SYNTHES®

K062789

3.0 Summary of Safety and Effectiveness Information

SPONSOR:	Synthes (USA) 1302 Wrights Lane East West Chester, PA 19308 (610) 719-5000

FEB 27 2007

DEVICE NAME:	Synthes (USA) Rapid Resorbable Fixation System
CLASSIFICATION:	Class II, §872.4760 - Bone Plate Class II, §888.3030 – Screw Fixation, Intraosseous Class II, §882.5360 – Cranioplasty plate fastener
PREDICATE DEVICE:	Synthes (USA) Rapid Resorbable Tack System Synthes (USA) Poly (L-Lactide-co-Glycolide) Resorbable Fixation System Synthes (USA) Rapid Resorbable Cranial Clamp Biomet, Inc., Lactosorb Trauma Plating System
DEVICE DESCRIPTION:	The Synthes Rapid Resorbable Fixation System consists of Plates, Meshes, Sheets, Screws and Tacks. The system is provided in a variety of shapes and sizes and, when used in conjunction with resorbable screws, the system provides fixation and aids in the alignment and stabilization of craniofacial bones. To facilitate shaping to the contours of the anatomy, the thermoplastic implants may be heated above the glass transition temperature of 55°C or they may be cut to the desired shape.
INTENDED USE:	The Synthes (USA) Rapid Resorbable Fixation System is intended for use in fracture repair and reconstructive procedures of the craniofacial skeleton in pediatric and adult populations. In addition, resorbable meshes, sheets, screws and tacks may be used in non-load bearing applications for maintaining the relative position of, and /or containing, bony fragments, bone grafts, (autograft or allograft), or bone graft substitutes in reconstruction of the craniofacial or mandibular areas.
CONTRAINDICATIONS:	These devices are not intended for use in load bearing applications, such as the mandible, unless used in conjunction with traditional rigid fixation. The Synthes Rapid Resorbable System is not intended for areas with active or latent infection or for patient conditions including limited blood supply or insufficient quantity or quality of bone. These devices are not intended for use in the spine.
SUBSTANTIAL EQUIVALENCE	Comparative information presented supports substantial equivalence.
MATERIAL:	Poly (L-lactide-co-glycolide)

DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Food and Drug Administration
9200 Corporate Boulevard
Rockville MD 20850

Mr. Jeffrey L. Dow
Director, Regulatory Affairs
Synthes (USA)
1230 Wilson Drive
West Chester, Pennsylvania 19380

FEB 27 2007

Re: K062789
Trade/Device Name: Synthes (USA) Rapid Resorbable Fixation System
Regulation Number: 872.4760
Regulation Name: Bone Plate
Regulatory Class: II
Product Code: JEY
Dated: February 2, 2007
Received: February 5, 2007

Dear Mr. Dow:

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.

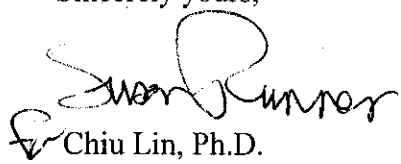
If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish 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) 276-0115. 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,



Chiu Lin, Ph.D.
Director
Division of Anesthesiology, General Hospital,
Infection Control and Dental Devices
Office of Device Evaluation
Center for Devices and
Radiological Health

Enclosure

SYNTHES®

2.0 Indications for Use Statement

510(k) Number (if known): K062789

Device Name: Synthes (USA) Rapid Resorbable Fixation System

Indications:

The Synthes (USA) Rapid Resorbable Fixation System is intended for use in fracture repair and reconstructive procedures of the craniofacial skeleton in pediatric and adult populations. In addition, resorbable meshes, sheets, screws and tacks may be used in non-load bearing applications for maintaining the relative position of, and /or containing, bony fragments, bone grafts, (autograft or allograft), or bone graft substitutes in reconstruction of the craniofacial or mandibular areas.

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

Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use X OR Over-The-Counter Use
(Per 21 CFR 801.109)

Susan Runner

Division of Anesthesiology, General Hospital, Infection Control, Dental Devices

K062789