

AUG 23 2006

K062173



## 510(K) SUMMARY OF SAFETY AND EFFECTIVENESS

In accordance with the Food and Drug Administration Rule to implement provisions of the Safe Medical Devices Act of 1990 and in conformance with 21 CFR 807, this information serves as a Summary of Safety and Effectiveness for the use of the Bone Graft Syringe.

Submitted By:	Wright Medical Technology, Inc.
Date:	July 27, 2006
Contact Person:	Wesley L. Reed Regulatory Affairs Specialist II
Proprietary Name:	<b>Bone Graft Syringe</b>
Common Name:	Piston Syringe
Classification Name and Reference:	21 CFR 880.5860 Piston syringe – Class II
Device Product Code and Panel Code:	FMF/General Hospital-80

### DEVICE INFORMATION

#### A. INTENDED USE

The Bone Graft Syringe is intended for use as a piston syringe for aspiration of bone marrow, autologous blood, plasma, or other body fluids. The syringe can be used to mix bone graft materials with aspirated fluids and deliver the composite graft material to the orthopedic surgical site.

#### B. DEVICE DESCRIPTION

Additional sizes of the previously cleared Bone Graft Syringe (510(k): K023088) are being added to the current product offering. The syringe can be used for withdrawing body fluids and re-injecting the fluids and/or composite graft materials into the body.

#### C. SUBSTANTIAL EQUIVALENCE INFORMATION

The intended use, materials, and design features of the Bone Graft Syringe are the same as the predicate devices previously cleared for market. The safety and effectiveness of the Bone Graft Syringe is adequately supported by the substantial equivalence information provided within the Premarket Notification.

#### headquarters

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Food and Drug Administration  
9200 Corporate Boulevard  
Rockville MD 20850

**AUG 23 2006**

Wright Medical Technology, Inc.  
% Mr. Wesley L. Reed  
Regulatory Affairs Specialist II  
5677 Airline Road  
Arlington, Tennessee 38002

Re: K062173  
Trade/Device Name: Bone Graft Syringe  
Regulation Number: 21 CFR 880.5860  
Regulation Name: Piston syringe  
Regulatory Class: II  
Product Code: FMF  
Dated: July 27, 2006  
Received: June 31, 2006

Dear Mr. Reed:

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 – Mr. Wesley L. Reed

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 (240) 276-0115. 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 (240) 276-3150 or at its Internet address <http://www.fda.gov/cdrh/industry/support/index.html>.

Sincerely yours,

A handwritten signature in black ink, appearing to read "for Mark N. Melkerson".

Mark N. Melkerson  
Director  
Division of General, Restorative  
and Neurological Devices  
Office of Device Evaluation  
Center for Devices and  
Radiological Health

Enclosure

K062173

### Indications for Use

510(k) Number (if known):

Device Name: Bone Graft Syringe

Indications For Use:

The Bone Graft Syringe is intended for use as a piston syringe for aspiration of bone marrow, autologous blood, plasma, or other body fluids. The syringe can be used to mix bone graft materials with aspirated fluids and deliver the composite graft material to the orthopedic surgical site.

Prescription Use   X    
(Part 21 CFR 801 Subpart D)

AND/OR

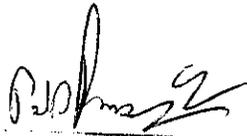
Over-The-Counter Use \_\_\_\_\_  
(21 CFR 807 Subpart C)

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

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Concurrence of CDRH, Office of Device Evaluation (ODE)

1 of 1



(Division Sign-Off)

**Division of General, Restorative  
and Neurological Devices**

510(k) Number K062173