Substantial

Equivalence:

K073460

| 3.0 | 510(k) Summary | | Page | 1 | of <u>1</u> |
|-----|---------------------|---|--|----------------|-------------|
| | Sponsor: | Synthes (USA) 1301 Goshen Parkway West Chester, PA 19380 (610) 719-6940 | | | |
| | Contact: | Sheri L. Musgnung Synthes (USA) 1301 Goshen Parkway West Chester, PA 19380 (610) 719-6940 | |) (1.) | <u>}</u> |
| | Device Name: | Synthes 2.7 mm/3.5 mm LCP Distal Fibula Plates | | | |
| | Classification: | Class II. §888.3030 – Single/multiple component metallic bone fixation appliances and accessories | | | bone |
| | Predicate Device: | Synthes One Third Tubular LCP Plate | | | |
| | Device Description: | match the anatomy of the distal fibula at plates feature a low-profile design and C Compression Plate holes combined with which accept 3.5 mm cortex, 3.5 mm sel shaft. 3.5 mm locking screws, and 4.0 m plates locking holes accept 2.4 mm, 2.7 screws along with 2.4 mm, 2.7 mm and | omm LCP Distal Fibula Plates are contoured to of the distal fibula and diaphyseal region. The profile design and Combi holes (Dynamic holes combined with locking screw holes), m cortex, 3.5 mm self-tapping cortex, 3.5 mm ing screws, and 4.0 mm cancellous screws. The accept 2.4 mm, 2.7 mm and 3.5 mm locking 2.4 mm, 2.7 mm and 3.5 mm self-tapping cortex are available in stainless steel and titanium, as lengths. | | |
| | Intended Use: | The Synthes 2.7 mm/3.5 mm LCP Dista indicated for fractures, osteotomies, and metaphyseal and diaphyseal region of the in osteopenic bone. | f non-un | ions of th | ie |

Information presented supports substantial equivalence.

DEPARTMENT OF HEALTH & HUMAN SERVICES



FEB 21 2008

Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Synthes (USA) % Ms. Sheri Musgnung 1301 Goshen Parkway West Chester, PA 19380

Re:

K073460

Trade/Device Name: Synthes 2.7 mm/3.5 mm LCP Distal Fibula Plates

Regulation Number: 21 CFR 888.3030

Regulation Name: Single/multiple component metallic bone fixation

appliances and accessories

Regulatory Class: II Product Code: HRS

Dated: December 6, 2008 Received: December 10, 2008

Dear Ms. Musgnung:

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.

Page 2 - Ms. Sheri Musgnung

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 (240) 276-0120. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR 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,

Mark N. Melkerson

Mark M. Miller

Director

Division of General, Restorative and Neurological Devices Office of Device Evaluation Center for Devices and

Radiological Health

Enclosure



| Synthes 2.7 mm/3.5 mm LCP Distal Fibula Plates | | |
|---|--|--|
| | | |
| The Synthes 2.7 mm/3.5 mm LCP Distal Fibula Plates are indicated for fractures, osteotomies, and non-unions of the metaphyseal and diaphyseal region of the distal fibula, especially in osteopenic bone. | | |
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| | | |
| AND/OR Over-The-Counter Use(21 CFR 807 Subpart C) | | |
| ELOW THIS LINE - CONTINUE ON ANOTHER PAGE IF | | |
| e of CDRH, Office of Device Evaluation (ODE) | | |
| (Invision Sign-Off) Division of General, Responsible, and Neurological Devices 510(k) Number 103460 | | |
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