## DEPARTMENT OF HEALTH AND HUMAN SERVICES Food and Drug Administration

## **Indications for Use**

Form Approved: OMB No. 0910-0120

Expiration Date: 06/30/2023
See PRA Statement below.

510(k) Numb	oer (if known)			
K223848				
Device Nam Intrisound™	e <sup>1</sup> Tuned Lumen® 155 Hear	ring Aids		
Intrisound <sup>T</sup> individuals	18 years of age or older	with perceived mild to mode	nduction hearing aids, intended to amerate hearing impairment. They are adhout the assistance of a hearing care production	justed by the user to
				8
		*		
				-
Type of Use	(Select one or both, as ap	plicable)		
	Prescription Use (Pa	art 21 CFR 801 Subpart D)	Over-The-Counter Use (21 CFR 80	01 Subpart C)

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

CONTINUE ON A SEPARATE PAGE IF NEEDED.

## \*DO NOT SEND YOUR COMPLETED FORM TO THE PRA STAFF EMAIL ADDRESS BELOW.\*

The burden time for this collection of information is estimated to average 79 hours per response, including the time to review instructions, search existing data sources, gather and maintain the data needed and complete and review the collection of information. Send comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden, to:

Department of Health and Human Services Food and Drug Administration Office of Chief Information Officer Paperwork Reduction Act (PRA) Staff PRAStaff@fda.hhs.gov

"An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB number."