic. It does not establish any rights for*
55 *any person and is not binding on FDA or the public. You can use an alternative approach*
56 *if it satisfies the requirements of the applicable statutes and regulations. To discuss an*
57 *alternative approach, contact the FDA staff responsible for implementing this guidance as*
58 *listed on the title page.*

59 **I. Introduction**

60 The Food and Drug Administration (FDA) is issuing this draft guidance to describe the
61 Agency’s premarket regulatory requirements and the performance testing needed to support
62 liquid barrier claims for gowns intended for use in health care settings. This draft guidance is
63 being issued in light of the public health importance of personal protective equipment in
64 health care settings and the recognition that terminology used to describe gowns has evolved,
65 including by industry, the standards community, and health care professionals.

66
67 FDA believes this draft guidance is important to promote and protect public health by
68 describing premarket regulatory requirements pertaining to gowns regulated under 21 CFR
69 878.4040. Specifically, it will describe for industry the premarket regulatory requirements
70 and data requirements for marketing of gowns with claims that they meet certain liquid
71 barrier performance standards established by the American National Standards Institute, Inc.,
72 and the Association for the Advancement of Medical Instrumentation (ANSI/AAMI) and
73 other similar terminology associated with these claims. This document is intended to
74 supplement the 1993 guidance document, [Guidance on Premarket Notification \[510\(K\)\]](#)
75 [Submissions for Surgical Gowns and Surgical Drapes](#)

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76 (<http://www.fda.gov/downloads/medicaldevices/deviceregulationandguidance/guidancedocuments/ucm081305.pdf>).

77

78
79 FDA's guidance documents, including this guidance, do not establish legally enforceable
80 responsibilities. Instead, guidances describe the Agency's current thinking on a topic and
81 should be viewed only as recommendations, unless specific regulatory or statutory
82 requirements are cited. The use of the word *should* in Agency guidance means that
83 something is suggested or recommended, but not required.

84 **II. Background**

85 FDA issued a final rule¹ on June 24, 1988, defining “surgical apparel” under 21 CFR
86 878.4040 as:

87

88 devices that are intended to be worn by operating room personnel during surgical
89 procedures to protect both the surgical patient and the operating room personnel
90 from transfer of microorganisms, bodily fluids, and particulate material.
91 Examples include surgical caps, hoods, masks, gowns, operating room shoes and
92 shoe covers, and isolation masks and gowns. Surgical suits and dresses,
93 commonly known as scrub suits, are excluded.

94

95 Under this 1988 final rule, surgical gowns and surgical masks were classified as Class II
96 subject to premarket review under section 510(k) of the Federal Food, Drug, and Cosmetic
97 Act, and surgical apparel other than surgical gowns and surgical masks, were classified as
98 Class I also subject to 510(k) premarket review requirements. A manufacturer of any gown
99 that met the intended use of surgical apparel under 21 CFR 878.4040 was required to submit
100 a 510(k) notification before the device could be introduced into interstate commerce.

101

102 On January 14, 2000, FDA issued a final rule² to designate as exempt from premarket
103 notification (510(k)) requirements surgical apparel other than surgical gowns and surgical
104 masks, subject to the limitations of exemptions under 21 CFR 878.9, which includes
105 requiring a premarket notification for devices intended for a use different from the intended
106 use of a legally marketed device in that generic type of device. Specifically, the classification
107 regulation was modified to read:

108

21 CFR 878.4040 Surgical apparel.

(a) *Identification.* Surgical apparel are devices that are intended to be worn by operating room personnel during surgical procedures to protect both the surgical patient and the operating room personnel from transfer of microorganisms, body fluids, and particulate material. Examples include surgical caps, hoods, masks,

¹ 53 FR 23874 (June 24, 1988).

² 65 FR 2318(January 14, 2000).

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gowns, operating room shoes and shoe covers, and isolation masks and gowns. Surgical suits and dresses, commonly known as scrub suits, are excluded.

(b) *Classification.* (1) Class II (special controls) for surgical gowns and surgical masks.

(2) Class I (general controls) for surgical apparel other than surgical gowns and surgical masks. The class I device is exempt from the premarket notification procedures in subpart E of part 807 of this chapter subject to § 878.9.

109 At the time of the 2000 final rule, the Agency viewed “surgical gowns” as gowns intended for
110 use during surgical procedures and/or for use to provide moderate to high level barrier
111 protection and “isolation gowns” as gowns intended to provide minimal or low levels of
112 barrier protection. For the purposes of this guidance, isolation gowns that are intended for
113 use to provide moderate to high level barrier protection are referred to as “surgical isolation
114 gowns.”

