FEB 1 1 1999

K984305

510(k) Summary

Proprietary Name:	Zeta MultiZone Locking Nail System
Common Name:	IM Rod
Classification Name & Reference:	Intramedullary Fixation Rod 21 CFR 888.3020
Proposed Regulatory Class:	II
Device Product Code:	87 HSB

For information contact:

Joseph Volpe
Senior Regulatory Affairs Specialist
Howmedica Inc.
359 Veterans Boulevard
Rutherford, NJ 07070
Telephone: (201) 507-6695
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Date Prepared: December 1, 1998

The Zeta MultiZone Locking Nail System consists of a family of round nails used for intramedullary nailing of femoral, tibial and humeral fractures. This line extension is to include a humeral nail, cross-locking screws and end caps. The humeral nails are available in varying diameters and lengths and have proximal and distal holes for cross-locking. The nails and additional components are fabricated from either titanium alloy or stainless steel.

The Zeta MultiZone Humeral Locking Nail System is intended to provide temporary stabilization of various types of fractures, malunions and nonunions of the humerus. The nails are inserted using an opened or closed technique and can be statically or dynamically locked.

The substantial equivalence of the humeral nail is based on an equivalence in intended use, materials, designs and operational principles to Howmedica's Alta IM Rod System, Howmedica's Locking Nail System and Gamma Locking Nail System.

DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Food and Drug Administration
9200 Corporate Boulevard
Rockville MD 20850

FEB 1 1999

Mr. John F. Dichiara
Director of Regulatory Affairs and Public Policy
Howmedica Inc.
Pfizer Medical Technology Group
359 Veterans Boulevard
Rutherford, New Jersey 07070-2584

Re: K984305
Zeta Multizone Humeral Locking Nail System
Regulatory Class: II
Product Code: HSB
Dated: December 1, 1998
Received: December 2, 1998

Dear Mr. Dichiara:

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 (Premarket 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) 594-4659. 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

Indications for Use

510(k) Number (if known): K984305

Device Name: Zeta MultiZone Humeral Locking Nail System

Indications for Use:

The Zeta MultiZone Humeral Locking Nail System is intended to provide temporary stabilization of various types of fractures, malunions and nonunions of the humerus. The nails are inserted using an opened or closed technique and can be statically or dynamically locked.

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

Concurrence of CDRH, Office of Device Evaluation (ODE)

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

(Optional Format 1-2-96)

Stephen Rhodes for (MW

(Division Sign-Off)
Division of General Restorative Devices
510(k) Number K984305