

Summary of Safety and Effectiveness

DEC 07 2012

Sponsor: aap Implantate AG
Lorenzweg 5
D-12099 Berlin, Germany

Company Contact: Dipl.-Ing. Marc Seegers-
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Date May 9th 2012

Trade Name: aap LOQTEQ® Proximal Humerus Plate 3.5 System

Common Name: Proximal Humerus Plate 3.5 System

Classification Name and Reference: 21 CFR 888.3030 Single/multiple component metallic bone fixation appliances and accessories – Class II and 21 CFR 888.3040 Smooth or threaded metallic bone fixation fastener - Class II

Device Product Code and Panel Code: Orthopedics/87/ HRS: Plate, Fixation, Bone
Orthopedics/87/ HWC: Screw, Fixation, Bone

Predicate device: 3.5 mm LCP® Proximal Humerus Plate, Synthes (USA) with the premarket notifications K011815 (SEP 6, 2001) and K041860 (SEP 8, 2004)

Device Description: Bone plates and screws are used for fixation of bone fragments, i.e., for treatment of bone fractures and other bone injuries. Bone plates are fixed with bone screws. Bone plates and bone screws are implants. If the plates are used in conjunction with locking screws, a so called internal fixator will be realized (internal fixation).

The LOQTEQ® Proximal Humerus Plate 3.5 System consists of:

- LOQTEQ® Proximal Humerus Plate 3.5, short
- LOQTEQ® Proximal Humerus Plate 3.5, long

- LOQTEQ® Cortical Screw 3.5, T15, self-tapping
- LOQTEQ® Cancellous Screw 3.8, T15
- Cortical Screw 3.5, self-tapping

- Set of Instruments, Proximal Humerus Plate

Material: Plates are made of Ti6Al4V (ASTM F136 or ISO 5832-3)
Screws are made of Ti6Al4V (ASTM F136 or ISO 5832-3)

Indications: fractures and fracture dislocations, osteotomies, and nonunions of the proximal humerus, particularly in osteopenic bone

Substantial Equivalence

The Substantial Equivalence of the new device and the predicate device is based on similar intended use, design, functionality, components and materials in use.

Documentation including mechanical testing to show the substantial equivalence and safety and effectiveness has been provided with this submission.

**Performance Data
(Non-Clinical and /
or Clinical):**

Non-clinical tests have been performed and show the effectiveness and safety of the device.

Summary of Non-clinical tests:

Type of test:

Fatigue implant tests with progressive loadings, representing worst case scenario with respect to clinical use.

Assessment of test results:

Substantial equivalence with respect to the mechanical performance of the aap system could be stated due to the test results gained. The subject device is safe and effective, and whose performance meets the requirements of its pre-defined acceptance criteria and intended uses.

Documentation regarding the mechanical testing to show the substantial equivalence and safety and effectiveness has been provided with this submission.



Food and Drug Administration
10903 New Hampshire Avenue
Document Control Center – WO66-G609
Silver Spring, MD 20993-002

Aap Implantate Ag
% Mr. Marc Seegers
Director QA/RA
Lorenzweg 5
D-12099 Berlin
Germany

Letter dated: December 7, 2012

Re: K121495

Trade/Device Name: LOQTEQ[®] Proximal Humerus Plate 3.5 System

Regulation Number: 21 CFR 888.3030

Regulation Name: Single/multiple component metallic bone fixation appliances and accessories

Regulatory Class: Class II

Product Code: HRS, HWC

Dated: October 25, 2012

Received: November 28, 2012

Dear Mr. Seegers:

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. 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.

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

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device-related adverse events) (21 CFR 803); 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 (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please go to <http://www.fda.gov/AboutFDA/CentersOffices/CDRH/CDRHOffices/ucm115809.htm> for the Center for Devices and Radiological Health's (CDRH's) Office of Compliance. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to <http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm> for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address <http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm>.

Sincerely yours,

Mark N. Melkerson

Mark N. Melkerson
Director
Division of Orthopedic Devices
Office of Device Evaluation
Center for Devices and
Radiological Health

Enclosure

Indications for Use Statement

510(k) Number (if known): K121495

Device Name: LOQTEQ® Proximal Humerus Plate 3.5 System

Indications for Use:

The aap LOQTEQ® Proximal Humerus Plate 3.5 System includes LOQTEQ® Proximal Humerus Plate 3.5 short and LOQTEQ® Proximal Humerus Plate 3.5 long. The plates accept 3.5 mm cortical locking screws and 3.5 mm cortical screws as well as 3.8 mm cancellous locking screws. They are intended for

fractures and fracture dislocations, osteotomies, and nonunions of the proximal humerus, particularly in osteopenic bone

Prescription Use
(Part 21 CFR 801 Subpart D)

AND/OR

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

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE OF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)

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Krishna Asundi
for (Division Sign-Off)
Division of Orthopedic Devices

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