



SEP 17 2001

Food and Drug Administration  
9200 Corporate Boulevard  
Rockville MD 20850

Matang Manufacturing Sdn. Bhd.  
C/O Mr. Kok-Kee Hon  
Official Correspondent  
6324 Meeting House Way  
Alexandria, Virginia 22312-1718

Re: K012558

Trade/Device Name: Powder Free Latex Patient Examination Gloves with  
Aloe Vera and Protein Content Labeling Claim of 50 Micrograms or Less  
of Total Water Extractable Protein Per Gram

Regulation Number: 880.6250

Regulation Name: Patient Examination Gloves

Regulatory Class: I

Product Code: LYY

Dated: August 7, 2001

Received: August 8, 2001

Dear Mr. Hon:

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 (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. 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.

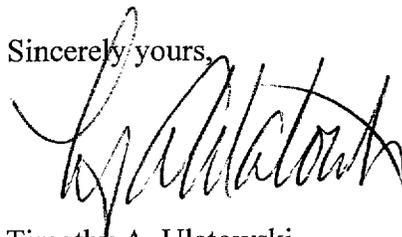
If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish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

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); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (section 531-542 of the Act; 21); CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 809.10 for *in vitro* diagnostic devices), please contact the Office of Compliance at (301) 594-4618. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address <http://www.fda.gov/cdrh/dsma/dsmamain.html>.

Sincerely yours,



Timothy A. Ulatowski  
Director  
Division of Dental, Infection Control  
and General Hospital Devices  
Office of Device Evaluation  
Center for Devices and  
Radiological Health

Enclosure



APPENDIX 2

INDICATIONS FOR USE

Applicant: MATANG MANUFACTURING SDN. BHD.

510 (k) Number (If known): K012558

Device Name: Matang Powder-Free Latex Patient Examination Gloves with Aloe Vera and Protein Content Labeling Claim of 50 Micrograms or less of total water extractable protein per gram.

Indications For Use:

A medical glove is worn on the hand of healthcare and similar personnel to prevent contamination between healthcare personnel and the patient.

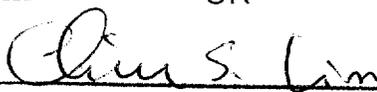
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Concurrence of CDRH Office of Device Evaluation (ODE)

Prescription Use -----  
Per 21 CFR 801.109

OR

Over-The-Counter

  
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(Division Sign-Off)  
Division of Dental, Infection Control,  
and General Hospital Devices  
510(k) Number K012558