



NuVasive Specialized Orthopedics, Inc.  
Lance Justice  
Regulatory Affairs Specialist  
101 Enterprise, Suite 100  
Aliso Viejo, California 92656

April 3, 2018

Re: K180503

Trade/Device Name: PRECICE STRYDE System  
Regulation Number: 21 CFR 888.3020  
Regulation Name: Intramedullary Fixation Rod  
Regulatory Class: Class II  
Product Code: HSB, HWC  
Dated: February 22, 2018  
Received: February 26, 2018

Dear Lance Justice:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and 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) that do not require approval of a premarket approval application (PMA). 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. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to <http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm> for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

For comprehensive regulatory information about medical devices and radiation-emitting products, including information about labeling regulations, please see Device Advice (<https://www.fda.gov/MedicalDevices/DeviceRegulationandGuidance/>) and CDRH Learn (<http://www.fda.gov/Training/CDRHLearn>). Additionally, you may contact the Division of Industry and Consumer Education (DICE) to ask a question about a specific regulatory topic. See the DICE website (<http://www.fda.gov/DICE>) for more information or contact DICE by email ([DICE@fda.hhs.gov](mailto:DICE@fda.hhs.gov)) or phone (1-800-638-2041 or 301-796-7100).

Sincerely,

  
Mark N. Melkerson -S

Mark N. Melkerson  
Director  
Division of Orthopedic Devices  
Office of Device Evaluation  
Center for Devices and  
Radiological Health

Enclosure

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Food and Drug Administration

Form Approved: OMB No. 0910-0120  
Expiration Date: 06/30/2020  
See PRA Statement below.

## Indications for Use

510(k) Number (if known)

K180503

Device Name

PRECICE STRYDE System

Indications for Use (Describe)

The PRECICE STRYDE System is indicated for limb lengthening, open and closed fracture fixation, pseudoarthrosis, mal-unions, non-unions, or bone transport of long bones.

Type of Use (Select one or both, as applicable)

Prescription Use (Part 21 CFR 801 Subpart D)

Over-The-Counter Use (21 CFR 801 Subpart C)

### CONTINUE ON A SEPARATE PAGE IF NEEDED.

This section applies only to requirements of the Paperwork Reduction Act of 1995.

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## 510(k) Summary

In accordance with Title 21 of the Code of Federal Regulations, Part 807, and in particular 21 CFR §807.92, the following summary of information is provided:

### A. Submitted by:

Lance Justice  
 Regulatory Affairs Specialist  
 NuVasive Specialized Orthopedics, Inc.  
 101 Enterprise, Suite 100  
 Aliso Viejo, CA 92656  
 Telephone: (949) 544-6540

Date Prepared: February 22, 2018

### B. Device Name

Trade or Proprietary Name:	<i>PRECICE® STRYDE™ System</i>
Common or Usual Name:	Intramedullary Fixation Rod
Classification Name:	Rod, Fixation, Intramedullary and Accessories; Screw, Fixation, Bone

Device Class:	Class II
Classification:	21 CFR § 888.3020 and 888.3040
Product Code:	HSB, HWC

### C. Predicate Devices

The subject *PRECICE STRYDE System* is substantially equivalent to the predicate device, *PRECICE System* (K173129).

### D. Device Description

The *PRECICE STRYDE System* includes the *PRECICE STRYDE Nail*, locking screws, end caps, surgical instruments, and external remote controller (ERC). The *PRECICE STRYDE* nails and end caps are supplied sterile by gamma radiation while the locking screws and instruments are supplied non-sterile and must be sterilized prior to use. The system is designed to achieve limb correction through gradual lengthening or compression and providing internal fixation for fractures of long bones. The telescopic *PRECICE STRYDE Nail* is implanted using locking screws, end caps, and reusable surgical instruments. The *PRECICE STRYDE Nail* contains an enclosed rare earth magnet, telescoping distraction rod, and planetary gearing which allows the length of the nail to be adjusted non-invasively by the External Remote Controller (ERC). The *PRECICE STRYDE Nail* is available in various diameters, lengths and screw hole configurations to accommodate a variety of patient anatomies and implantation methods. The locking screws are also available in a variety of diameters, lengths, and thread styles. The ERC is available in several compatible models.

The purpose of this submission is to implement design changes to the predicate *PRECICE System* (K173129) to create a product line extension which includes the *PRECICE STRYDE Nail* and compatible locking screws and end caps. These design changes meet improved performance specifications which allow for modification of the device labeling; specifically, the contraindications, warnings, and precautions regarding maximum patient weight and ERC/tissue

gap. These modifications to the *PRECICE System* do not change the indications for use or intended use of the device, nor do they change the fundamental scientific technology of the device.

**E. Intended Use**

The *PRECICE STRYDE System* is indicated for limb lengthening, open and closed fracture fixation, pseudoarthrosis, mal-unions, non-unions, or bone transport of long bones.

**F. Comparison of Technological Characteristics with the Predicate Device**

As was established in this submission, the subject *PRECICE STRYDE System* is substantially equivalent to the predicate PRECICE System (K173129) previously cleared by the FDA for commercial distribution in the United States. There have been no design changes to the implants previously cleared in the predicate 510(k)s. The subject device has been shown to be substantially equivalent and have equivalent technological characteristics to its predicate device through comparison in areas including design, labeling/intended use, material composition, and function.

**G. Performance Data**

Nonclinical performance verification testing was performed to demonstrate that the subject *PRECICE STRYDE System* is substantially equivalent to the predicate device. The following testing was performed

Testing Description	Applicable Standard
Static Compression Bending Strength	ASTM F1264 - <i>Standard Specification and Test Methods for Intramedullary Fixation Devices</i>
Dynamic Compression Bending strength	
Torsion	
Torque Resistance	ASTM F543 - <i>Standard Specification and Test Methods for Metallic Medical Bone Screws</i>
Axial Pullout	
Tensile Strength	N/A
Distraction Force	N/A

The results demonstrate that the subject *PRECICE STRYDE System* is substantially equivalent to the predicate.

**H. Conclusions**

The subject *PRECICE STRYDE System* has been shown to be substantially equivalent to the legally marketed predicate device for its intended use.