July 7, 2021



Paragon 28, Inc. Haylie Hertz Regulatory Affairs Specialist 14445 Grasslands Dr. Englewood, Colorado 80112

Re: K211002

Trade/Device Name: GrapplerTM Suture Anchor System Regulation Number: 21 CFR 888.3040 Regulation Name: Smooth or threaded metallic bone fixation fastener Regulatory Class: Class II Product Code: MBI Dated: June 23, 2021 Received: June 28, 2021

Dear Haylie Hertz:

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 <u>Federal Register</u>.

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 <u>https://www.fda.gov/medical-devices/medical-device-safety/medical-device-reporting-mdr-how-report-medical-device-problems</u>.

For comprehensive regulatory information about medical devices and radiation-emitting products, including information about labeling regulations, please see Device Advice (<u>https://www.fda.gov/medical-devices/device-advice-comprehensive-regulatory-assistance</u>) and CDRH Learn (<u>https://www.fda.gov/training-and-continuing-education/cdrh-learn</u>). 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 (<u>https://www.fda.gov/medical-devices/device-advice-comprehensive-regulatory-assistance/contact-us-division-industry-and-consumer-education-dice</u>) for more information or contact DICE by email (<u>DICE@fda.hhs.gov</u>) or phone (1-800-638-2041 or 301-796-7100).

Sincerely,

for

Laura C. Rose, Ph.D.
Assistant Director
DHT6C: Division of Restorative, Repair and Trauma 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

Indications for Use

510(k) Number *(if known)* K211002

Device Name GRAPPLER[™] Suture Anchor System

Indications for Use (Describe)

The GRAPPLER[™] Suture Anchor System is intended for the fixation of soft tissue to bone including:

Elbow: Biceps Tendon Reattachment, Lateral Epicondylitis Repair, Tennis Elbow Repair

Shoulder: Rotator Cuff Repair, Bankart Repair, SLAP Lesion Repair, Biceps Tenodesis, Acromio-Clavicular Separation Repair, Deltoid Repair, Capsular Shift or Capsulolabral Repair

Hand/Wrist: Scapholunate Ligament Reconstruction, Ulnar or Radial Collateral Ligament Reconstruction, TFCC

Foot/Ankle: Lateral Stabilization (Brostrom, Brostrom-Gould, Chrisman-Snook Repair), Ankle Ligament Repair, Medial Stabilization (Deltoid Repair, Spring Ligament Reconstruction), Achilles Tendon Repair, Metatarsal Ligament Repair, Syndesmosis Repair, Hallux Valgus Reconstruction, Digital Tendon Transfers, Mid-foot Reconstruction, LisFranc Repair

Knee: Medial Collateral Ligament Repair, Lateral Collateral Ligament Repair, Posterior Oblique Ligament Repair, Iliotibial Band Tenodesis, Extra Capsular Reconstruction, Patellar Ligament and Tendon Avulsion Repair

Hip: Capsular Repair, Acetabular Labral Repair

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) Number: K211002 Dated: June 23, 2021

510(K) SUMMARY

510(k) Number:	K211002
Manufacturer:	Paragon 28, Inc. 14445 Grasslands Dr. Englewood, CO 80112
Contact:	Haylie Hertz Regulatory Affairs Specialist Paragon 28, Inc. 14445 Grasslands Dr. Englewood, CO 80112 Phone: 303-720-0017 hhertz@paragon28.com
Date Prepared:	June 23, 2021
Device Trade Name:	GRAPPLER [™] Suture Anchor System
Device Class and Common Name:	Class II, Fastener, Fixation, Nondegradable, Soft Tissue
Classification:	21 CFR 888.3040: Smooth or threaded metallic bone fixation fastener
Product Codes:	MBI
Indications for Use:	The GRAPPLER TM Suture Anchor System is intended for the fixation of soft tissue to bone including:
	<i>Elbow:</i> Biceps Tendon Reattachment, Lateral Epicondylitis Repair, Tennis Elbow Repair
	Shoulder: Rotator Cuff Repair, Bankart Repair, SLAP Lesion Repair, Biceps Tenodesis, Acromio-Clavicular Separation Repair, Deltoid Repair, Capsular Shift or Capsulolabral Repair
	Hand/Wrist: Scapholunate Ligament Reconstruction, Ulnar or Radial Collateral Ligament Reconstruction, TFCC.

	<i>Foot/Ankle:</i> Lateral Stabilization (Brostrom, Brostrom-Gould, Chrisman-Snook Repair), Ankle Ligament Repair, Medial Stabilization (Deltoid Repair, Spring Ligament Reconstruction), Achilles Tendon Repair, Metatarsal Ligament Repair, Syndesmosis Repair, Hallux Valgus Reconstruction, Digital Tendon Transfers, Mid-foot Reconstruction, LisFranc Repair
	<i>Knee:</i> Medial Collateral Ligament Repair, Lateral Collateral Ligament Repair, Posterior Oblique Ligament Repair, Iliotibial Band Tenodesis, Extra Capsular Reconstruction, Patellar Ligament and Tendon Avulsion Repair
	Hip: Capsular Repair, Acetabular Labral Repair
Device Description:	The GRAPPLER [™] Suture Anchor System consists of suture anchors, suture, and the accompanying instrumentation for the intended use of soft tissue damage repair. The anchors are provided in PEEK, titanium, and suture materials in multiple sizes and lengths. Each anchor is accompanied by round suture or suture tape composed of UHMWPE and PGLA.
Predicate Device:	DePuy Synthes TransTend Anchors (K102298)
Reference Devices:	DePuy Synthes Healix Advance with DYNA+TAPE (K191483)
	 Parcus Medical, LLC Parcus MiTi Suture Anchor (K201083) Paragon 28, Inc. Paratrooper Plantar Plate Repair System (K191227) Riverpoint HS Suture Tape (K153307) Riverpoint Polyblend Non-Absorbable Surgical Suture (K100006, K190817) Ethicon VICRYL Polyglactin 910 Sterile Synthetic Absorbable Surgical Suture (K183183) Paragon 28 Grappler Interference Screw (K183690) Paragon 28 TenoTac Soft Tissue Fixation Device (K182898) Riverpoint PGLA Absorbable Suture (K120556) DePuy Mitek ORTHOCORD (K123668)
Substantial Equivalence:	 Paragon 28, Inc. Paratrooper Plantar Plate Repair System (K191227) Riverpoint HS Suture Tape (K153307) Riverpoint Polyblend Non-Absorbable Surgical Suture (K100006, K190817) Ethicon VICRYL Polyglactin 910 Sterile Synthetic Absorbable Surgical Suture (K183183) Paragon 28 Grappler Interference Screw (K183690) Paragon 28 TenoTac Soft Tissue Fixation Device (K182898) Riverpoint PGLA Absorbable Suture (K120556)

	 device performs as intended. All testing was performed on finished devices. The device performance was characterized via torsional strength, insertion/removal torque, pullout testing and tensile testing. Device shelf life was validated through real time and accelerate aging events assessed with seal strength, visual inspection, dye penetration, pressurization evaluations. Device sterility was validated through bioburden testing. Pyrogenicity was verified through bacterial endotoxin (LAL) testing. Clinical data are not needed to support the safety and effectiveness of the subject device.
Conclusions:	The GRAPPLER [™] Suture Anchor System subject to this submission possess the same intended use and technological characteristics as the predicate device system components. All performance testing conducted for the GRAPPLER [™] Suture Anchor System met the predetermined acceptance criteria or were otherwise considered acceptable. As such, the GRAPPLER [™] Suture Anchor System components are substantially equivalent to the predicate devices for the intended use.