



OCT 15 1998

K982772

GE Medical Systems

P.O. Box 414, W-709
Milwaukee, WI 53201
USA

SUMMARY OF SAFETY AND EFFECTIVENESS

- This 510(k) summary of safety and effectiveness information is submitted in accordance with the requirements of 21 CFR Part 807.87(h).
- Identification of Submitter
Larry A. Kroger, Ph.D., 414-544-3894, July 31, 1998
- Identification of the Product
Signa Profile Quadrature Thoracic/Lumbar Spine Phased Array Coil

Manufacturer Address: GE Yokogawa Medical Systems, Ltd.
4-7-127, Asahigaoka, Hino-Shi
Tokyo, 191 Japan
- Marketed Devices
The Signa Profile MR System with the Quadrature Thoracic/Lumbar Spine Phased Array Coil is substantially equivalent to the currently marketed Signa Profile Body Flexible Coil.
- Device Description
The Profile Quadrature Thoracic/Lumbar Spine Phased Array Coil is a receive only coil and can receive the quadrature signal . It is designed for use with a vertical magnetic field MR imaging system.
- Indications for Use
The Indications for Use for the Quadrature Thoracic/Lumbar Spine Phased Array Coil expands the capability of the Signa Profile System. It can be used to image the thoracic spine, lumbar spine, chest, abdomen, pelvis and hips.
- Comparison with Predicate

The Quadrature Thoracic/Lumbar Spine Phased Array Coil is similar Signa Profile Body Flexible Coil except that the Thoracic/Lumbar Spine Phased Array Coil has a larger circumference and uses phased array technology.
- Summary of Studies

The Quadrature Thoracic/Lumbar Spine Phased Array Coil was evaluated to the appropriate NEMA performance standards. The coil was evaluated to the International safety standards IEC 601-1 and IEC 601-2-33 and performed to stated specifications.
- Conclusions

It is the opinion of GE that the Signa Profile System with the Quadrature Thoracic/Lumbar Spine Phased Array Coil is substantially equivalent to the presently marketed Signa Profile Body Flexible Coil. This coil does not result in any new potential hazards.



Food and Drug Administration
9200 Corporate Boulevard
Rockville MD 20850

OCT 15 1998

Larry A. Kroger, Ph.D.
Senior Regulatory Programs Manager
GE Medical Systems
P.O. Box 414 , W-709
Milwaukee, WI 53201

Re: K982772
Signa Profile Quadrature Thoracic/Lumbar Spine
Phased Array Coil
Dated: July 31, 1998
Received: August 7, 1998
Regulatory class: II
21 CFR 892.1000/Procode: 90 MOS

Dear Dr. Kroger:

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 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: 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) 594-4613. 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/dsma/dsmamain.html>".

Sincerely yours,

Lillian Yin, Ph.D.
Director, Division of Reproductive,
Abdominal, Ear, Nose and Throat
and Radiological Devices
Office of Device Evaluation
Center for Devices and
Radiological Health

Enclosure

510(k) Number (if known): K982772

Device Name: Signa Profile Quadrature Thoracic/Lumbar Spine Phased Array Coil

Indications For Use:

The Indications for Use for the Signa Profile Quadrature Thoracic/Lumbar Spine Phased Array Coil expands the imaging performance of the Signa Profile System.

The Quadrature Thoracic / Lumbar spine Phased Array coil can also be used to image the following regions of anatomy:

- Thoracic Spine
- Lumbar Spine
- Chest
- Abdomen
- Pelvis
- Hips.

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

Concurrence of CDRH, Office of Device Evaluation (ODE)

David G. Johnson
(Division Sign-Off)
Division of Reproductive, Abdominal, ENT,
and Radiological Devices

510(k) Number K982772

Prescription Use OR Over-The-Counter Use
(Per 21 CFR 801.109)