



July 16, 2026

TriMed, Inc.
Sneha Potlapally
Senior Regulatory Affairs Specialist
27533 Ave. Hopkins
Santa Clarita, California 91355

Re: K262032

Trade/Device Name: TriMed Non-Spanning Wrist Fusion Plates (NSFL-STD); TriMed Non-Spanning Wrist Fusion Plates (NSFR-STD); TriMed Non-Spanning Wrist Fusion Plates (NSFL-SHB); TriMed Non-Spanning Wrist Fusion Plates (NSFR-SHB)

Regulation Number: 21 CFR 888.3030

Regulation Name: Single/Multiple Component Metallic Bone Fixation Appliances And Accessories

Regulatory Class: Class II

Product Code: HRS, HWC

Dated: June 16, 2026

Received: June 17, 2026

Dear Sneha Potlapally:

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 (the 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. Although this letter refers to your product as a device, please be aware that some cleared products may instead be combination products. The 510(k) Premarket Notification Database available at <https://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfpmn/pmn.cfm> identifies combination product submissions. 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.

Additional information about changes that may require a new premarket notification are provided in the FDA guidance documents entitled "Deciding When to Submit a 510(k) for a Change to an Existing Device" (<https://www.fda.gov/media/99812/download>) and "Deciding When to Submit a 510(k) for a Software Change to an Existing Device" (<https://www.fda.gov/media/99785/download>).

Your device is also subject to, among other requirements, the Quality Management System Regulation (QMSR) (21 CFR Part 820), which includes, but is not limited to, ISO 13485 clause 7.3 (Design controls), ISO 13485 clause 8.3 (Nonconforming product), ISO 13485 clause 8.5.2 (Corrective action), and ISO 13485 clause 8.5.3 (Preventative action). Please note that regardless of whether a change requires premarket review, the QMSR requires device manufacturers to review and approve changes to device design and production (ISO 13485 clause 7.3 and ISO 13485 clause 7.5) and document changes and approvals in the Medical Device File (ISO 13485 clause 4.2.3).

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 Part 803) for devices or postmarketing safety reporting (21 CFR Part 4, Subpart B) for combination products (see <https://www.fda.gov/combination-products/guidance-regulatory-information/postmarketing-safety-reporting-combination-products>); good manufacturing practice requirements as set forth in the Quality Management System Regulation (QMSR) (21 CFR Part 820) for devices or current good manufacturing practices (21 CFR Part 4, Subpart A) for combination products; and, if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR Parts 1000-1050.

All medical devices, including Class I and unclassified devices and combination product device constituent parts are required to be in compliance with the final Unique Device Identification System rule ("UDI Rule"). The UDI Rule requires, among other things, that a device bear a unique device identifier (UDI) on its label and package (21 CFR 801.20(a)) unless an exception or alternative applies (21 CFR 801.20(b)) and that the dates on the device label be formatted in accordance with 21 CFR 801.18. The UDI Rule (21 CFR 830.300(a) and 830.320(b)) also requires that certain information be submitted to the Global Unique Device Identification Database (GUDID) (21 CFR Part 830 Subpart E). For additional information on these requirements, please see the UDI System webpage at <https://www.fda.gov/medical-devices/device-advice-comprehensive-regulatory-assistance/unique-device-identification-system-udi-system>.

Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to <https://www.fda.gov/medical-devices/medical-device-safety/medical-device-reporting-mdr-how-report-medical-device-problems>.

For comprehensive regulatory information about medical devices and radiation-emitting products, including information about labeling regulations, please see Device Advice (<https://www.fda.gov/medical-devices/device-advice-comprehensive-regulatory-assistance>) and CDRH Learn (<https://www.fda.gov/training-and-continuing-education/cdrh-learn>). 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 (<https://www.fda.gov/medical-devices/device-advice-comprehensive-regulatory->

[assistance/contact-us-division-industry-and-consumer-education-dice](#)) for more information or contact DICE by email (DICE@fda.hhs.gov) or phone (1-800-638-2041 or 301-796-7100).

Sincerely,

CHRISTOPHER FERREIRA -S

Christopher Ferreira, M.S.

Assistant Director

DHT6C: Division of Restorative,
Repair, and Trauma Devices

OHT6: Office of Orthopedic Devices

Office of Product Evaluation and Quality

Center for Devices and Radiological Health

Enclosure

Indications for Use

Please type in the marketing application/submission number, if it is known. This textbox will be left blank for original applications/submissions.

