



August 18, 2022

Smith & Nephew, Inc.
Rose Beifuss
Senior Manager, Regulatory Affairs
7135 Goodlett Farms Parkway
Cordova, Tennessee 38016

Re: K220959

Trade/Device Name: OR3O Dual Mobility System

Regulation Number: 21 CFR 888.3358

Regulation Name: Hip Joint Metal/Polymer/Metal Semi-Constrained Porous-Coated Uncemented
Prosthesis

Regulatory Class: Class II

Product Code: LPH

Dated: July 14, 2022

Received: July 15, 2022

Dear Rose Beifuss:

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. Although this letter refers to your product as a device, please be aware that some cleared products may instead be combination products. The 510(k) Premarket Notification Database located at <https://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfpmn/pmn.cfm> identifies combination product submissions. 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. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

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) for devices or postmarketing safety reporting (21 CFR 4, Subpart B) for combination products (see <https://www.fda.gov/combination-products/guidance-regulatory-information/postmarketing-safety-reporting-combination-products>); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820) for devices or current good manufacturing practices (21 CFR 4, Subpart A) for combination products; and, if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to <https://www.fda.gov/medical-devices/medical-device-safety/medical-device-reporting-mdr-how-report-medical-device-problems>.

For comprehensive regulatory information about medical devices and radiation-emitting products, including information about labeling regulations, please see Device Advice (<https://www.fda.gov/medical-devices/device-advice-comprehensive-regulatory-assistance>) and CDRH Learn (<https://www.fda.gov/training-and-continuing-education/cdrh-learn>). Additionally, you may contact the Division of Industry and Consumer Education (DICE) to ask a question about a specific regulatory topic. See the DICE website (<https://www.fda.gov/medical-devices/device-advice-comprehensive-regulatory-assistance/contact-us-division-industry-and-consumer-education-dice>) for more information or contact DICE by email (DICE@fda.hhs.gov) or phone (1-800-638-2041 or 301-796-7100).

Sincerely,

Limin Sun, Ph.D.
Assistant Director
DHT6A: Division of Joint Arthroplasty Devices
OHT6: Office of Orthopedic Devices
Office of Product Evaluation and Quality
Center for Devices and Radiological Health

Enclosure

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Food and Drug Administration

Form Approved: OMB No. 0910-0120
Expiration Date: 06/30/2023
See PRA Statement below.

Indications for Use

510(k) Number (if known)

K220959

Device Name

OR3O Dual Mobility System

Indications for Use (Describe)

Intended Use

The OR3O Dual Mobility System is intended for use in primary and revision total hip arthroplasty in skeletally mature patients.

Indications

- Advanced degeneration of the hip joint as a result of degenerative, post-traumatic, or rheumatoid arthritis.
- Fracture or avascular necrosis of the femoral head.
- Failure of previous hip surgery: joint reconstruction, internal fixation, arthrodesis, hemiarthroplasty, surface replacement arthroplasty, or total hip replacement.
- All forms of osteoarthritis.
- Patients with hips at risk of dislocation.
- Femoral neck fracture or proximal hip joint fracture.

The OR3O Dual Mobility System is intended for single use only. The modular OR3O Liners and Inserts are to be implanted without bone cement.

Mating components may be indicated for use without bone cement.

Type of Use (Select one or both, as applicable)

Prescription Use (Part 21 CFR 801 Subpart D)

Over-The-Counter Use (21 CFR 801 Subpart C)

CONTINUE ON A SEPARATE PAGE IF NEEDED.

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510(k) Summary
Smith & Nephew OR3O Dual Mobility System

I. SUBMITTER

Smith & Nephew, Inc.
Orthopaedics Division
7135 Goodlett Farms Parkway
Cordova, Tennessee 38016

Phone: (385) 253-2551

Contact Person: Rose Beifuss,
Senior Manager, Regulatory Affairs
Date Prepared: August 15, 2022

II. DEVICE

Name of Device: OR3O Dual Mobility System
Common Name: Hip Prosthesis
Regulatory Class: Class II
Product Code: LPH
Classification Name: Hip joint metal/polymer/metal semi-constrained porous-coated uncemented prosthesis, (21 CFR888.3358)

PREDICATE DEVICE Primary Predicate: OR3O Dual Mobility System - K191002 (S.E. 10/31/2019)
Predicate 2: POLARCUP Dual Mobility System - K110135 (S.E. 10/14/2011)
Predicate 3: REFLECTION Hip System - K071160 (S.E. 10/05/2007)
Predicate 4: REFLECTION Hip System - K932755 (S.E. 05/06/1994)
Predicate 5: BH Dual Mobility System - K171934 (S.E. 11/30/2017)

The predicate devices have not been subject to a design related recall.

