K062498

OCT 2 5 2006

510(k) Summary of Safety and Effectiveness Profyle® System

Proprietary Name:

Profyle® System

Common Name:

Bone plates and screws

Classification Name/Reference:

Single/multiple component metallic bone fixation appliances and accessories, 21 CFR §888.3030

Device Product Code:

87 HRS

Proposed Regulatory Class:

Class II

For Information contact:

Vivian Kelly, Regulatory Affairs Specialist

Howmedica Osteonics Corp.

325 Corporate Drive Mahwah, NJ 07430

Phone: (201) 831-5581 Fax: (201) 831-6038

Date Summary Prepared:

August 24, 2006

Description

This submission is a line extension to the Profyle® Hand and Small Fragment System to add alternate styles of plates and screws. Also, locking plates and locking screws are being added to the system.

Indications:

The Profyle® System is intended for use in internal fixation of the bones of hand and wrist. Examples of these procedures may include but are not limited to replantation, lag screw techniques, joint fusions, corrective osteotomies, and the treatment of fractures.

Substantial Equivalence:

The subject Profyle® System is substantially equivalent to other plating systems in regards to intended use, design, materials, and operational principles as internal fixation components such as the Profyle® Hand and Small Fragment System (K961497 and K980364), Stryker® Leibinger Universal Distal Radius System (K040022), and Aptus® Titanium Osteosynthesis System, Medartis, Inc. (K051567.)





Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Howmedica Osteonics Corporation % Vivian Kelly, RAC Regulatory Affairs Specialist 325 Corporate Drive Mahwah, New Jersey 07430

OCT 2 5 2006

Re: K062498

Trade/Device Name: Profyle® System Regulation Number: 21 CFR 888.3030

Regulation Name: Single/multiple component metallic bone fixation appliances and

accessories

Regulatory Class: Class II Product Code: HRS Dated: August 24, 2006 Received: August 25, 2006

Dear Ms. Kelly:

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.

Page 2 – Vivian Kelly, RAC

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) 276-0210 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 (240) 276-3150 or at its Internet address http://www.fda.gov/cdrh/industry/support/index.html.

Sincerely yours,

Mark N. Melkerson

Director

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

Radiological Health

Enclosure

Indications for Use

510(k) Number (if known):
Device Name: Profyle® System
Indications for Use:
The Profyle® System is intended for use in internal fixation of the bones of hand and wrist. Examples of these procedures may include but are not limited to replantation, lag screw techniques, joint fusions, corrective osteotomies, and the treatment of fractures.
Prescription Use X Over-The-Counter Use (Part 21 CFR 801 Subpart D) AND/OR (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)
Page 1 of 1
(Division Sign-Off) Division of General, Restorative,
and Neurological Devices
510(k) Number K0 (02498_