K262032

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Please provide the device trade name(s).

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TriMed Non-Spanning Wrist Fusion Plates (NSFL-STD);
TriMed Non-Spanning Wrist Fusion Plates (NSFR-STD);
TriMed Non-Spanning Wrist Fusion Plates (NSFL-SHB);
TriMed Non-Spanning Wrist Fusion Plates (NSFR-SHB)

Please provide your Indications for Use below.

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The TriMed Total Wrist fusion system is indicated for the following:

1. Wrist arthrodesis
2. Fractures of the wrist
3. Osteotomies of the wrist

Please select the types of uses.

☒ Prescription Use ([21 CFR 801 Subpart D](#))

☐ Over-The-Counter Use ([21 CFR 801 Subpart C](#))

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Please select the age group(s) for which the device(s) is to be used.

☐ Neonates/Newborns (Birth to < 29 days old)

☐ Infants (29 days old to < 2 years old)

☐ Children (2 years old to < 12 years old)

☐ Adolescents (12 years old to < 22 years old)

☐ Adults (22 years old and greater)

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Contact Details

[21 CFR 807.92\(a\)\(1\)](#)

Applicant Name	TriMed Inc
Applicant Address	27533 Avenue Hopkins Santa Clarita CA 91355 United States
Applicant Contact Telephone	6612557406
Applicant Contact	Ms. Sneha Potlapally
Applicant Contact Email	snehapotlapally@trimedortho.com

Device Name

[21 CFR 807.92\(a\)\(2\)](#)

Device Trade Name	TriMed Non-Spanning Wrist Fusion Plates (NSFL-STD); TriMed Non-Spanning Wrist Fusion Plates (NSFR-STD); TriMed Non-Spanning Wrist Fusion Plates (NSFL-SHB); TriMed Non-Spanning Wrist Fusion Plates (NSFR-SHB)
Common Name	Single/multiple component metallic bone fixation appliances and accessories
Classification Name	Plate, Fixation, Bone
Regulation Number	888.3030
Product Code(s)	HRS, HWC

Legally Marketed Predicate Devices

[21 CFR 807.92\(a\)\(3\)](#)

Predicate #	Predicate Trade Name (Primary Predicate is listed first)	Product Code
K251945	TriMed Total Wrist Fusion System	HRS

Device Description Summary

[21 CFR 807.92\(a\)\(4\)](#)

The TriMed Non-Spanning Wrist Fusion plates are devices which are to be used as an aid to fixation of bone for treatment of certain fractures, osteotomies, or arthrodesis in the wrist that lend themselves to the principle of plate and/or screw fixation. Non-Spanning Wrist Fusion plates are to be used with 2.4mm pegs/screws, 3.2mm bone screws and 3.8mm cancellous screws.

The TriMed Non-Spanning Wrist Fusion plates are made from implant grade stainless steel.

Intended Use/Indications for Use

[21 CFR 807.92\(a\)\(5\)](#)

The TriMed Total Wrist fusion system is indicated for the following:

1. Wrist arthrodesis
2. Fractures of the wrist
3. Osteotomies of the wrist

Indications for Use Comparison

[21 CFR 807.92\(a\)\(5\)](#)

The subject device's Indications for Use is identical to the predicate device.

Technological Comparison

[21 CFR 807.92\(a\)\(6\)](#)

TriMed subject device (Non-Spanning Wrist Fusion Plates) included in this 510(k) submission is substantially equivalent to the predicate device in TriMed Total Wrist Fusion Plates(Previously cleared under K251945), in terms of material, design features, principle of operation, manufacturing, packaging and labeling. Any differences between the proposed device and the predicate device are considered minor and do not raise questions concerning safety or effectiveness.

Non-Clinical and/or Clinical Tests Summary & Conclusions

[21 CFR 807.92\(b\)](#)

TriMed Non-Spanning Wrist Fusion Plates included in this application were tested per the recommendations cited in the FDA Guidance Document, FDA-2022-D-0552 - Orthopedic Fracture Fixation Plates - Performance Criteria for Safety and Performance Based Pathway. Clinical testing was not necessary for the determination of substantial equivalence. TriMed Non-Spanning Wrist Fusion Plates, surgical instruments, and caddy design do not adversely affect product performance, cleanability, and sterilization and therefore do not raise any new concerns of safety and efficacy. The similar technological characteristics, indications for use and performance testing support the substantial equivalence of the Non-Spanning Wrist Fusion Plates with the predicate device.