115
116 Since the original 1988 final rule, a number of terms have been used to refer to gowns
117 intended for use in health care settings including, but not limited to, surgical gowns, isolation
118 gowns, surgical isolation gowns, nonsurgical gowns, procedural gowns, and operating room
119 gowns. Although the Agency has not defined the other terms by regulation or guidance, in its
120 1993 guidance, the Agency defined the term “surgical gowns” to mean “surgical apparel
121 worn by operating room personnel during surgical procedures to protect both the surgical
122 patient and the operating room personnel from transfer of microorganisms, body fluids, and
123 particulate material.”³ In addition, the Agency has reviewed certain gowns based on the
124 intended use of those gowns as surgical gowns and was able to determine substantial
125 equivalence to the other surgical gowns classified under 21 CFR 878.4040(b)(1), based on
126 assessments of liquid chemical permeation, fluid penetration, viral penetration and other
127 appropriate scientific analysis.

128
129 In 2004, FDA recognized the consensus standard ANSI/AAMI PB70:2003, “Liquid barrier
130 performance and classification of protective apparel and drapes intended for use in health
131 care facilities.”⁴ ANSI/AAMI PB70 utilized new terminology for barrier performance of
132 gowns. This terminology described and assessed the barrier protection levels of gowns and
133 other protective apparel intended for use in health care facilities, by specifying test methods
134 and performance results necessary to verify and validate the newly defined levels of barrier
135 protection. Although FDA has recognized ANSI/AAMI PB70’s barrier performance levels
136 (i.e., Levels 1-4) and the associated test methods, the definitions and terminology used in this
137 standard are inconsistent with FDA’s historical definitions of these terms, and thus have
138 added confusion in the market-place. Specifically, ANSI/AAMI PB70 defines an “isolation

³ [Guidance on Premarket Notification \[510\(k\)\] Submission for Surgical Gowns and Surgical Drapes](http://www.fda.gov/downloads/medicaldevices/deviceregulationandguidance/guidancedocuments/ucm081305.pdf), August 1993.(<http://www.fda.gov/downloads/medicaldevices/deviceregulationandguidance/guidancedocuments/ucm081305.pdf>)

⁴ Approved on October 23, 2003 by American National Standards Institute, Inc.

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139 gown” as an “[i]tem of protective apparel used to protect health care personnel and patients
140 from the transfer of microorganisms and body fluids in patient isolation situations,” and
141 “surgical gowns” as “devices that are intended to be worn by operating room personnel
142 during surgical procedures to protect both the surgical patient and the operating room
143 personnel from the transfer of microorganisms, body fluids, and particulate material.”⁵
144 Under 21 CFR 878.4040 and the Agency’s regulatory approach, however, both surgical
145 gowns and isolation gowns are “surgical apparel,” and surgical isolation gowns are
146 considered to be class II “surgical gowns” because they are intended for use as such based on
147 their moderate to high barrier protection claims.

148
149 The Agency has considered gowns that claim moderate to high barrier protection, such as
150 ANSI/AAMI PB70 Level 3 or 4, to be a higher risk device than those that claim minimal or
151 low levels of barrier protection, such as ANSI/AAMI PB70 Level 1 or 2. Thus, FDA
152 considers both level-of-protection claims and the terminology used (e.g., isolation,
153 nonsurgical, procedural, operating room) because of such devices’ substantial importance in
154 preventing impairment of human health. The level of protection claimed is particularly
155 relevant in light of the inconsistent terminology used, and that, at the time of the 2000 final
156 rule, surgical apparel other than surgical gowns and surgical masks were associated with low
157 levels of barrier protection. The purpose of this guidance, therefore, is to clarify and describe
158 the premarket regulatory requirements pertaining to gowns regulated under 21 CFR 878.4040
159 and the performance testing needed to support liquid barrier claims for gowns intended for
160 use in health care settings.

161 **III. Scope**

162 The scope of this document is limited to gowns making liquid barrier protection claims and
163 intended for use in health care settings. For the purposes of this guidance document:

164
165 Minimal or Low Barrier protection⁶ refers to:

- 166 • ANSI/AAMI PB70 Level 1 protection or equivalent; or
- 167 • ANSI/AAMI PB70 Level 2 protection or equivalent.

168 Moderate or High Barrier protection⁷ refers to:

- 169 • ANSI/AAMI PB70 Level 3 protection or equivalent; or
- 170 • ANSI/AAMI PB70 Level 4 protection or equivalent

⁵ See, respectively, sections 3.13 and 3.31 of the ANSI/AAMI PB 70:2012 (citing 21 CFR 878.4040).

