



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

AUG 18 1998

Food and Drug Administration
9200 Corporate Boulevard
Rockville MD 20850

Ms. Jody J. Fleming
Regulatory Affairs Specialist
Camino Neurocare, Inc.
5955 Pacific Center Blvd.
San Diego, California 92121

Re: K981846
Trade Name: Parenchymal Bolt Pressure Monitoring Kit
Regulatory Class: II
Product Code: GWM
Dated: May 22, 1998
Received: May 26, 1998

Dear Ms. Fleming:

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 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.

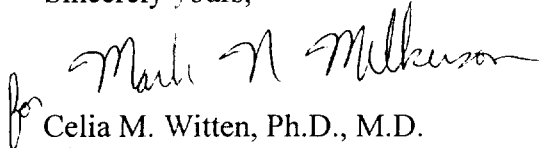
If your device is classified (see above) into either class II (Special Controls) or class III (Pre-market Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 895. A substantially equivalent determination assumes compliance with the current Good Manufacturing Practice requirement, 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: 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) 594-4595. 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" (21 CFR 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its internet address "<http://www.fda.gov/cdrh/dsmamain.html>".

Sincerely yours,

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

Director
Division of General and
Restorative Devices
Office of Device Evaluation
Center for Devices and
Radiological Health

Enclosure

SECTION 8 - STATEMENT OF INDICATIONS FOR USE

510(k) Number (if known): K 981846

Device Name: Parenchymal Bolt Pressure Monitoring Kit

Indications for Use:

The Parenchymal Bolt Pressure Monitoring Kit is indicated for use on patients that require continuous intracranial pressure monitoring.

This device should only be used by a physician or qualified personnel under the direction of a physician.

Care must be taken to ensure compliance with the manufacturer's Directions for Use.

Prescription Use Only
(Per 21 CFR 801.109)

Mark A. Millerson

*Ben
Craw*

(Division Sign-Off)
Division of General Restorative Devices
510(k) Number K981846