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MAY - 4 2005

510(K) SUMMARY
OF SAFETY AND EFFECTIVENESS

In accordance with the Food and Drug Administration Rule to implement provisions of the Safe Medical Devices Act of 1990 and in conformance with 21 CRF 807, this information serves as a Summary of Safety and Effectiveness for the use of the PROCOTYLE-E.

Submitted By:	Wright Medical Technology, Inc.
Date:	November 5, 2004
Contact Person:	Ehab M. Esmail Senior Manager, Regulatory Affairs
Proprietary Name:	**PROCOTYLE-E**
Common Name:	Acetabular Shell
Classification Name and Reference:	21 CFR 888.3358 Hip joint metal/polymer/metal semi- constrained porous - coated uncemented prosthesis – Class II 21 CFR 888.3353 Prosthesis, Hip, Semi-Constrained, metal/ ceramic/ polymer, cemented or non-porous uncemented– Class II 21 CFR 888.3330 Hip joint metal/ metal semi-constrained, with uncemented acetabular component prosthesis – Class III
Device Product Code and Panel Code:	Orthopedics/87/LPH, KWA, LZO

DEVICE INFORMATION

A. INTENDED USE

The PROCOTYL-E Acetabular System is indicated for use in total hip arthroplasty for reduction or relief of pain and/or improved hip function in skeletally mature patients with the following conditions:

1. non-inflammatory degenerative joint disease such as osteoarthritis, avascular necrosis, ankylosis, protrusio acetabuli, and painful hip dysplasia;
2. inflammatory degenerative joint disease such as rheumatoid arthritis;
3. correction of functional deformity;
4. revision procedures where other treatments or devices have failed; and,
5. treatment of nonunion, femoral neck and trochanteric fractures of the proximal femur with head involvement that are unmanageable using other techniques.

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The PROCOTYL-E Acetabular System consists of single use components that are intended to accommodate for bone loss. This system is to be used in conjunction with associated WMT polyethylene and metal Acetabular liners articulating with associated WMT metal and ceramic femoral heads as part of an uncemented total hip arthroplasty.

B. DEVICE DESCRIPTION

The PROCOTYL-E Acetabular System consists of metal acetabular shells, plates and hooks.

The added design features of the PROCOTYL-E Acetabular Shell are summarized below:

- The PROCOTYL-E Acetabular shell feature an oblong dual hemispherical outer geometry with a hemispherical offset to accommodate for bone loss.
- Eccentricity and offset are increased to accommodate for bone loss and screw fixation
- The PROCOTYL-E shell allows use of a wide range of plates, hooks, all of which are manufactured from titanium alloy, available in various types and sizes, thus guaranteeing a stable and secure anchorage of the shell to enhanced fixation and stability.

C. SUBSTANTIAL EQUIVALENCE INFORMATION

The intended use, material, type of interface, and design features of the PROCOTYL-E Acetabular Shell are substantially equivalent to the competitive devices previously cleared for market. The safety and effectiveness of the PROCOTYL-E Acetabular Shell are adequately supported by the substantial equivalence information, materials data, and testing results provided within the Premarket Notification.

DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Food and Drug Administration
9200 Corporate Boulevard
Rockville MD 20850

MAY - 4 2005

Mr. Ehab M. Esmail
Senior Manager, Regulatory Affairs
Wright Medical Technology, Inc.
5677 Airline Road
Arlington, Tennessee 38002

Re: K043073
Trade/Device Name: PROCOTYL-E Acetabular System
Regulation Numbers: 21 CFR 888.3330, 888.3353, 888.3358
Regulation Names: Hip joint metal/metal semi-constrained, with uncemented acetabular component prosthesis, Hip joint metal/ceramic/polymer semi-constrained cemented or nonporous uncemented prosthesis, Hip joint metal/polymer/metal semi-constrained porous-coated uncemented prosthesis
Regulatory Class: III
Product Codes: KWA, LZO, LPH
Dated: March 25, 2005
Received: March 28, 2005

Dear Mr. Esmail:

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 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); 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 (240) 276-0120. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). You may obtain other general information on your responsibilities under the Act 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/industry/support/index.html.

Sincerely yours,

for Miriam C. Provost, Ph.D.
Acting Director
Division of General, Restorative and
Neurological Devices
Office of Device Evaluation
Center for Devices and
Radiological Health

Enclosure

PROCOTYL-E Acetabular System

INDICATIONS STATEMENT

510(k) Number (if known): K043073

Device Name: PROCOTYL-E Acetabular System

Indications For Use:

The PROCOTYL-E Acetabular System is indicated for use in total hip arthroplasty for reduction or relief of pain and/or improved hip function in skeletally mature patients with the following conditions:

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Prescription Use __X____ AND/OR Over-The-Counter Use _____
(Part 21 CFR 801 Subpart D) (21 CFR 807 Subpart C)

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

Concurrence of CDRH, Office of Device Evaluation (ODE)

(Division Sign-Off)
Division of General, Restorative, and Neurological Devices

510(k) Number K043073

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