

DEC 18 2008

Summary of Safety and Effectiveness

Submitter: Zimmer, Inc.
P.O. Box 708
Warsaw, IN 46581-0708

Contact Person: Anthony Francalancia, RAC
Senior Associate, Regulatory Affairs
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Date: August 29, 2008

Trade Name: *Zimmer*[®] Universal Locking System: 3.5 mm
Locking Plates and Screws (*Titanium*[®] Ti-6Al-4V
Alloy, CP Grade Titanium)

Common Name: 3.5mm TiULS Locking Plate System

**Classification Name
and Reference:** Plate, Fixation, Bone (21 CFR § 888.3030)
Screw, Fixation, Bone (21 CFR § 888.3040)

Predicate Device: *Zimmer* Universal Locking System, 3.5mm Plates
and Screws, manufactured by Zimmer, Inc.,
K060710, cleared April 26, 2006

Device Description: The *Zimmer* Universal Locking System is a plate
and screw system intended for internal fracture
fixation. The plate selection consists of dual
compression, reconstruction, tubular, straight "T"
and oblique "T" configurations. Plates
accommodate either standard or locking screws via
figure-8 shaped holes.

Intended Use: The Universal Locking System is indicated for
temporary internal fixation and stabilization of
osteotomies and fractures, including:

- Comminuted fractures
- Supracondylar fractures
- Extra-articular fractures
- Fractures in osteopenic bone
- Nonunions
- Malunions

Comparison to Predicate Device:

The *Zimmer* Universal Locking System: 3.5mm Locking Plates and Screws (*Titanium* Ti-6Al-4V Alloy, CP Grade Titanium) have the same intended use, similar performance characteristics and are similar in design to the predicate devices.

Performance Data (Nonclinical and/or Clinical):

Non-Clinical Performance and Conclusions:

The results of non-clinical (laboratory) performance testing demonstrate that the device is safe and effective.



Food and Drug Administration
9200 Corporate Boulevard
Rockville MD 20850

Zimmer, Inc.
% Mr. Anthony Francalancia
Senior Regulatory Affairs Associate
P.O. Box 708
Warsaw, Indiana 46581

DEC 18 2008

Re: K082527

Trade/Device Name: *Zimmer*[®] Universal Locking System: 3.5 mm Locking Plates and
Screw (Titanium[®] Ti-6Al-4V Alloy, CP Grade Titanium)

Regulation Number: 21 CFR 888.3030

Regulation Name: Single/multiple component metallic bone fixation appliances and
accessories

Regulatory Class: II

Product Code: HRS, HWC

Dated: December 8, 2008

Received: December 9, 2008

Dear Mr. Francalancia:

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

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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 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" (21CFR 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 toll-free number (800) 638-2041 or (240) 276-3150 or the Internet address <http://www.fda.gov/cdrh/industry/support/index.html>.

Sincerely yours,



Mark N. Melkerson
Director
Division of General; Restorative
and Neurological Devices
Office of Device Evaluation
Center for Devices and
Radiological Health

Enclosure

Indications for Use

510(k) Number (if known):

Device Name:

Zimmer® Universal Locking System: 3.5 mm Locking Plates and Screws (Titanium® Ti-6Al-4V Alloy, CP Grade Titanium)

Indications for Use:

The Universal Locking System is indicated for temporary internal fixation and stabilization of osteotomies and fractures, including:

- Comminuted fractures
- Supracondylar fractures
- Extra-articular fractures
- Fractures in osteopenic bone
- Nonunions
- Malunions

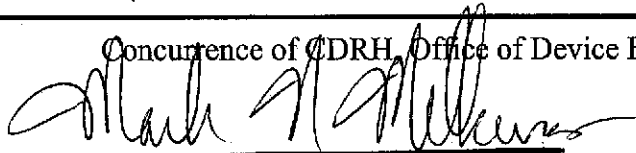
Prescription Use X
(Part 21 CFR 801 Subpart D)

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)



(Division Sign-Off)

Division of General, Restorative,
and Neurological Devices

510(k) Number

K082527

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