



**CONSOLIDATED SCREENING FORM  
MEDICAL DEVICES**

Application Information			
Application #: <b>312839</b>	Licence Name: <b>BIOMEME SARS-COV-2 GO-STRIPS</b>	Application Type:	Device Class: <b>2</b>
Licence #: <b>0</b>			
Manufacturer: <b>BIOMEME INC</b>		Company ID: <b>151765</b>	

DLSD Application Validation			
Risk Class & Rule: <b>Class III by IVDD Rule 2(b)(i)</b>	Licence Type & Rationale: <b>System</b>	Special Substances: <input type="text"/>	Application Format: <input type="text"/>
Amendment Management			
Fee Category: <input type="text"/>	Reason for Amendment: <input type="text"/>		
Bundle Information			
Bundle Rationale: <input type="text"/>	Related Applications Bundle table included? <input type="checkbox"/>	<input type="button" value="Create/Modify Financial Bundle Info"/>	

Submission Completeness						
MDR	Requirement	A	D	N/A	Notes/Comments	
32	Application Form	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
32	Submission Presentation (ToC, Cover Letter, Exec Summary)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
32(3a/4a)	Device Description (as it relates to device listing in form)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
32(3j/4p)	QMS Certificate MDSAP/CSA-ISO 13485:2016	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
32(3g/4o)	Labelling – 21(1a)(1b)(1c)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		

DLSD Recommendation	
<input type="text" value="Incomple"/>	

Rejection Rationale:

Notes/Comments:  
Labelling currently has the disclaimer "For Research Use Only. Not for use in human or veterinary diagnostics." Therefore, labelling suggests this may not be a medical device.

<b>Steven McClelland</b> Bureau of Licensing Services Medical Devices Directorate	Date: March 25, 2020
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Review Division – DLSD Communication	
Review Division Screener Action:	
Review Division Screener Response:	
Review Division Screener Medical Devices Directorate	Date:

JUNE 11 JUIN 2021  
 SESSIONAL PAPER  
 DOCUMENT PARLEMENTAIRE  
 8550-432-1-15  
 HOUSE OF COMMONS  
 CHAMBRE DES COMMUNES



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Technical Screening (Review Division)			
Proposed reviewer: <input type="text"/>		Estimated Review Time (days): <input type="text"/>	Review Complexity: <input type="text"/>
Review Components	Review Required	Deficient	Comments
<b>Class III + IV</b>			
General Application Organization	<input type="checkbox"/>	<input type="checkbox"/>	
Device Description	<input type="checkbox"/>	<input type="checkbox"/>	
Marketing History	<input type="checkbox"/>	<input type="checkbox"/>	
Standards & Conformity Declaration	<input type="checkbox"/>	<input type="checkbox"/>	
Analytical Performance	<input type="checkbox"/>	<input type="checkbox"/>	
Physical & Chemical Bench Testing	<input type="checkbox"/>	<input type="checkbox"/>	
Electrical & Radiation Safety	<input type="checkbox"/>	<input type="checkbox"/>	
Software Validation & Verification	<input type="checkbox"/>	<input type="checkbox"/>	
Biocompatibility & Pyrogenicity	<input type="checkbox"/>	<input type="checkbox"/>	
Sterilization, Packaging, & Shelf Life	<input type="checkbox"/>	<input type="checkbox"/>	
Animal Testing	<input type="checkbox"/>	<input type="checkbox"/>	
Stability	<input type="checkbox"/>	<input type="checkbox"/>	
Product Stability (Shelf Life)	<input type="checkbox"/>	<input type="checkbox"/>	
Usability	<input type="checkbox"/>	<input type="checkbox"/>	
Clinical Studies	<input type="checkbox"/>	<input type="checkbox"/>	
Bibliography	<input type="checkbox"/>	<input type="checkbox"/>	
Near patient IVDD	<input type="checkbox"/>	<input type="checkbox"/>	
Labelling	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Class IV</b>			
Risk Assessment	<input type="checkbox"/>	<input type="checkbox"/>	
Quality Plan	<input type="checkbox"/>	<input type="checkbox"/>	
Biological Safety	<input type="checkbox"/>	<input type="checkbox"/>	
Manufacturing Process	<input type="checkbox"/>	<input type="checkbox"/>	
Process Validation	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Note to the Reviewer (e.g. predicate, reference, cautions, directions)</b> SBD?			<input type="checkbox"/> Foreign Review incl. <input type="checkbox"/>
<b>Recommendation</b> <input type="text"/>			
Bundle Update/Modification – To DLS manager <input type="checkbox"/>			
Rejection Rationale:			
<b>Technical Screening Deficiencies:</b>			
1.			



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**DLSD Deficiencies**

**Over Paid Fee Deficiency**

1. Defined in the [Food and Drugs Act](#), a device is an instrument apparatus, contrivance or other similar article, or an in vitro reagent, including a component, part or accessory of any of them, that is manufactured, sold or represented for use in
  - a. Diagnosing, treating, mitigating or preventing a disease, disorder or abnormal physical state, or any of their symptoms, in human beings or animals,
  - b. Restoring, modifying or correcting the body structure of human beings or animals or the functioning of any part of the bodies of human beings or animals,
  - c. Diagnosing pregnancy in human beings or animals,
  - d. Caring for human beings or animals during pregnancy or at or after the birth of the offspring, including caring for the offspring, or
  - e. Preventing conception in human beings or animals,

However, it does not include such an instrument, apparatus, contrivance or article, or a component, part or accessory of any of them, that does any of the actions referred to in paragraphs (a) to (e) solely by pharmacological, immunological or metabolic means or solely by chemical means in or on the body of a human being or animal.

