KN32671

DEC 2 0 2013

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510(k) Summary

510(k) Owner:	Stryker Instr			
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	(p) 269-389-			
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Contact Person:	Michelle Jun	np		
Registration No.:	1811755			•
Trade Name:	Stryker® Ne	ptune 2 Waste Management Sys	tem	
Common Name:	Portable suc	tion and smoke evacuation devic	e	
Classification	.			
Name and Regulation	Primary Pro	oduct Code		
Number	Product Code	Device	Regulation Number	Class
	JCX	apparatus, suction, ward use, portable, ac-powered	21 CFR 872.4780	II
	Secondary I	Product Code		
	Product Code	Device	Regulation Number	Class
	FYD	apparatus, exhaust, surgical	21 CFR 878.5070	II
			-	
Predicate	7	ptune Waste Management Syste		
Devices:		insposal Ultra System (K081047)		
	Valleylab Op	otiMumm Smoke Evacuator Syste	em (K980915)	

Device Description:

The Neptune 2 Waste Management System is a fluid waste management system with smoke evacuation. It collects surgical waste fluid within a closed suction system, then disposes of it through a docking station. The system is comprised of a rover and a docker (also referred to as a docking station).

The Neptune 2 Rover (Model Number: 0702-001-000) is a mobile, AC-powered surgical fluid waste collection device. It is intended to collect waste fluids and evacuate smoke during surgical procedures.

The Neptune 2 Docking Station (Model Number: 0702-014-000) is a stationary device for automated rover cleaning and waste offloading. It provides a fixed connection to the hospital's water supply, sewer, and electricity.

The following Stryker accessories are for use with the Neptune 2 Waste Management System:

Model Number	Product Name
0700-001-026	Neptune Docking Detergent
0702-020-000	Neptune 2 4-Port Manifold
0702-020-001	Neptune 2 Specimen Collection 4-Port
0702-025-000	Neptune 2 Single-Port Manifold
0702-034-000	Fluid Suction HEPA Filter .
0702-040-000	Smoke Evacuator ULPA Filter
0702-045-023	Smoke (Evacuator)Tubing, 3/8 inch x 10 feet
0700-026-000	Smoke (Evacuator) Tubing, 7/8 inch x 10 feet
0702-045-027	PenAdapt®

Indications for Use:

The Neptune 2 Waste Management System is intended to be used in the operating room, pathology, surgical centers, and doctor's offices to collect and dispose of surgical fluid waste as well as collect smoke generated from electrocautery or laser devices.

Contraindications

The Neptune 2 Waste Management System is contraindicated against:

- Connection directly to chest tubes.
- Connection to closed wound drainage systems.

Testing

The Neptune 2 Waste Management System meets the specification and performance characteristics as identified in Stryker's internal design control procedures. Bench testing was performed to demonstrate the performance of the device. Testing was completed to verify and validate the device as outlined in the device description. Testing included electrically powered suction safety, electrical safety, vacuum cycling, software, smoke evacuation and filtration. Human factors analysis and usability testing was performed on the user interface, labeling, and training materials.

Biocompatibility

Biocompatibility testing of the Neptune 2 Waste Management System confirmed that the device meets the applicable requirements of the FDA Blue Book Memorandum G95-1 entitled Use of International Standards ISO-10993 Biological Evaluation of

	Medical Devices Part -1: Evaluation and Testing and are biocompatible.
Substantial Equivalence (SE) Rationale:	The Neptune 2 Waste Management System, when compared to its predicates, has an equivalent intended use, protocols for use, mode of operation, technological characteristics and performance specifications.
	(See attached Table 1: Device Comparison Matrix)
Safety and Effectiveness:	Based upon the comparison to the predicate devices, the Stryker Neptune 2 Waste Management System is substantially equivalent to the predicate devices.
Submitted by:	Michelle Jump Associate Regulatory Affairs Analyst Welly Jump Signature
Date Submitted:	December 20, 2013

