

K012157

SEP 11 2001

510(K) Summary

This summary of 510(K) safety and effectiveness information is submitted in accordance with the requirements of SMDA and 21 CFR 807.92

1.     **Submitter:**                   Churchill Medical Systems, Inc.  
       **Address:**                 87 Venture Drive  
                                      Dover, NH 03820  
       **Phone:**                   603-743-5988  
       **Fax:**                     603-743-6328  
       **Contact:**                 Keith Paluch (Consultant)
  
2.     **Device Name:**             4 way Stopcock  
       **Trade Name:**            4 Way "Hi-Flow" Stopcock Latex Free, Lipid Resistant  
       **Classification**  
       **Name:**                    IV Set Stopcock, IV Administration Set
  
3.     **Classification:**         Class II, General Hospital 80 FPA
  
4.     **Predicate Device:**       Ohmeda Connecta Plus 1 and Plus 3, 2 and 3 way stopcocks (K974083)
  
5.     **Device Description:**     The Churchill Medical Systems 4 way stopcock consist of a housing with two one male luer with rotating lock ring. The diversion handle opens or closes each port.
  
6.     **Intended Use:**           This device is used to direct and control the flow of fluids. They are added to IV cannula or extension sets for simultaneous or alternate administration of fluids.
  
7.     **Performance Summary:**   This device is manufactured and tested in accordance with physical, chemical and biological specification conforming to the applicable requirements set forth in ISO 10993, USPXX111, ISO 11607-1, ISO 11135, USP Pyrogenicity test requirements as well as documented internal requirements for physical testing.
  
8.     **Conclusion:**             This device shares similar technical characteristics to 4 way stopcocks currently available in the marketplace. Specifically, this device performs similarly to the predicate device, referred to as Connecta Plus 1 and 3 Stopcocks (K974083). Testing summary results confirm this device to be safe and effective and substantially equivalent to the predicate device.



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

SEP 11 2001

Food and Drug Administration  
9200 Corporate Boulevard  
Rockville MD 20850

Mr. Keith Paluch  
Manager  
Churchill Medical Systems, Incorporated  
87 Venture Drive  
Dover, New Hampshire 03820

Re: K012157  
Trade/Device Name: Churchill Medical Systems Stopcock  
Regulation Number: 880.5440  
Regulatory Class: II  
Product Code: FMG  
Dated: July 2, 2001  
Received: July 11, 2001

Dear Mr. Paluch:

We have reviewed your Section 510(k) notification of intent to market the device referenced above and we 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). 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 (Pre-market Approval), 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 895. A substantially equivalent determination assumes compliance with the Current Good Manufacturing Practice requirements, as set forth in the Quality System Regulation (QS) for Medical Devices: General regulation (21 CFR Part 820) and that, through periodic QS inspections, the Food and Drug Administration (FDA) will verify such assumptions. Failure to comply with the GMP regulation may result in regulatory action. In addition, FDA may publish further announcements concerning your device in the Federal Register. Please note:

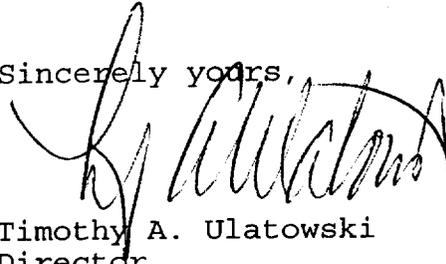
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this response to your premarket notification submission does not affect any obligation you might have under sections 531 through 542 of the Act for devices under the Electronic Product Radiation Control provisions, or other Federal laws or regulations.

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) 594-4518. 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

Indications For Use

510(k) Number (if known): K012157  
Device Name: Churchill Medical Systems Stopcock

Indications For Use:

Churchill Medical Systems Stopcock is a valve for use in I.V. therapy and pressure monitoring to direct and control the flow of medical fluids.

  
(Division Sign-Off)  
Division of Dental, Infection Control,  
and General Hospital Devices  
510(k) Number K012157

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Concurrence of the CDRH, Office of Device Evaluation (ODE)

Prescription Use \_\_\_\_\_

Or

Over-The-Counter Use \_\_\_\_\_