LU62693

510(K) SUMMARY OF SAFETY AND EFFECTIVENESS

SEP 2 9 2006

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 CFR 807, this information serves as a Summary of Safety and Effectiveness for the use of the GLADIATORTM Bipolar System.

Submitted By: Wright Medical Technology, Inc.

Date: September 8, 2006

Contact Person: Matt Paul

Regulatory Affairs Specialist

Proprietary Name: GLADIATOR™ Bipolar System

Common Name: Bipolar Hip System

Classification Name and Reference: 21 CFR 888.3390 Prosthesis, hip, hemi-, femoral,

metal/polymer, cemented or uncemented - Class II

Device Product Code and Panel Code: Orthopedics/87/KWY

DEVICE INFORMATION

A. Intended Use

The GLADIATOR™ Bipolar System is indicated for the following conditions:

- 1) pathological fractures of the femoral neck
- 2) non-union of femoral neck fractures
- 3) aseptic necrosis of the femoral head and neck
- 4) primary pathology in the young involving the femoral head but with a non-deformed acetabulum.

B. Device Description

The design features of the GLADIATOR™ Bipolar System are summarized below:

- Shells manufactured from cast CoCr alloy
- Shells available in O.D. sizes 36-65mm
- Bearing insert manufactured from cross-linked UHMWPE
- Bearing insert available in I.D. (femoral head) sizes 22, 28, 32, 36mm
- Locking and support rings manufactured from UHMWPE
- All components permanently assembled during production

C. Substantial Equivalence Information

The indications for use of the GLADIATORTM Bipolar System are identical to the previously cleared predicate device. The design features and materials of the subject device are substantially equivalent to those of the respective predicate devices. The fundamental scientific technology of the modified device has not changed relative to the predicate devices.





Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Wright Medical Technology, Inc. % Mr. Matt Paul Regulatory Affairs Specialist 5677 Airline Road Arlington, Tennessee 38002 SEP 2 9 2006

Re: K062693

Trade/Device Name: GLADIATGR™ Bipolar System

Regulation Number: 21 CFR 888.3390

Regulation Name: Hip joint femoral (hemi-hip) metal/polymer cemented or uncemented

prosthesis

Regulatory Class: Class II

Product Code: KWY

Dated: September 8, 2006

Received: September 11, 2006

Dear Mr. Paul:

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.

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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" (21 CFR 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: GLADIATOR TM Bipolar System	
Indications For Use: The GLADIATOR TM Bipolar System is indicated for 1) pathological fractures of the femoral neck 2) non-union of femoral neck fractures 3) aseptic necrosis of the femoral head and neck 4) primary pathology in the young involving the femoral acetabulum.	
Prescription Use X AND/OR (Part 21 CFR 801 Subpart D) (PLEASE DO NOT WRITE BELOW THIS LINE-CONEEDED)	Over-The-Counter Use(21 CFR 807 Subpart C) ONTINUE ON ANOTHER PAGE IF
Concurrence of CDRH, Office of Dev	rice Evaluation (ODE)
(Division Sign-Off) Division of General, Restorative, and Neurological Devices 510(k) Number	Page 1 of <u>1</u>