⁶ Prior to the existence of ANSI/AAMI PB70, minimal or low barrier protection claims included, but were not limited to, “Protective Apparel,” “Effective Barrier,” “Fluid-Resistant,” “Water Resistant,” and “Splash Resistant.” The Agency discourages the use of these claims because they lack specificity with respect to performance characteristics and test methods. ANSI/AAMI PB70 was developed to address these issues and provide clarity to the user community regarding the levels of liquid barrier protection provided by a gown.

⁷ Prior to the existence of ANSI/AAMI PB70, moderate or high barrier protection claims included, but were not limited to, “Prevents Strikethrough,” “Highest Fluid Protection,” “Impervious,” “Highest Level of Protection,” and “Impermeable.” The Agency discourages the use of these claims because they lack specificity with respect to performance characteristics and test methods. ANSI/AAMI PB70 was developed to address these issues and provide clarity to the user community regarding the levels of liquid barrier protection provided by a gown.

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171 This guidance document does not address the data needed to support gowns making claims of
172 providing protection against specific organisms, chemical agents, chemotherapy drugs or
173 those making specific disease prevention claims (such as “protects against Ebola”). In
174 addition, this guidance does not address the data needed to support the addition of
175 antimicrobial agents in gowns. Manufacturers desiring to market gowns with these types of
176 claims are encouraged to utilize the pre-submission process⁸ to obtain further guidance from
177 the Agency prior to the submission of a premarket submission.

178 **IV. Policy**

179 The Agency is describing its approach to determining which gowns are Class I and which are
180 Class II. Specifically, consistent with 21 CFR 878.4040(b), a gown that is not intended for
181 use as a surgical gown is a Class I exempt device that is not subject to premarket notification
182 requirements, and a gown that is intended for use as a surgical gown is a class II device
183 subject to premarket notification. The determination of the intended use of a device is
184 factually driven and generally made on a case-by-case basis. In determining whether a gown
185 is intended for use as a surgical gown under 21 CFR 878.4040(b)(1) that is class II subject to
186 premarket notification, the Agency considers a number of factors, including, but not limited
187 to, the terminology used, level of barrier protection claimed, and the device’s technological
188 characteristics.

189
190 **a) Class I exempt gowns**

191
192 For purposes of determining classification of a gown under 21 CFR 878.4040(b), the
193 Agency’s regulatory approach is that a gown falling within this regulation is not a surgical
194 gown if:

- 195
- 196 • it is labeled as a gown other than a surgical gown (e.g., isolation gown);
 - 197 • it is not described in its labeling as a surgical gown; and
 - 198 • if it has statements relating to barrier protection, such statements are for only minimal
199 or low barrier protection.

200 In that case, the labeling or descriptions of the device, along with any minimal or low barrier
201 protection (or no barrier protection) claims, show that its intended use is as a nonsurgical
202 gown. Such a gown is considered class I, exempt from premarket notification under 21 CFR
203 878.4040(b)(2), subject to the limitations in 21 CFR 878.9, as surgical apparel other than
204 surgical gowns and surgical masks. The device is class I exempt because the general controls
205 are sufficient to provide reasonable assurance of the safety and effectiveness of the device,
206 under section 513(a)(1)(A) of the FD&C Act. The general controls include, but are not

⁸ Please see FDA guidance document, [Requests for Feedback on Medical Device Submissions: The Pre-Submission Program and Meetings with Food and Drug Administration Staff: Guidance for Industry and Food and Drug Administration Staff](http://www.fda.gov/downloads/medicaldevices/deviceregulationandguidance/guidancedocuments/ucm311176.pdf).
([http://www.fda.gov/downloads/medicaldevices/deviceregulationandguidance/guidancedocuments/ucm311176.p
df](http://www.fda.gov/downloads/medicaldevices/deviceregulationandguidance/guidancedocuments/ucm311176.pdf))

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207 limited to, the quality system regulation (21 CFR part 820), registration and listing (21 CFR
208 part 807), medical device reporting (21 CFR part 803), and labeling (21 CFR part 801).

209

210 **b) Class II gowns**

211

212 For purposes of determining classification of a gown under 21 CFR 878.4040(b), the
213 Agency’s regulatory approach is that a gown falling within this regulation is a “surgical
214 gown” if:

- 215 • it is labeled as such;
- 216 • it is described as such in its labeling;
- 217 • it has statements relating to moderate or high level barrier protection; and/or
- 218 • it has statements that it is intended for use during sterile procedures.

