

**VII. 510(k) Summary**

K090298

In accordance with Title 21 of the Code of Federal Regulations, Part 807, and in particular §807.92, the following summary of information is provided:

**A. Submitted by:**

Ms. Han Fan  
Regulatory Affairs Associate  
NuVasive, Incorporated  
7475 Lusk Blvd.  
San Diego, California 92121  
Telephone: (858) 909-1868  
Fax: (858) 909-2068

JUN - 8 2009

**B. Device Name**

Trade or Proprietary Name: *NuVasive® NeuroVision® EMG Endotracheal Tube*  
Common or Usual Name: Endotracheal Tube with Electromyography (EMG) monitoring Electrodes.  
Classification Name: Tracheal Tube  
Inflatable Cuff  
Surgical nerve stimulator/locator  
Device Class: Class II  
Classification: §874.1820, §882.1870, §868.5730 and §868.5750  
Product Code: ETN, GWF

**C. Predicate Devices**

The subject *NeuroVision EMG Endotracheal Tube* is substantially equivalent to the *Xomed EMG Endotracheal Tube* and the *Arcadia Medical Endotracheal Tube* currently distributed commercially in the U.S..

**D. Device Description**

The *NeuroVision® EMG Endotracheal (ET) Tube* is a low pressure cuff endotracheal tube with integrated electrodes for electromyographic (EMG) monitoring during surgery.

**E. Intended Use**

The *NeuroVision® EMG Endotracheal Tube* is intended for use with any compatible monitoring system during surgical procedures for continuous EMG neurological monitoring and status assessment of the nerves supplying the laryngeal musculature as well as for providing an open airway for patient ventilation.

**F. Substantial Equivalence**

As was established in this submission, the subject device is substantially equivalent to other devices cleared by the agency for commercial distribution in the United States.

Engineering specifications and labeling have demonstrated that the subject device is substantially equivalent, if not identical, to its predicate devices in terms of design, materials of composition, indications for use, and such other characteristics as may be associated with the manufacture of any medical device.



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

NuVasive, Inc.  
c/o Han Fan  
Regulatory Affairs Associate  
7475 Lusk Blvd.  
San Diego, CA 92121

JUN - 8 2009

Food and Drug Administration  
9200 Corporate Boulevard  
Rockville MD 20850

Re: K090298

Trade/Device Name: NuVasive® NeuroVision® EMG Endotracheal Tube  
Regulation Numbers: 21 CFR 882.1870  
Regulation Name: Evoked Response Electrical Stimulator  
Regulatory Class: II  
Product Code: GWF  
Dated: May 21, 2009  
Received: May 22, 2009

Dear Ms. Fan:

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 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); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); 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.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please go to <http://www.fda.gov/AboutFDA/CentersOffices/CDRH/CDRHOffices/ucm115809.htm> for the Center for Devices and Radiological Health's (CDRH's) Office of Compliance. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to <http://www.fda.gov/cdrh/mdr/> for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

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,



Malvina B. Eydelman, M.D.

Director  
Division of Ophthalmic and Ear, Nose  
and Throat Devices  
Office of Device Evaluation  
Center for Devices and  
Radiological Health

Enclosure

Indications for Use

K090298

510(k) Number (if known): K090298

Device Name: NuVasive NeuroVision EMG Endotracheal Tube

Indications For Use:

The NeuroVision EMG Endotracheal Tube is intended for use with any compatible monitoring system during surgical procedures for continuous EMG neurological monitoring and status assessment of the nerves supplying the laryngeal musculature as well as for providing an open airway for patient ventilation.

Prescription Use  (Part 21 CFR 801 Subpart D)

AND/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)

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(Division Sign-Off)  
Division of Ophthalmic and Ear,  
Nose and Throat Devices

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