

**510(k) SUMMARY**  
807.92(c)

K112735

NOV -2 2012

**SPONSOR**

Company Name: Natec Medical Ltd.  
Company Address: Maeva Centre Building - Ebene Business Park  
Reduit, Mauritius

Telephone: +230 466 30 54  
Fax: +230 466 67 70

Contact Person: Xavier De Buchere  
Quality Manager  
[info@natec-medical.com](mailto:info@natec-medical.com)

Summary Preparation Date: October 08, 2012

**DEVICE NAME**

Trade Name: Tamarin Blue® PTCA RX Dilatation Catheter  
Common/Usual Name: PTCA RX Catheter  
Classification Name: Catheters, transluminal coronary angioplasty, percutaneous  
Regulation Number: 870.5100  
Product Code: LOX  
Device Class: Class II

**PREDICATE DEVICE**

Legally Marketed Equivalent Devices:

- Maverick 2 PTCA Catheter - Boston Scientific Corporation – P860019
- Sprinter Legend Rapid Exchange Balloon Dilatation Catheter – Medtronic Ireland – P790017
- Trek™ RX Coronary Dilatation Catheter - Abbott Vascular Inc. – K103110

**DEVICE DESCRIPTION**

The Tamarin Blue® PTCA RX Dilatation Catheter is a standard Rapid Exchange (RX) PTCA catheter with a single lumen proximally, a dual lumen distally, a semi-compliant inflatable balloon and a soft, tapered distal tip to aid in crossing tight stenoses. One lumen of the catheter's dual lumen is used for inflation and deflation of the balloon, and the other lumen allows guide wire access through the distal part of the catheter. The maximum recommended guide wire diameter is 0.014". A luer lock fitting (Hub) allows

connection with an inflation device. Two radiopaque markers on the guide wire lumen tubing provide visual reference points for balloon positioning across the stenosis. The balloon material expands to a known diameter at specific pressure as defined in the compliance table supplied with the catheter. The device is available in the balloon diameters and lengths shown in the table below:

		Diameter (mm)								
		1.50	2.00	2.25	2.50	2.75	3.00	3.25	3.50	4.00
Length (mm)	8	✓	✓	✓	✓	✓	✓	✓	✓	✓
	12	✓	✓	✓	✓	✓	✓	✓	✓	✓
	16	✓	✓	✓	✓	✓	✓	✓	✓	✓
	20	✓	✓	✓	✓	✓	✓	✓	✓	✓
	25		✓	✓	✓	✓	✓	✓	✓	✓
	30		✓	✓	✓	✓	✓	✓	✓	✓
	30									

It will be supplied sterile and is intended for one time use.

### DEVICE INTENDED USE

The Tamarin Blue® PTCA RX Dilatation Catheters are indicated for Balloon dilatation of the stenotic portion of a coronary artery or bypass graft stenosis, for the purpose of improving myocardial perfusion.

### COMPARISON OF TECHNICAL CHARACTERISTICS 807.92(a)(6)

The Tamarin Blue® PTCA RX Dilatation Catheter uses similar technology, materials and methods of operation as the approved predicates: Maverick2 PTCA Catheter (P860019), Sprinter Legend RX (P790017/S096 & K103095) and Trek™ RX device (K103110). The properties of the Tamarin Blue® PTCA RX Catheter to treat disease are identical to predicate PTCA balloon dilatation catheters.

Additionally, the Tamarin Blue® PTCA RX Dilatation Catheter incorporates substantially equivalent indications for use, design and dimensional and performance specifications as those found with the aforementioned predicate devices.

### NONCLINICAL TESTS

### SAFETY and EFFECTIVENESS

### BIOCOMPATIBILITY

All materials used in the Tamarin Blue® PTCA RX Dilatation Catheter are biocompatible based on biocompatibility testing results. The device has been tested according to ISO 10993 Part 1, 2, 4, 5, 10, 11, 12, ASTM F756-00 and 21 CFR 58 (GLP regulations).

## **PERFORMANCE DATA**

The safety and effectiveness of the Tamarin Blue® PTCA RX Dilatation Catheter has been evaluated in the following non-clinical tests:

- Biocompatibility
- Balloon compliance
- Balloon burst pressure
- Balloon fatigue (repeated balloon inflation) endurance
- Balloon inflation/deflation performance
- Bond strengths
- Catheter dimensions and balloon profile
- Catheter body minimum burst strength
- Device preparation (guide wire and introducer compatibility)
- Flexibility and Kink
- Torque
- Radiopacity
- Coating integrity
- Particulate evaluation

## **CONCLUSION**

The Tamarin Blue® PTCA RX Dilatation Catheter met all the predetermined acceptance criteria of design verification and validation as specified by applicable standards, guidance, and test protocols.

The Tamarin Blue® PTCA RX Dilatation Catheter has the same intended use, similar design and technological characteristics, equivalent performance properties, identical sterilization and packaging, same mode of operation, and no new safety or effectiveness issues. Therefore, the Tamarin Blue® PTCA RX Dilatation Catheter is considered substantially equivalent to the aforementioned predicate devices.



Food and Drug Administration  
10903 New Hampshire Avenue  
Document Control Center – WO66-G609  
Silver Spring, MD 20993-002

NOV 20 2012

Natec Medical Ltd  
c/o Judy Danielson  
Senior Regulatory Consultant  
CardioMed Device Consultants, LLC  
5523 Research Park Drive, Suite 360  
Baltimore, MD 21228

Re: K112735  
Trade/Device Name: Tamarin Blue® PTCA RX Dilatation Catheter  
Regulation Number: 21 CFR 870.5100  
Regulation Name: Catheters, transluminal coronary angioplasty, percutaneous  
Regulatory Class: Class II  
Product Code: LOX  
Dated (Date on orig SE letter): October 11, 2012  
Received (Date on orig SE letter): October 15, 2012

Dear Ms. Danielson:

This letter corrects our substantially equivalent letter of November 2, 2012.

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 (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



**Indications for Use Statement**

510(k) Number: K112735  
Device Name: Tamarin Blue® RX PTCA Dilatation Catheter  
Indications for Use: The Tamarin Blue® RX PTCA Dilatation Catheters are indicated for balloon dilatation of the stenotic portion of a coronary artery or bypass graft stenosis, for the purpose of improving myocardial perfusion.

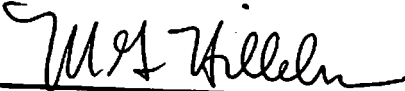
Prescription Use   X   AND/OR Over-The-Counter Use \_\_\_\_\_  
(Part 21 CFR 801 Subpart D) (21 CFR 801 Subpart C)

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NEEDED)

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Concurrence of CDRH, Office of Device Evaluation (ODE)

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(Division Sign-Off)  
Division of Cardiovascular Devices  
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