

510(K) Summary of Safety and Effectiveness
AMSure[®] Bladder Irrigation Set

Company: Amsino International, Inc.
855 Towne Center Drive
Pomona, CA 91767
(909) 626-5888

Contact: Ching Ching Seah, Ph.D.
Director of Regulatory Affairs

Date Prepared: March 27, 2007

DEC 19 2007

Classification Name: System, Urological, Irrigation
Common/Usual Name: Bladder Irrigation Set, TUR Irrigation Set
Proprietary Name: *AMSure[®]* Bladder Irrigation System
Product Code: LJH
Medical Specialty: Gastroenterology/Urology
Device Class: Unclassified (510K)

Predicate Devices: Medline Y-Type TUR/Bladder Irrigation Set (K970946)

Device Description: The *AMSure[™]* Bladder Irrigation Set is comprised of tubing with a catheter adapter at one end and “spikes” with protectors on the other end. The device is available in a single-lead (single spike), or multiple-lead (2 or 4 spikes) configuration. All configurations have a drip chamber and directly below the drip chamber is a roller clamp. There is a flexible, non-latex, synthetic rubber connecting tube, attached to the catheter adapter.

Intended Use: The *AMSure[®]* Bladder Irrigation Set is intended for the infusion of fluids to evacuate the bladder. It is also indicated for use in such procedures as cystoscopies and transurethral-resections as a means of continuous bladder irrigation.

Comparison to Predicate: The *AMSure[®]* Bladder Irrigation System is equivalent to the predicate device in operational principle, materials, configuration, technical characteristics and intended use. Any existing differences do not affect safety and effectiveness of the device.

Non-Clinical Testing: Performance and biocompatibility testing have demonstrated that the *AMSure[®]* Bladder Irrigation System is safe and effective for its intended use.



Food and Drug Administration
9200 Corporate Boulevard
Rockville MD 20850

DEC 19 2007

Yi Chen, Ph.D., RAC
Vice President, Regulatory Affairs and Quality Assurance
Amsino International, Inc.
855 Towne Center Drive
POMONA CA 91767

Re: K070873
Trade/Device Name: *AMSure*[®] Bladder Irrigation Set
Regulation Number: None
Regulatory Class: Unclassified
Product Code: LJH
Dated: December 4, 2007
Received: December 11, 2007

Dear Dr. Chen:

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 Center for Devices and Radiological Health's (CDRH's) Office of Compliance at one of the following numbers, based on the regulation number at the top of this letter.

21 CFR 876.xxxx	(Gastroenterology/Renal/Urology)	240-276-0115
21 CFR 884.xxxx	(Obstetrics/Gynecology)	240-276-0115
21 CFR 892.xxxx	(Radiology)	240-276-0120
Other		240-276-0100

Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding postmarket surveillance, please contact CDRH's Office of Surveillance and Biometric's (OSB's) Division of Postmarket Surveillance at 240-276-3474. For questions regarding the reporting of device adverse events (Medical Device Reporting (MDR)), please contact the Division of Surveillance Systems at 240-276-3464. 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

AMSINO

Bladder Irrigation Set 510K Submission

Indications for Use Statement

510(k) Number: (if known)	
Device Name:	<i>AMSure</i> [®] Bladder Irrigation Set
Indications for Use:	The <i>AMSure</i> [®] Bladder Irrigation Set is intended for the infusion of fluids to evacuate the bladder. It is also indicated for use in such procedures as cystoscopies and transurethral-resections as a means of continuous bladder irrigation.

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)

(Division Sign-Off)
Division of Reproductive, Abdominal and
Radiological Devices

510(k) Number K07 0873