

FEB 20 2009

510(k) Summary

Submitted By:

Karen Bradburn
Senior Regulatory Affairs Specialist
Cook Incorporated
750 Daniels Way, PO Box 489
Bloomington, IN 47402
812-339-2235

Device:

Trade Name: Connex Gastrointestinal Suture Anchor Set
Proposed Classification: Catheter, Biliary, Diagnostic
21 CFR §876.5010

Indications for Use:

The Connex Gastrointestinal Suture Anchor Set is intended for anchoring the anterior wall of the stomach to the abdominal wall prior to introduction of interventional catheters.

Predicate Devices:

The Connex Gastrointestinal Suture Anchor Set is similar to the predicate Cope Suture Anchor in terms of intended use, materials of construction and technological characteristics.

Device Description:

The Connex Gastrointestinal Suture Anchor Set consists of 2 introducer needles with preloaded anchors and a .018/.035 inch wire guide with a spring coil tip. It is supplied sterile and is intended for one-time use.

Substantial Equivalence:

The proposed Connex Gastrointestinal Suture Anchor Set is substantial equivalence to the predicate device, Cope Suture Anchor, K873606. The identical indications for use, principles of operations, similar materials of construction and technological characteristics of the device support a determination of substantial equivalency.

Test Data:

The Connex Gastrointestinal Suture Anchor Set was subjected to the following tests to assure reliable design and performance under the specified testing parameters. These tests were comprised of:

1. Tensile Testing
2. Insertion Testing
3. Biocompatibility Testing

The results of these tests provide reasonable assurance that the device has been designed and tested to assure conformance to the requirements for its use as a suture anchor.



Food and Drug Administration
9200 Corporate Boulevard
Rockville MD 20850

FEB 20 2009

Karen Bradburn, RAC
Senior Regulatory Affairs Specialist
Cook Incorporated
750 Daniels Way, P.O. Box 489
BLOOMINGTON IN 47402-0489

Re: K090133
Trade/Device Name: Connex Gastrointestinal Suture Anchor Set
Regulation Number: 21 CFR §876.5010
Regulation Name: Biliary catheter and accessories
Regulatory Class: II
Product Code: FGE
Dated: January 16, 2009
Received: January 21, 2009

Dear Ms. Bradburn:

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.

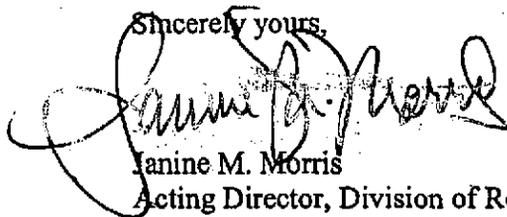
This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to 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 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 892.xxx	(Radiology)	(240) 276-0120
Other		(240) 276-0100

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 Biometrics' (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,



Janine M. Morris
Acting Director, Division of Reproductive,
Abdominal, and Radiological Devices
Office of Device Evaluation
Center for Devices and Radiological Health

Enclosure

510(k) Number (if known): K090133

Device Name: Connex Gastrointestinal Suture Anchor Set

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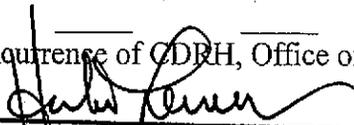
Prescription Use X
(Per 21 CFR 801 Subpart D)

OR

Over-the-Counter Use _____
(21 CFR 807 Subpart C)

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

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



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

510(k) Number K090133