III. DEVICE DESCRIPTION

The OR3O Hip System is a modular dual mobility implant system. The system consists of diffusion hardened oxidized zirconium (OXINIUM DH) alloy liners with a highly polished zirconium oxide inner surface and a machined locking taper and backside of Zr2.5Nb alloy (F2384-10R16). The locking taper and outside profile is designed to mate with a dedicated Ti6Al4V R3 acetabular shell with OD sizes 44mm to 74mm or REDAPT Modular Press-fit acetabular shell with OD sizes 48mm to 74mm. For each assembled OR3O liner and R3 shell size from 44mm to 74mm and REDAPT Modular shell size from 48mm to 74mm, a dedicated insert is available. Inserts are made of highly crosslinked ultra-high-molecular-weight polyethylene (ISO 5834-2/ASTM F648) that is irradiated with a 10 Mrad dose and remelted. These can be combined with oxidized zirconium or CoCr alloy femoral heads of sizes 22 mm (for Size 44mm-52mm) and 28 mm (for size 50mm-74mm). The final OR3O Dual Mobility construct will include an acetabular shell (with optional screws and optional screw hole covers), an OXINIUM DH Liner, a cross linked polyethylene (XLPE) Insert and a femoral head.

The purpose of this Traditional 510(k) submission is to add additional components, namely additional sizes of the OR3O Dual Mobility OXINIUM DH Liners and OR3O Dual Mobility XLPE Inserts to the existing OR3O Dual Mobility System.

This line extension will consist of two smaller size OXINIUM DH Liners and four additional XLPE inserts to allow for a wider range of implant options for physicians to choose from. The materials and manufacturing processes will be the same, with the exception of accounting for different sized implants.

IV. INDICATIONS FOR USE

Intended Use

The OR3O Dual Mobility System is intended for use in primary and revision total hip arthroplasty in skeletally mature patients.

Indications

- Advanced degeneration of the hip joint as a result of degenerative, post-traumatic, or rheumatoid arthritis.
- Fracture or avascular necrosis of the femoral head.
- Failure of previous hip surgery: joint reconstruction, internal fixation, arthrodesis, hemiarthroplasty, surface replacement arthroplasty, or total hip replacement.
- All forms of osteoarthritis.
- Patients with hips at risk of dislocation.
- Femoral neck fracture or proximal hip joint fracture.

The OR3O Dual Mobility System is intended for single use only. The modular OR3O Liners and Inserts are to be implanted without bone cement.

Mating components may be indicated for use without bone cement.

V. COMPARISON OF TECHNOLOGICAL CHARACTERISTICS WITH THE PREDICATE DEVICE

The subject OR3O Dual Mobility System implants have the same or similar intended use, fundamental scientific technology, materials, and indications for use as the following FDA cleared predicates: OR3O Dual Mobility System - K191002 (S.E 10/31/2019), POLARCUP Dual Mobility System - K110135 (S.E. 10/14/2011), REFLECTION Hip System - K071160 (S.E. 10/05/2007) - REFLECTION Hip System (K932755 S.E. 05/06/1994), BH Dual Mobility System - K171934 (S.E. 11/30/2017)

The subject device includes two implant components to form a dual mobility concept where there are two articulating surfaces in the same joint space:

LINER

- The subject OR3O Dual Mobility System Liner uses an OXIDIZED DH Zirconium (OXINIUM DH) material with a highly polished inner surface identical to the predicate OR3O Dual Mobility System - K191002 (S.E 10/31/2019). The OR3O Dual Mobility Liners have a locking taper and are designed to mate with existing Smith & Nephew R3 (K092386 – S.E. 11/03/2009) or REDAPT Modular Shell - K182109 (S.E. 11/16/2018).

INSERT

- The subject OR3O Dual Mobility XLPE material is identical to the predicate OR3O Dual Mobility XLPE material - OR3O Dual Mobility K191002 (S.E 10/31/2019), with only minor design iterations made to allow for smaller size implants. Both the subject and predicate OR3O Dual Mobility XLPE Inserts are intended to be used as an articulating component of the OR3O Dual Mobility System.

