

K031945

SEP 22 2003

## 510(k) Summary

**510(k) Number:**

**Company:** Arthrex, Inc.  
**Address:** 2885 S. Horseshoe Dr., Naples, FL 34104  
**Telephone:** (239) 643-5553  
**Facsimile:** (239) 430-3494  
**Contact:** Ann Waterhouse

**Trade Name:** Arthrex TRIMit™ Screw  
**Common Name:** Screw, Fixation, Bone  
**Classification:** Class II, per 888.3040  
**Product Code:** HWC

**Description:**

The Arthrex TRIMit™ Screw is manufactured using poly(L-lactide). It is a fully threaded small diameter screw. Further description is contained in Tab 6.

**Indications for Use:**

The Arthrex TRIMit implant is a bioabsorbable polylactide (PLLA) screw intended to provide fixation of small bone fragments such as apical fragments. Specific indications include metatarsal and metacarpal fractures.

**Predicate Devices:**

Please see Tab 7 for specific information concerning predicate devices.

**Substantial Equivalence:**

By definition, substantial equivalence means that a device has the same intended use and technical characteristics as the predicate device, or has the same intended use and different technological characteristics, but can be demonstrated to be as safe and effective as the predicate device. The difference between the Arthrex TRIMit Screw and the predicate devices with similar indications do not raise any questions regarding the safety and effectiveness of the implant. Furthermore, the material is well characterized and has been used in predicate devices with similar indications. The device, as designed, is as safe and effective as predicate devices.

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Food and Drug Administration  
9200 Corporate Boulevard  
Rockville MD 20850

Ms. Ann Waterhouse  
Regulatory Affairs Specialist  
Arthrex, Inc.  
2885 South Horseshoe Drive  
Naples, FL 34104

Re: K031945

Trade/Device Name: Arthrex TRIMit Screw  
Regulation Number: 21 CFR 888.3040  
Regulation Name: Smooth or threaded metallic bone fixation fastener  
Regulatory Class: II  
Product Code: HWC  
Dated: June 20, 2003  
Received: June 27, 2003

Dear Ms. Waterhouse:

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.

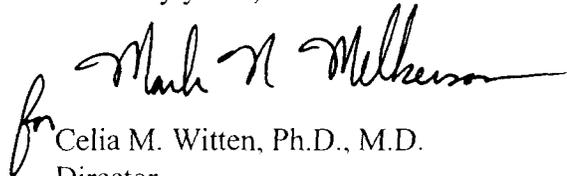
Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's 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 (Sections 531-542 of the Act); 21 CFR 1000-1050.

Page 2 - Ms. Ann Waterhouse

This letter will allow you to begin marketing your device as described in your Section 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), please contact the Office of Compliance at (301) 594-\_\_\_. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). 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) 443-6597 or at its Internet address <http://www.fda.gov/cdrh/dsma/dsmamain.html>

Sincerely yours,

A handwritten signature in black ink, appearing to read "Mark N. Milbranson". The signature is written in a cursive style with a long horizontal stroke at the end.

Celia M. Witten, Ph.D., M.D.

Director

Division of General, Restorative  
and Neurological Devices

Office of Device Evaluation

Center for Devices and

Radiological Health

Enclosure

K031945

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**510(k) Number (if known):**

**Device Name:**

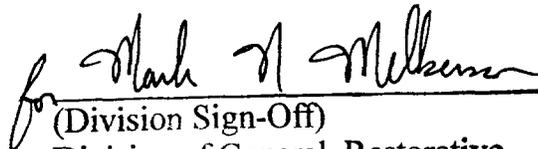
**Indications for Use:**

The Arthrex TRIMit implant is a bioabsorbable polylactide (PLLA) screw intended to provide fixation of small bone fragments such as apical fragments. Specific indications include metatarsal and metacarpal fractures.

(PLEASE DO NOT WRITE BELOW THIS LINE—CONTINUE ON ANOTHER PAGE IF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)

(Option Format 3-10-98)



(Division Sign-Off)  
Division of General, Restorative  
and Neurological Devices

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