In accordance to the [Medical Devices Regulations](#) and in respect, the [Interim Order](#), a medical device is defined as a device within the meaning of the Act, but does not include any device that is intended for use in relation to animals.

Currently, the labelling provided sets out the following disclaimer:  
**For Research Use Only.** Not for use in human or veterinary diagnostics.

Thus, the items proposed in the submission do not meet the definition of a COVID-19 medical device and cannot receive authorization for importation or sale in Canada through this regulatory pathway.

2. Pursuant to Section 4(1)(g) of the [Interim Order](#), an application for the authorization of importation or sale of a COVID-19 medical device must contain sufficient information and material to enable the Minister to determine whether to issue the authorization and must include the known information in relation to the quality, safety and effectiveness of the device.
3. Pursuant to Section (4)(2) of the [Interim Order](#), an application in respect of a Class III or IV COVID-19 medical device must contain, in addition to the information and material referred to in subsection (1), the following:
  - a. A description of the materials used in the manufacture and packaging of the device; and
  - b. A list of the countries, other than Canada, where the device has been sold, the total number of units sold in those countries and a summary of any reported problems with the device and any recalls of the device in those countries.

**\*Note: Pursuant to Section 4(3), despite subsection (1) and, if applicable, subsection (2), the application need not include the information and material referred to in paragraph (1)(g) and, if applicable, paragraphs (2)(a) and (2)(b) if the applicant provides information that demonstrates that the sale of the COVID-19 medical device is authorized by a foreign regulatory authority and has not been suspended.**

4. Pursuant to Section 10 of the [Interim Order](#), please provide labelling that also displays the following:



- a. The name and address of the manufacturer
  - b. The identifier of the device
  - c. The control number
  - d. The expiry date of the device
5. The submission suggest that the device also consists of a component in the form of a mobile app. Please provide the name, identifier and labelling for this device. Note that images displayed on the screen of a software device is recognized as labelling.

**Certificate Screening Checklist:**

- MDSAP                       Certificate Previously Validated

Cert # (new):	Cert Revisions / Comments (If Applicable):
Cert. # (old):	
Replacing Existing Cert on File (Y/N):	

Criteria	Conforms	Comments/info for MDS
First (most prominent) and full name on cert. matches application/licence, and label.	<input type="checkbox"/>	
Address on cert. matches application, licence, and label.	<input type="checkbox"/>	
Standard is (CAN/CSA) ISO 13485:2003 or 2016.	<input type="checkbox"/>	
Scope includes "manufacture" or "production". Scope includes "design" (fr. Conception) for Class III-IV.	<input type="checkbox"/>	
Scope is unambiguous and covers app. device. Scope does not contain specific product names / models / numbers or licence numbers. Reference to attachment is acceptable.	<input type="checkbox"/>	
Registrar is recognized.	<input type="checkbox"/>	
SCC logo and CMDCAS references are present.	<input type="checkbox"/>	
Effective date of registration. Field is identified as " <b>Effective Date</b> "	<input type="checkbox"/>	
Expiry date. Field is identified as " <b>Expiry</b> ", " <b>Expiry Date</b> ", or " <b>Recertification Due Date</b> "	<input type="checkbox"/>	
Validity period ≤ 3 years.	<input type="checkbox"/>	
Certificate contains Unique Certificate Number.	<input type="checkbox"/>	
Name, title, and signature of certification authority.	<input type="checkbox"/>	
All pages of certificate are present.	<input type="checkbox"/>	

Criteria	conforms	Comments/info for MDS
Issued to full name of manufacturer as it appears on application/licence and label.	<input type="checkbox"/>	



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Issued to complete civic address matching application/licence and label.	<input type="checkbox"/>	
Criteria are ISO 13485:2003 or 2016 and Medical Devices Regulations – Part 1 – SOR 98/282	<input type="checkbox"/>	
Scope activities limited to design, development, manufacture, production, servicing, installation, or distribution.	<input type="checkbox"/>	
Activities include “manufacture” or “production” Activities include “design” or “development and development” for class III/IV devices.	<input type="checkbox"/>	
Scope is unambiguous and covers app./lic. devices. Does not contain product names/models/licence numbers.	<input type="checkbox"/>	
Auditing Organisation is Authorized or Recognized	<input type="checkbox"/>	
Statement of Authorization or Recognition.	<input type="checkbox"/>	
Field labelled “Effective Date”	<input type="checkbox"/>	
Field labelled “Expiry Date”	<input type="checkbox"/>	
Validity period ≤ 3 years	<input type="checkbox"/>	
Unique identification code labelled “certificate number” or “certification document number”	<input type="checkbox"/>	<input type="checkbox"/> new <input type="checkbox"/> revised
Name, title, and signature of certification authority	<input type="checkbox"/>	
Pagination (page x or y) included on all pages . All pages present.	<input type="checkbox"/>	
Method to verify validity	<input type="checkbox"/>	

<b>ISO 13485 Quality Management System Certificate Screening</b>	
Cert. # (new):	Cert. # (old) :
Cert revisions:	
First (most prominent) and full name on cert. matches application/licence, and label.	Effective date of registration. Field is identified as “Effective Date”
Address on cert, matches application, licence, and label.	Expiry date. Field is identified as “Expiry” or “Expiry date”. Or “Recertification due date”.
Standard is (CAN/CSA) ISO 13485:2003 or 2016	Validity period <= 3 years.
Scope includes “manufacture” or “production”. Scope includes “design” (fr. conception) for Class III-IV.	Certificate contains unique certificate #. New                      Revised
Scope is unambiguous and covers app. device. Scope does not contain specific product names / models / numbers or licence numbers. Reference to attachment is acceptable.	Name, title, and signature of certification authority.
Registrar is recognized.	Number of additional sites appearing on certificate:
SCC logo CMDCAS reference are present.	All pages of certificate are present.



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