

K990300

SE 2-16-99



Allegiance Healthcare Corporation
1500 Waukegan Road
McGaw Park, IL 60085
847.473.1500
FAX: 847.785.2461

ATTACHMENT E

SUMMARY OF SAFETY AND EFFECTIVENESS

Manufacturer:	Allegiance Healthcare Corporation V. Mueller Business Unit 1435 Lake Cook Road Deerfield, IL 60015
Regulatory Affairs Contact	Patricia Sharpe-Gregg 1500 Waukegan Road McGaw Park, Illinois 60085
Telephone:	(847) 578-3636
Date Summary Prepared:	January 27, 1999
Product Trade Name:	SupraShield Express™ Sterilization Wrap
Common Name:	CSR Wrap or Sterilization Wrap
Classification:	Sterilization Wrap
Predicate Device: (K921243)	Convertors® Sterilization Wrap
Description:	The Allegiance SupraShield Express™ Sterilization Wrap is composed of a "SMS Sandwich type construction (Spun Bonded - Melt Blown - Spun Bonded) fabric.
Intended Use:	The Allegiance SupraShield Express™ Sterilization Wrap is a single-use, non-sterile device. It is intended to be used to enclose another medical device that is to be sterilized by a healthcare provider. It is intended to allow sterilization of the enclosed medical device and also to maintain sterility of the enclosed device until used. It is intended to be used in steam and ethylene oxide (EO) sterilization processes.

SB



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Substantial Equivalence:

The Allegiance Allegiance SupraShield™ Express™ Sterilization Wrap is substantially equivalent to the Convertors Sterilization Wrap in that the:

- intended use is the same
- performance attributes are the same

Summary of Testing:

The material used in the composition of this sterilization wrap was evaluated and tested as required in ISO Standard 10993 Part 1. The material was subjected to skin sensitization, intracutaneous reactivity and cytotoxicity testing. Physical and performance testing was completed including sterilization performance testing. This product is in compliance with established standards, where applicable, and is deemed acceptable for its intended use.



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Food and Drug Administration
9200 Corporate Boulevard
Rockville MD 20850

FEB 10 1999

Ms. Patricia Sharpe-Gregg
Allegiance Healthcare Corporation
1500 Waukegan Road
William Merz Building
McGaw Park, Illinois 60085

Re: K990300
Trade Name: Suprashield Express Sterilization Wrap
Regulatory Class: II
Product Code: FRG
Dated: January 27, 1999
Received: February 1, 1999

Dear Ms. Sharpe-Gregg

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 Good Manufacturing Practice for Medical Devices: General (GMP) regulation (21 CFR Part 820) and that, through periodic GMP 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

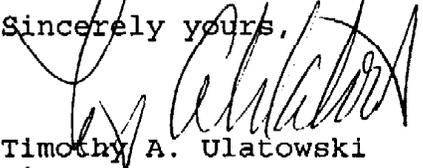
Page 2 - Ms. Sharpe-Gregg

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) 594-4692. 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,



Timothy A. Ulatowski
Director
Division of Dental, Infection Control,
and General Hospital Devices
Office of Device Evaluation
Center for Devices and
Radiological Health

Enclosure



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Special 510(k) Device Modification: SupraShield® Express Sterilization Wrap
 V. Mueller Business Unit
 Page 1 of 1

510(k) Number (if known): Unknown

Device Name: SupraShield® Express™ Sterilization Wrap

Indications For Use: The SupraShield® Express™ Sterilization Wrap is a device intended to be used to enclose another medical device that is to be sterilized by a healthcare provider. It is intended to allow sterilization of the enclosed medical device and also to maintain sterility of the enclosed device until used.

This wrap is intended for use in steam or ethylene oxide (EO) sterilization processes.

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

Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use _____
 (Per 21 CFR 801.109)

Chia Sr Lim
 (Division Sign-Off)
 Division of Dental, Infection Control,
 and General Hospital Devices

Over-The Counter Use X

510(k) Number K9902002