

**SUMMARY OF SAFETY AND EFFECTIVENESS DATA**

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**DEVICE**

Trade Name: *AURAVeneer Cement*  
Classification Name: Cement, Dental  
FDA Product Code: 872.3275

**PREDICATE DEVICES:**

PolyX Veneer Cement, ESPE/3M  
Variolink Veneer Cement, Ivoclar  
Calibra, Dentsply  
Nexus, Kerr

JAN 17 2008

**DESCRIPTION AND INTENDED USE:**

AURAVeneer Cement is a self-adhesive cement recommended for the bonding of ceramic and composite restorations. This veneer cement is made from a complimentary hydrophilic resin and filler system, which creates compatibility between the tooth surface and restorative materials. AURAVeneer Cement is a unique gel-like product that does not slump and will hold veneers in place without drifting. AURAVeneer is a single component, light cured product. AURAVeneer is provided in clear, enamel/white, and dentin/yellow shades. Corresponding try-in gels of the same colors are also available. It is recommended that enamel surfaces, which are uncut, be etched or micro-abraded to optimize bonding of this product to the dental surface. Etching or the use of bonding agents when bonding to dentin is not required. Equally, the surface of the restoration should also be pretreated to optimize bonding of the restoration. Bonding agents and silage coupling agents are not required for the use of this product.

**COMPARISON WITH PREDICATE PRODUCTS:**

AURAVeneer Cement is substantially equivalent in design, composition and intended use to the products listed above. Please see page 12 for the entire comparison.

**SAFETY AND EFFECTIVENESS:**

AURAVeneer Cement is substantially equivalent in design, composition, performance, intended use and effectiveness to the predicate kit products listed above.

The predicate products have been found substantially equivalent under the 510(k) premarket notification process as Class II Dental Devices under CFR EBC 872.3765, LBH 872.3260, and EBF 872.3690.

According to the NIH Technology Assessment conference on *Effects and Side-Effects of Dental Restorative Materials*: "General usage of these materials over about 30 years indicates a high benefit-to-risk ratio...both composites and glass ionomers are relatively trouble-free. There is no evidence of short-term or long-term risk...There is no suspicion of any problems after virtually billions of procedures in the United States.



JAN 17 2008

Food and Drug Administration  
9200 Corporate Boulevard  
Rockville MD 20850

Dr. Jan G. Stannard  
President  
DENALI Corporation  
134 Old Washington Street  
Hanover, Massachusetts 02339

Re: K073101  
Trade/Device Name: AURAVeneer Cement  
Regulation Number: 872.3275  
Regulation Name: Dental Cement  
Regulatory Class: II  
Product Code: EMA  
Dated: December 21, 2007  
Received: January 3, 2007

Dear Dr. Stannard:

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.

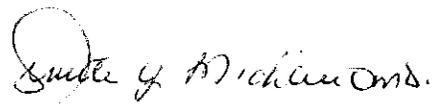
If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish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

denali corporation

**INDICATIONS FOR USE STATEMENT**

510 (k) Number  
(if known)

Device Name

**AURAVeneer Cement**

**Indications for Use:**

AURAVeneer Cement is a self-adhesive cement recommended for the bonding of ceramic and composite restorations.

*Please do not write below this line. Continue on another page if needed.*

**Concurrence of CDRH, Office of Device Evaluation (ODE)**

*Susan Kunne*

Director, Office of Device Evaluation, General Hospital,  
Massachusetts General Hospital, Dental Division

K073101

Prescription Use    
(Per 21 CFR 801.109)

or

Over-The-Counter Use