510(k) SUMMARY OF SAFETY AND EFFECTIVENESS **NexGen®** Complete Knee Solution - Trabecular Metal Augments Page 1 of 2

Submitter Name And Address:

Implex Corp.

80 Commerce Drive

Allendale, New Jersey 07401-1600

JAN 1 5 2003

Contact Person:

Marci Halevi

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Date Prepared:

December 16, 2002

Device Trade Name:

NexGen® Complete Knee Solution – Trabecular Metal

Augments

Device Common Name:

Knee System Augments

Classification Number

21 CFR § 888.3560

and Name:

Prosthesis, Knee, Patellofemorotibial.

Substantial Equivalence:

The term "substantial equivalence" as used in this 510(k) notification is limited to the definition of substantial equivalence found in the Federal Food, Drug and Cosmetic Act, as amended and as applied under 21 CFR 807, Subpart E under which a device can be marketed without premarket approval or reclassification. determination of substantial equivalency under this notification is not intended to have any bearing whatsoever on the resolution of patent infringement suits or any other patent matters. statements related to, or in support of substantial equivalence herein shall be construed as an admission against interest under the US Patent Laws or their application by the courts.

Device Description:

The NexGen Trabecular Metal Augments are designed for attachment to selected commercially available NexGen tibial base plates and femoral components using either bolts, cement or a combination of both (depending on the augment). In the USA, the augment must be cemented to the bone surface; outside the USA the use of cement along the bone surface is optional.

The augments are manufactured to interface with selected femoral and tibial NexGen components. The femoral augments come in four different sizes (sizes C, D, E and F) that correspond with the sizes of the femoral components. Each NexGen LCCK or RHK femoral component has two corresponding augments, one for the distal segment and one for the posterior segment of the femoral component. The thickness options of the augments vary from 5mm to 20mm. The tibial augments are sized to match the tibial base plates. There are 6 sizes (sizes 2 through 7) of tibial augments to match the six sizes of the augmentable NexGen tibial base plates. Within each size, there are different thickness options (from

NexGen TM Augments
Special 510(k) Premarket Notification

5mm – 20mm for sizes 2 and 7; from 5mm – 20mm for sizes 3, 4, 5, 6, and 10mm thick for full blocks for sizes 1-7), right-left configurations and the thicker sizes are tapered to mimic proximal tibial anatomy. The *NexGen* RHK full block tibial augments are 10mm thick and are offered in sizes 1 through 6.

Indications for Use:

NexGen Trabecular Metal Augments are indicated for use in the reconstruction of bony defects in knee reconstruction due to severe degeneration, trauma, or other pathology of the knee joint, and in the revision or salvage of failed, previously reconstructed knee procedures and implants. The Trabecular Metal femoral and tibial augments are for cemented use only in the USA, and for cementless or cemented use outside the USA.

Device Technological Characteristics and Comparison to Predicate Device: NexGen Trabecular Metal Augments are manufactured from the same material as approved Continuum Knee System Spacers. Additionally, these augments have the same geometry as cleared NexGen Knee System augments.

Performance Data:

 Testing of the subject devices were not performed. Previous testing of Trabecular Metal and Trabecular Metal devices support a determination of substantial equivalence.

Conclusion:

The *NexGen* Trabecular Metal Augments are substantially equivalent to the following predicate devices identified in this premarket notification:

510(k) #	Product Name	Company
K982302	Hedrocel Tibial Spacers	Implex Corp.
K980781	Hedrocel Revision Femoral Spacers	Implex Corp.
K013385	NexGen Complete Knee Solution Rotating Hinge Knee	Zimmer, Inc.
K946150	Cruciate Retaining (Augmentable) and Constrained Knee	Zimmer, Inc.



JAN 1 5 2003

Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Ms. Marci Halevi Manager of Regulatory Affairs Implex Corporation 80 Commerce Drive Allendale, New Jersey 07401

Re: K024161

Trade/Device Name: NexGen® Complete Knee Solution - Trabecular Metal Augments

Regulation Number: 21 CFR 888.3560

Regulation Name: Knee joint patellofemorotibial polymer/metal/polymer semi-constrained

cemented prosthesis

Regulatory Class: II Product Code: JWH

Dated: December 16, 2002 Received: December 17, 2002

Dear Ms. Halevi:

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.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), 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 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

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); 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.

This letter will allow you to begin marketing your device as described in your Section 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), 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 Part 807.97) you may obtain. Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers, International and Consumer 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,

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

Director

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

Enclosure

510(k) Number (if	V67111(1
known):	K024161
Device Name:	The NexGen® Complete Knee Solution – Trabecular Metal Augments
Indications For Use:	
the reconstruction of bordegeneration, trauma, or of salvage of failed, previously Trabecular Metal femoral a	etal femoral and tibial augments are indicated for use in my defects in knee reconstruction due to severe ther pathology of the knee joint, and in the revision or my reconstructed knee procedures and implants. The and tibial augments are for cemented use only in the cemented use outside the USA.
(PLEASE DO NOT WRITE B	ELOW THIS LINE - CONTINUE ON ANOTHER PAGE IF NEEDED)
Concurrence of C	DRH; Office of Device Evaluation (ODE)
Prescriptio n Use (Per 21 CFR 801.109)	OR Over-The- Counter Use
((Optional Format 1-2-96)
for	(Division Sign-Off) Division of General, Restorative and Neurological Devices