The OR3O Dual Mobility Liners and OR3O Dual Mobility Inserts are intended to be used with existing Smith & Nephew Acetabular Shells and Femoral Heads:

- Existing Acetabular Shells – The OR3O Dual Mobility System uses existing Smith & Nephew R3 Shells - K092386 (S.E. 11/03/2009) or Smith & Nephew REDAPT Modular Press-fit acetabular shells - K182109 (S.E. 11/16/2018).
- Existing Femoral Heads - The OR3O Dual Mobility System uses existing Smith & Nephew OXINIUM Femoral Heads K110101 (S.E. 04/11/2011) or Cobalt Chrome Femoral Heads – K963509 (S.E. 01/27/1997) and K963486 (S.E. 11/27/1996).

VI. PERFORMANCE DATA

The following performance data are provided in support of the substantial equivalence determination.

Biocompatibility

The biocompatibility evaluation for the OR3O Dual Mobility Implants was conducted in accordance with FDA’s Guidance for Industry and FDA Staff “Use of International Standard

ISO-10993, Biological Evaluation of Medical Devices Part 1: Evaluation and Testing Within a Risk Management Process”.

The subject OR3O Dual Mobility Implants are permanent implants and will be classified as permanent, >30 day body contact according to ISO-10993, “Biological Evaluation of Medical Devices Part 1: Evaluation and Testing within a Risk Management Process”.

The subject OR3O Dual Mobility Liners are manufactured from Zr-2.5Nb alloy materials in accordance with the following ASTM standard: F2384- 10R16 Standard Specification for Wrought Zirconium-2.5Niobium Alloy for Surgical Implant Applications (UNS R60901).

The subject OR3O Dual Mobility Inserts are manufactured from identical polyethylene XLPE materials as the predicate device, in accordance with the following standards: ASTM F648-14 (Standard Specification for Ultra-High-Molecular-Weight Polyethylene Powder and Fabricated Form for Surgical Implants) and ISO 5834-2 (Implants for surgery. Ultra-high-molecular-weight polyethylene. Moulded forms).

A biocompatibility evaluation has been completed and a Declaration of Conformity’s has been provided for the OR3O Dual Mobility System line extension.

Mechanical testing

Smith & Nephew has evaluated the subject OR3O Dual Mobility System to demonstrate substantial equivalence to the predicate devices: OR3O Dual Mobility System - K191002 (S.E 10/31/2019), POLARCUP Dual Mobility System - K110135 (S.E. 10/14/2011), REFLECTION Hip System – K071160 (S.E. 10/05/2007), REFLECTION Hip System (K932755 S.E. 05/06/1994) and BH Dual Mobility System - K171934 (S.E. 11/30/2017), and determined that the subject devices do not represent a new worst case.

Biomechanical testing and/ or rationales were completed on the subject devices as follows:

Standard	Testing
ASTM F1820	<ul style="list-style-type: none"> • Push Out Testing • Torque to Failure Testing • Lever-Out Testing
ASTM F1875	<ul style="list-style-type: none"> • Environmental Fatigue and Corrosion Assessment
ISO 7206-12	<ul style="list-style-type: none"> • Deformation Testing
ASTM F2582	<ul style="list-style-type: none"> • Neck Impingement Testing
ISO 21535-2009	<ul style="list-style-type: none"> • Range of Motion
ISO 14242	<ul style="list-style-type: none"> • Wear Testing
N/A	<ul style="list-style-type: none"> • Jump Distance • Insert Pull-Out Testing • Insert Lever-out Testing

The subject OR3O Dual Mobility devices met the pre-determined acceptance criteria for each intended output. Therefore, design verification testing determined that the subject OR3O Dual Mobility System is substantially equivalent to the identified predicate devices.

Non-Pyrogenicity Endotoxin Testing

Bacterial endotoxin testing was completed and met the acceptable endotoxin limit as stated in the FDA Guidance, “Submission and Review of Sterility Information in Premarket Notification (510(k)) Submissions for Devices Labeled as Sterile,” “Pyrogen and Endotoxins Testing: Questions and Answers,” and ANSI/AAMI ST72 “Bacterial endotoxins – Test methods, routine monitoring and alternatives to batch testing”.

VII. CONCLUSIONS

Based on the verification evidence activities provided in this pre-market notification application, the subject OR3O Dual Mobility System is substantially equivalent to the legally marketed primary predicate device - OR3O Dual Mobility System - K191002 (S.E 10/31/2019), and the other predicates: POLARCUP Dual Mobility System - K110135 (S.E. 10/14/2011), REFLECTION Hip System K071160 (S.E. 10/05/2007), REFLECTION Hip System - K932755 (S.E. 05/06/1994) and BH Dual Mobility System - K171934 (S.E. 11/30/2017).