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K051742



InnTec, Inc

Summary of Safety and Effectiveness

Company Name: InnTec, Inc.
401 E. Edgewater St.
Portage, WI 53901

Contact: Michael Kvalo, PE

Phone: 608 444-4544

Fax: 608 846-6071

Summary Date: June 23 ,2005

Trade Name: Oocyte Retrieval Needle Sets

Common Name: Assisted Reproduction Needle

Classification Name: 21 CFR ; Product Code:

Predicate Device:

510(k)	Manufacturer	Product Code	Class	Trade Name
K992308	Lifetek Medical, Inc.	MQE	II	Oocyte Retrieval Needle Set

Office-
401 E. Edgewater St.
Portage, WI. 53901
Phone 608-444-4544
Fax 608-846-6071

Shipping & Receiving-
121 Evco Circle
DeForest, WI. 53532

IUI
Catheters

Oocyte
Retrieval
Needle
Sets

Embryo
Transfer
Catheters

Custom
Product
Design &
Manufacturing

1.0 Description of Device

The Oocyte Retrieval Needle Sets are sterile, single patient use, disposable devices supporting obtaining female gametes/oocytes from the body. The Oocyte Retrieval Needle Sets are packaged in a commercially available, sterile barrier pouch.

2.0 Intended Use

The InnTec, Inc. Oocyte Retrieval Needle Set is an assisted reproduction needle indicated for used and intended to be used for obtaining female gametes/oocytes from the body.

3.0 Technology

The technology of the device is the same as the predicate.

4.0 Conclusions

The intended use, technology, materials and manufacturing processes of the InnTec, Inc. Oocyte Retrieval Needle Sets are the same as the predicate device. No new questions of safety or effectiveness are raised.



OCT 7 - 2005

Food and Drug Administration
9200 Corporate Boulevard
Rockville MD 20850

InnTec, Inc.
c/o Mr. Gary Syring
Principal Consultant
Quality & Regulatory Associates, LLC
800 Levanger Lane
STOUGHTON WI 53589

Re: K051742
Trade/Device Name: Oocyte Retrieval Needle Sets, Models 917-IH and 917-SH
Regulation Number: 21 CFR §884.6100
Regulation Name: Assisted reproduction needles
Regulatory Class: II
Product Code: MQE
Dated: August 30, 2005
Received: August 31, 2005

Dear Mr. Syring:

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 (Premarket 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 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 one of the following numbers, based on the regulation number at the top of this letter:

21 CFR 876.xxxx	(Gastroenterology/Renal/Urology)	240-276-0115
21 CFR 884.xxxx	(Obstetrics/Gynecology)	240-276-0115
21 CFR 892.xxxx	(Radiology)	240-276-0120
Other		240-276-0100

Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR 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,



Nancy C. Brogdon
Director, Division of Reproductive,
Abdominal, and Radiological Devices
Office of Device Evaluation
Center for Devices and Radiological Health

Enclosure

510(k) Number (if known): K051742

Device Name: Oocyte Retrieval Needle Sets

Indications for Use:

The InnTec, Inc. Oocyte Retrieval Needle Set is an assisted reproduction needle indicated for used and intended to be used for obtaining female gametes / oocytes from the body.

Prescription Use X
(Part 21 CFR 801 Subpart D)

~~AND/OR~~

Over-The-Counter Use _____
(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)

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(Division Sign-Off)
Division of Reproductive, Abdominal,
and Radiological Devices
510(k) Number K051742