

September 25, 2023

4WEB Medical, Inc. % Richard Jansen, Pharm. D. President Silver Pine Consulting 3851 Mossy Oak Drive Fort Myers, Florida 33905

Re: K231739

Trade/Device Name: Cervical Spine Truss System (CSTS) Regulation Number: 21 CFR 888.3080 Regulation Name: Intervertebral Body Fusion Device Regulatory Class: Class II Product Code: OVE, ODP Dated: June 14, 2023 Received: August 24, 2023

Dear Dr. Jansen:

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 <a href="https://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfpmn/pmn.cfm">https://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfpmn/pmn.cfm</a> 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 <a href="https://www.fda.gov/combination-products/guidance-regulatory-information/postmarketing-safety-reporting-combination-products">https://www.fda.gov/combination-products/guidance-regulatory-information/postmarketing-safety-reporting-combination-products</a>); 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,

**Brent Showalter -S** 

Brent Showalter, Ph.D. Assistant Director DHT6B: Division of Spinal Devices OHT6: Office of Orthopedic Devices Office of Product Evaluation and Quality Center for Devices and Radiological Health

Enclosure

## Indications for Use

Submission Number (if known)

K231739

Device Name

Cervical Spine Truss System (CSTS)

Indications for Use (Describe)

The Cervical Spine Truss System (CSTS) Interbody Fusion Device is indicated for use in skeletally mature patients with Degenerative Disc Disease (DDD) of the cervical spine at one level or two contiguous disc levels. DDD is defined as discogenic back pain with degeneration of the disc confirmed by patient history and radiographic studies. CSTS Interbody Fusion Devices are used as an adjunct to fusion in the cervical spine and are placed via an anterior approach at the C2 to T1 disc levels using autograft and/or allogenic bone graft comprised of cancellous and/or corticocancellous bone graft. Patients should have received 6 weeks of non-operative treatment prior to treatment with the devices. If the device is being used without the CSTS Integrated Plate, supplemental fixation must be used.

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

Date Prepared: Contact:	June 14,2023 Jessee Hunt, President 4WEB, Inc. 2801 Network Blvd., Suite 620 Frisco, TX 75034 Phone: (800) 285-7090 Fax: 972-488-1816
Regulatory Contact:	Rich Jansen, Pharm. D. Silver Pine Consulting, LLC richj@s-pineconsulting.com
Trade Name: Product Class: Classification: Common Name: Product Codes: Panel Code:	Cervical Spine Truss System Class II 21 CFR §888.3060, 21 CFR §888.3080 Intervertebral Body Fusion Device OVE, ODP 87

#### **Indications for Use:**

The Cervical Spine Truss System (CSTS) Interbody Fusion Device is indicated for use in skeletally mature patients with Degenerative Disc Disease (DDD) of the cervical spine at one level or two contiguous disc levels. DDD is defined as discogenic back pain with degeneration of the disc confirmed by patient history and radiographic studies. CSTS Interbody Fusion Devices are used as an adjunct to fusion in the cervical spine and are placed via an anterior approach at the C2 to T1 disc levels using autograft and/or allogenic bone graft comprised of cancellous and/or corticocancellous bone graft. Patients should have received 6 weeks of non-operative treatment prior to treatment with the devices. If the device is being used without the CSTS Integrated Plate, supplemental fixation must be used.

#### **Device Description:**

The device is an open architecture truss design mathematically formulated to provide structural support with open space throughout the implant for bone through growth and fusion. The 4WEB additive manufacturing process provides a hierarchical surface roughness. The implant is made from Ti6Al4V alloy. The device is available in a variety of heights, footprints, and lordotic angles. The CSTS Integrated Plates come in multiple heights to accommodate the patient's anatomy. Screws are inserted through the anterior portion of the Integrated Plates into adjacent vertebral bodies for bony fixation. The Integrated Plates have a rotating locking tab to prevent back-out of the screws.

## **Predicate Device(s):**

The primary predicate device is the 4WEB Medical Cervical Spine Truss System (K221266). Additional reference predicates include the 4WEB Medical Cervical Spine Truss System Stand Alone (K190870), Depuy Synthes ACIS anterior cervical interbody fusion device (K120275), and the 4WEB Medical Lateral Spine Truss System Plating Solution (K203065).

## **Performance Standards:**

Performance testing has been completed per the following standards:

- ASTM F2077 Static Axial compression
- ASTM F2077 Static Compression Shear
- ASTM F2077 Static Torsion
- ASTM F2077 Dynamic Axial Compression (With and Without the Integrated Plate)
- ASTM F2077 Dynamic Compression Shear (With and Without the Integrated Plate)
- ASTM F2077 Dynamic Torsion (With and Without the Integrated Plate)
- Screw Pushout Testing
- Expulsion Testing per accepted industry standard

Validated finite element analysis demonstrated that the worst case CSTS device for each endplate geometry is not a new worst case compared to the previously tested CSTS devices within the 4WEB portfolio.

MR Conditional Testing has been completed on the primary predicate device, the 4WEB Cervical Spine Truss System (K221266) and the reference predicate device, the Lateral Spine Truss System Plating Solution (K203065) to the following standards:

- ASTM F2119 MR Image Artifact
- ASTM F2182 MR induced Heating
- ASTM F2213 MR Induced Torque
- ASTM F2051 MR Induced Displacement Force

The results of this non-clinical testing show that the strength of the CSTS interbody and CSTS Interbody with an Integrated Plate is sufficient for its use and is substantially equivalent to legally marketed predicate devices.

## **Technological Characteristics:**

4WEB, Inc. has compared these devices to the previously cleared predicate devices in regard to indications for use, materials, function, sizes and simulated testing. These comparisons demonstrate substantial equivalence to the predicate devices.

**Conclusion:** 

4WEB, Inc. concludes that the CSTS devices are substantially equivalent to the predicate devices and raise no new questions of safety or effectiveness.