

DEC 22 2006

**Summary of Safety and Effectiveness  
Compliance with 513 (i) of the Federal Food, Drug and Cosmetic Act**

November 2, 2006

**1. General Provisions**

Common/Usual Name: Remote Controlled Radionuclide Applicator System

Proprietary Name: CT Compatible F/S/D Applicator

Applicant Name and Address:

Mick Radio-Nuclear Instruments, Inc.  
521 Homestead Avenue  
Mount Vernon, New York 10550

**2. Name of Predicate Devices:**

(1)

Device	Manufacturer	K Number
Applicators for Varian Varisource Remote High Dose Rate Afterloaders	Varian Associates, Inc.	K955844
OMNITRON Gyn Applicator System	OMNITRON Intl, Inc.	K913908
CT HDR Tandem / Ring Applicator with Rectal Retractor	Mick Radio-Nuclear Instruments, Inc.	K030110
HDR Compatible Tandem & Ovoid Applicators	Mick Radio-Nuclear Instruments, Inc.	K040704

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Any statement made in conjunction with this submission regarding substantial equivalence to any other product only relates to whether the product can be lawfully marketed without pre-market approval or reclassification and is not to be interpreted as an admission or used as evidence in patent infringement litigation. As the Commissioner of the FDA has indicated, "...a determination of substantial equivalence under the Federal Food, Drug, and Cosmetic Act relates to the fact that the product can be lawfully marketed without pre-market approval or reclassification. This determination is not intended to have any bearing whatsoever on the resolution of patent infringement suits." 42 Fed. Reg. 42,520 et seq. (1977).

**3. Classification**

This device is classified as a class II device according to 21 CFR 892.5700 .

**4. Performance Standards**

Performance standards for applicators for remote controlled afterloading brachytherapy have not been established by the FDA under Section 514 of the Food, Drug and Cosmetic Act.

**5. Intended Use and Device Description**

The CT Compatible F/S/D Applicator presented in this 510(k) notification has been developed to function for the positioning of HDR Remote After-Loader sealed sources in the treatment of cancer of the cervix or uterus. The design of these systems is the similar to that of the predicate devices listed below.

Device	Manufacturer	K Number
Applicators for Varian Varisource Remote High Dose Rate Afterloaders	Varian Associates, Inc.	K955844
OMNITRON Gyn Applicator System	OMNITRON Intl, Inc.	K913908
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The delivery of radiation therapy via high dose rate Brachytherapy treatment of the cervix or uterus requires not only a stable system for precise dosimetry but also a reproducible and predictable geometry for positioning of the radioactive source under remote control. The CT Compatible F/S/D Applicator is designed to act as such a device.

**6. Biocompatibility**

No new issues of biocompatibility are raised with regard to this device.

**7. Summary of Substantial Equivalence**

This device is similar in design and construction, utilizes the identical materials, and has the same intended use and performance characteristics to the predicate devices. No new issues of safety or effectiveness are introduced by using this device.



Food and Drug Administration  
9200 Corporate Blvd.  
Rockville MD 20850

DEC 22 2006

Mr. Felix Mick  
President  
Mick Radio-Nuclear Instruments, Inc.  
521 Homestead Avenue  
MOUNT VERNON NY 10550

Re: K063381  
Trade/Device Name: CT F/S/D Compatible Applicators  
Regulation Number: 21 CFR 892.55700  
Regulation Name: Remote controlled radio-nuclide applicator system  
Regulatory Class: II  
Product Code: JAQ  
Dated: November 2, 2006  
Received: November 8, 2006

Dear Mr. Mick:

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.



*Protecting and Promoting Public Health*

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.

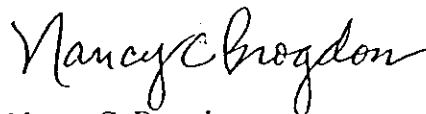
This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to 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.xxx	(Gastroenterology/Renal/Urology)	240-276-0115
21 CFR 884.xxx	(Obstetrics/Gynecology)	240-276-0115
21 CFR 894.xxx	(Radiology)	240-276-0120
Other		240-276-0100

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,



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

Enclosure

## Indications for Use

**510(k) Number:** *To be assigned K063381*

**Device Name:** CT Compatible F/S/D Applicators

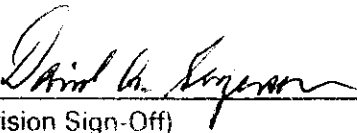
### Indications for Use:

The CT Compatible F/S/D applicator is indicated for use in any case where high dose rate (HDR) radiation treatment of cancer in the cervix and uterus is an accepted clinical practice.

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Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use:  or Over-The Counter Use:  (Per 21 CFR 801.109)

  
\_\_\_\_\_  
(Division Sign-Off)  
Division of Reproductive, Abdominal,  
and Radiological Devices  
510(k) Number     K063381