K011443

AUG - 3 2001

THREADED CEMENT RESTRICTOR (CR) - TITANIUM
510(k) Summary
May 2001

I. Company: Medtronic Sofamor Danek USA, Inc.
1800 Pyramid Place
Memphis, TN 38132
(901) 396-3133

II. Proposed Proprietary Trade Name:

THREADED CR - TITANIUM

III. Device Description:

The THREADED CR - TITANIUM is a threaded, hollow, and tapered cylinder that is titanium. The device is intended to be used in conjunction with standard PMMA cement.

The THREADED CR - TITANIUM implants are manufactured from titanium alloy as described by ASTM F136 or ISO 5832-3.
The purpose of this submission is to obtain clearance for the alternative design. All other aspects of the device including material, indications for use, and fundamental scientific technology are the same as the previous cleared TITANIUM CEMENT RESTRICTOR.

IV Intended Use:

The Medtronic Sofamor Danek THREADED CR - TITANIUM is intended for use as a cement restrictor in the femur, tibia and/or humerus.

V. Substantial Equivalence:

The THREADED CR - TITANIUM was demonstrated to be substantially equivalent to previously cleared devices such as the Medtronic Sofamor Danek Resorbaplug (K920118) and TITANIUM CEMENT RESTRICTOR (K003718) and the Signus Medizintechnik, GmbH Rabea Cement Restrictor Device (K990345). A Design Review for the device was provided in this submission.

DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Food and Drug Administration
9200 Corporate Boulevard
Rockville MD 20850

AUG 3 1 2001

Richard W. Treharne, Ph.D.
Senior Vice President, Regulatory Affairs
Medtronic Sofamor Danek
1800 Pyramid Place
Memphis, Tennessee 38132

Re: K011443
Threaded Cement Restrictor (CR) - Titanium
Regulation Number: 878.3300
Regulatory Class: II
Product Code: JDK
Dated: May 10, 2001
Received: May 11, 2001

Dear Dr. Treharne:

This letter corrects our substantially equivalent letter of August 3, 2001.

We have reviewed your Section 510(k) notification of intent to market the device referenced above and we 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). You may, therefore, market the device, subject to the general controls provisions of the Act and the limitations described below. 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.

The Office of Device Evaluation has determined that there is a reasonable likelihood that this device will be used for an intended use not identified in the proposed labeling and that such use could cause harm. Therefore, in accordance with Section 513(i)(1)(E) of the Act, the following limitation must appear in the Warnings section of the device's package insert and also as a Warning on the product label:

WARNING: THIS DEVICE IS NOT INTENDED FOR ANY SPINAL INDICATIONS. THE SAFETY AND EFFECTIVENESS OF THIS DEVICE WHEN IMPLANTED IN THE SPINE HAVE NOT BEEN ESTABLISHED.

If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval), 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 895. A substantially equivalent determination assumes compliance with the Current Good Manufacturing Practice requirements, as set forth in the Quality System Regulation (QS) for Medical Devices: General regulation (21 CFR Part 820) and that, through periodic QS inspections, the Food and Drug Administration (FDA) will verify such assumptions. Failure to comply with the GMP regulation may result in regulatory action. In addition, FDA may publish further announcements concerning your device in the Federal Register. Please note: this response to your premarket notification submission does not affect any obligation you might have under sections 531 through 542 of the Act for devices under the Electronic Product Radiation Control provisions, or other Federal laws or regulations.

The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and permits your device to proceed to the market. This letter will allow you to begin marketing your device as described in your 510(k) premarket notification if the limitation statement above is added to your labeling, as described.

Please note that the above labeling limitations are required by Section 513(i)(1)(E) of the Act. Therefore, a new 510(k) is required before these limitations are modified in any way or removed from the device's labeling.

If you desire specific information about the application of other labeling requirements to your device (21 CFR Part 801 and additionally 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4659. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification"(21 CFR 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its internet address "http://www.fda.gov/cdrh/dsma/dsmamain.html".

Sincerely yours,

Bernard E. Statland, M.D., Ph.D.
Director
Office of Device Evaluation
Center for Devices
and Radiological Health

Enclosure

510(k) Number: K011443

Device Name: Medtronic Sofamor Danek Threaded Cement Restrictor (CR) - Titanium

FDA's Statement of the Indications For Use for Device:

The Medtronic Sofamor Danek Threaded Cement Restrictor (CR) – Titanium is intended for use as a cement restrictor in orthopedic surgeries in the tibia, femur and/or humerus.

The Medtronic Sofamor Danek Cement Restrictor is NOT intended for any spinal indications.

Prescription Use____ OR Over-The-Counter Use____
(Per 21 CFR 801.109)

for Mark N Melkerson
(Division Sign-Off)
Division of General, Restorative
and Neurological Devices

510(k) Number K011443