219

220 In that case, the terminology (e.g., “surgical gown” or “surgical isolation gown”); description
221 in the gown’s labeling (e.g., “this gown is suitable as a surgical gown”); and/or Level 3 or 4
222 barrier protection claims show that the gown is intended for use as a “surgical gown” (which
223 includes “surgical isolation gown”). Such gowns are considered class II devices under 21
224 CFR 878.4040(b)(1) and are subject to premarket notification. The Agency considers gowns
225 that claim moderate to high level barrier protection, such as ANSI/AAMI PB70 Level 3 or 4,
226 to be a higher risk device than those that claim minimal or low levels of barrier protection,
227 such as ANSI/AAMI PB70 Level 1 or 2, because of such devices’ substantial importance in
228 preventing impairment of human health, and, thus, the Agency considers such gowns to be
229 “surgical gowns” within the meaning of 21 CFR 878.4040(b)(1).

230

231 Statements in the labeling that a gown is a surgical gown (which includes “surgical isolation
232 gown”) provide strong evidence that the gown is a “surgical gown,” as that term is used in 21
233 CFR 878.4040(b)(1), even if there are claims that the gown only provides minimal or low
234 barrier protection.

235

236 When a premarket notification (510(k)) for a “surgical gown” (which includes “surgical
237 isolation gown”) falling within this section is submitted for FDA review, the 510(k) should
238 contain the following information in addition to the items identified in FDA’s [Guidance on
239 Premarket Notification \[510\(k\)\] Submissions for Surgical Gowns and Surgical Drapes](#)
240 ([http://www.fda.gov/downloads/medicaldevices/deviceregulationandguidance/guidancedocu
241 ments/ucm081305.pdf](http://www.fda.gov/downloads/medicaldevices/deviceregulationandguidance/guidancedocuments/ucm081305.pdf)):

242

- 243 1. Evidence that the gown complies with the claimed barrier performance criteria of the
244 currently FDA-recognized version of ANSI/AAMI PB70⁹, or equivalent standard.
245 ANSI/AAMI PB70 establishes physical performance and documentation requirements
246 for gowns and their materials.

247

⁹ Please refer to the FDA Recognized Consensus Standards database for the most current recognized version of the standard. <https://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfstandards/Search.cfm>

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- 248 2. Performance test data to demonstrate that the gown is an effective barrier in
249 accordance with ANSI/AAMI PB70 barrier performance specifications. Barrier
250 performance testing should be completed on the final, finished, pre-shipment gown,
251 or at the end of the stated shelf life of the gown, as applicable, if the gown is reusable.
252
- 253 3. Representative engineering drawing(s), schematics, illustrations and/or figures of the
254 gown that are clear, legible, labeled with the barrier protection levels of the gown, and
255 include dimensions and the location of the critical and non-critical zones.
256
- 257 4. Sample labeling that clearly identifies the level of liquid barrier protection per
258 ANSI/AAMI PB70.
259
- 260 5. Sample labeling that includes the direction(s) for use and indication(s) for use.
261

262 Current Agency policy is to require the submission of a premarket notification (510(k)) for
263 manufacturers proposing to begin the introduction or delivery for introduction into interstate
264 commerce for commercial distribution a gown falling within section IV.b. The Agency does
265 not intend to enforce compliance with premarket notification requirements for gowns
266 marketed on or before June 26, 2015 that fall within section IV.b. and do not have an existing
267 510(k) clearance when manufacturers: 1) submit a 510(k) for the gown to the Agency within
268 60 days of publication of the final guidance; 2) have a 510(k) submission for the gown
269 accepted by the Agency for review within 75 days of publication of the final guidance;¹⁰ and
270 3) obtain 510(k) clearance for the gown within 180 days of publication of the final guidance.
271 Manufacturers can bundle multiple gowns within a single 510(k) submission.¹¹

¹⁰ Please see FDA guidance document, [Refuse to Accept Policy for 510\(k\)s](http://www.fda.gov/downloads/medicaldevices/deviceregulationandguidance/guidancedocuments/ucm315014.pdf).
(<http://www.fda.gov/downloads/medicaldevices/deviceregulationandguidance/guidancedocuments/ucm315014.pdf>) In order to be considered administratively complete and accepted for review, submissions should contain the items identified in Section IV.b.

¹¹ Please see FDA guidance document, [Bundling Multiple Device or Multiple Indications in a Single Submission](http://www.fda.gov/RegulatoryInformation/Guidances/ucm089731.htm). (<http://www.fda.gov/RegulatoryInformation/Guidances/ucm089731.htm>)