

MPATHY MEDICAL DEVICES LTD.
SPECIAL 510(K) 053361 MODIFICATION

K053361
Page 1 of 2
FEB 6 2006

510(k) SUMMARY OF SAFETY & EFFECTIVENESS

SUBMITTER Mpathy Medical Devices, Ltd.
6.05 Kelvin Campus
West of Scotland Science Park
Glasgow G20 0SP
U.K.

CONTACT PERSON Louis J. Mazzaresse
(U.S. Agent for Mpathy Medical Devices Ltd.)

DATE PREPARED January 30, 2006

CLASSIFICATION Polymeric Surgical Mesh (Product Code **OTO**) is a Class II device
per 21 CFR 878.3300 **OTP**

COMMON NAME Polymeric Surgical Mesh

PROPRIETARY NAME Minimesh[®] polypropylene mesh

PREDICATE DEVICES K041632 Minimesh[®] polypropylene mesh

DEVICE DESCRIPTION Minimesh[®] is a non-absorbable polypropylene mesh constructed from knitted monofilaments of extruded polypropylene.

Minimesh[®] polypropylene mesh is constructed using a warp-knit process to a unique design that permits the mesh to be cut into any desired shape or size without unraveling.

Minimesh[®] polypropylene mesh has the necessary strength, flexibility, durability and surgical adaptability. These properties permit the correct adaptation to the various stresses encountered in the body.

The device is supplied sterile.

INDICATIONS FOR USE Minimesh[®] polypropylene mesh may be used for the repair of abdominal wall hernia, including inguinal, femoral, and incisional, uterological prolapse and other fascial deficiencies that require support material. It may be used in open or laparoscopic abdominal procedures or for repair by the vaginal route.

Replacement Page 16 of 18
January 30, 2006

MINIMESH[®]

K053361
Page 2 of 2

IMPATHY MEDICAL DEVICES, L.L.C.
SPECIAL 510(K) 053361: MODIFICATION

510(k) SUMMARY OF SAFETY & EFFECTIVENESS (Cont'd.)

TESTING

Accelerated and real time stability studies have been conducted and support use of a three year expiration date for the product. The results of these studies demonstrate that Minimesh® polypropylene mesh, when stored under the conditions specified in the product labeling, can be used safely and effectively throughout this dating period (see Addendum A).

Additional Page 16A of 18
January 30, 2006

MINIMESH®



Food and Drug Administration
10903 New Hampshire Avenue
Document Control Room -WO66-G609
Silver Spring, MD 20993-0002

Mpathy Medical Devices Ltd.
% Mr. Louis J. Mazzaresse
Designated U.S. Agent
150 Aran Hill Road
FAIRFIELD CT 06824

SEP 28 2012

Re: K053361
Trade/Device Name: Minimesh® polypropylene mesh
Regulation Number: 21 CFR 878.3300
Regulation Name: Surgical mesh
Regulatory Class: II
Product Code: OTO, OTP
Dated: January 5, 2006
Received: January 10, 2006

Dear Mr. Mazzaresse:

This letter corrects our substantially equivalent letter of February 6, 2006.

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 (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 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.

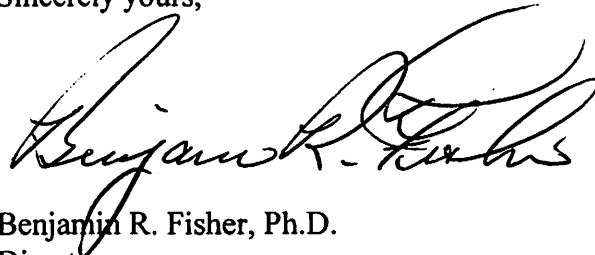
Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must

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.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please go to <http://www.fda.gov/AboutFDA/CentersOffices/CDRH/CDRHOffices/ucm115809.htm> for the Center for Devices and Radiological Health's (CDRH's) Office of Compliance. 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.

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) 796-7100 or at its Internet address <http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm>.

Sincerely yours,

A handwritten signature in black ink, appearing to read "Benjamin R. Fisher". The signature is fluid and cursive, with the first name being the most prominent.

Benjamin R. Fisher, Ph.D.
Director
Division of Reproductive, Gastro-Renal,
and Urological Devices
Office of Device Evaluation
Center for Devices and Radiological Health

Enclosure

MPATHY MEDICAL DEVICES LTD.
SPECIAL 510(K) MODIFICATION

Indications for Use

510(k) Number: K053361

Device Name: Mpathy Medical Devices Ltd Minimesh® polypropylene mesh

Indications for Use:

MINIMESH® polypropylene mesh may be used for the repair of abdominal wall hernia, including inguinal, femoral, and incisional, uterological prolapse and other fascial deficiencies that require support material. It may be used in open or laparoscopic abdominal procedures or for repair by the vaginal route.

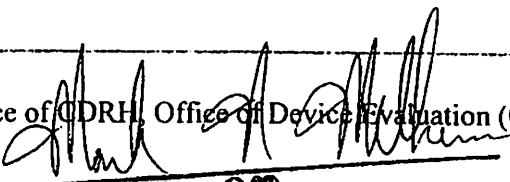
Prescription Use X
(Part 21 CFR 801 Subpart D)

AND/OR

Over-The-Counter Use _____
(21 CFR 807 Subpart C)

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

Concurrence of CDRH, Office of Device Evaluation (ODE)


(Division Sign-Off)

**Division of General, Restorative,
and Neurological Devices**

510(k) Number K053361

MINIMESH®