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Instruments

Table 1: Device Comparison Matrix

-	Stryker Neptune 1	Dornoch Transposal Ultra	Covidien (Valleylab) OptiMumm	Stryker Neptune 2
Model Number	Rover: 0700-010-00	Duo: DU100 Quad: QD100	OptiMumm: 945 102 097	Rover: 0702-010-000
Clearance			,	
510k	K012991	K081047	K980915	Pending
Classification	=	II	II II	=
Regulation	21 CFR 878.5070	21 CFR 878.4780	21 CFR 878.5070	21 CFR 878-4780 21 CFR 878-5070
Product Code	FYD	XOI	FYD	JCX FYD
Indications for Use	The Neptune Waste Management system is intended to be used in the Operating Room, Surgical Centers and Doctor's Offices to collect and dispose of surgical fluid waste as well as collect smoke generated from electrocautery or laser devices.	The Dornoch Transposal Ultra System is self-powered suction / vacuum pump intended to collect and dispose of liquid waste within Hospital Operating Rooms, Pathology Labs, Surgical Outpatient Centers, and Doctor's Offices.	The Indications for Use of the Valleylab OptiMumm Smoke Evacuator system are for the removal of smoke and incidental fluids produced during electrosurgery and/or laser surgery. The removal of smoke from the surgical site improves visibility and reduces potential health hazards associated with surgical smoke.	The Neptune Waste Management System is intended to be used in the operating room, pathology, surgical centers, and doctor's offices to collect and dispose of surgical fluid waste as well as collect smoke generated from electrocautery or laser devices.

Section 005 - 4

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The Neptune 2 Waste Management System is contraindicated against: Connection directly to chest tubes. Connection to closed wound drainage systems.		19 x 23 x 70"	5" swiveling hospital grade casters	Rubber bumpers	Wipe the external surfaces of the rover with a soft, lint-free cloth moistened with a non-abrasive, hospital disinfectant prepared according to the manufacturer's instructions. Caution against using solvents, lubricants, or other chemicals, including glutaraldehyde or similar chemical	No	2	Yes
None				Toward #				
None		24" x 24" x 55" or 23" x 33" x 55" (depending on model)	4" swiveling casters	Plastic bumpers	Wipe down the cart with a hospital approved bleach wipe (Sani-Cloth Bleach Germicidal wipe, Clorox: Germicidal Wipes or equivalent). Caution against using non-approved wipes.	ON	2 or 4 (depending on model)	Yes
None		· 18×25×51"	5" swiveling hospital grade casters	Rubber bumpers	Wipe the surfaces of the Rover and Docking Station with general purpose disinfectant. Caution against using Cidex® or similar cleansers.	Yes	1	Yes
Contraindication	System Configuration	Size	Casters	Bumpers	Cleaning instructions	Rover is battery-powered during docking	# of canisters	Volume measurement with digital display

Offloading and canister cleaning accessory	Neptune 1 Docking Station (0700-005-000)	Ultra Evac Docking Station UL-EV100		Neptune 2 Docking Station (0702-014-000)
Rover empty weight	230 lbs	195 lbs or 225 lbs (depending on model)	,	300 lbs
Electrical isolation type	Class I, Type CF Applied Part	Information not available		Class I, Type CF Applied Part
Enclosure protection	IPX0 Ordinary Equipment	Information not available		IPX0 Ordinary Equipment
120V single phase electric power requirements	16 A	4.5 A		12 A
Number of uses before docking	Limited by fluid capacity	Limited to 2 or 4 procedures (depending on model)		Limited by fluid capacity
User display	LCD screen	LCD screen	1. 1 <u>1.</u> 1	LCD screen
Docking Station				
User interaction to dock	Push rover into docker	Push Rover adjacent to Docker and Insert docker's gas-pump-style nozzle into rover		Push rover into docker
Waste/water connection to rover	Dry-break hydraulic couplings	Information not available		Dry-break hydraulic couplings
Rover-docker coupling size	.875" body diameter	.625" OD	, a	1.325" body diameter
Rover-docker coupling orientation	Horizontal	Approximately 25° from horizontal		Vertical
Water inlet control	Solenoid valve	Solenoid valve		Solenoid valve
Backflow prevention valve	Internal	External	Associated in the second secon	Internal
Weight	90 lbs	100 lbs	ę c	95 lbs
Waste/water connection to facility	Quick disconnect fittings	Information not available		Quick disconnect fittings

120V single phase electric power requirements	3 A	15 A		3 A
Rover-Docker Communication	Infrared	Electrical contacts	in super	Infrared
Offloads waste to sanitary sewer	Yes	Yes		Yes
Rinses canister with facility water	Yes	Yes		Yes
Canister cleaning method	Sprinkler	Sprinkler	4)	Sprinkler
Canister cleaning detergent	Neptune docking detergent (0700-001- 026)	Ultra Enzyme (UL-EZ200) and Bleach	1	Neptune docking detergent (0700-001- 026)
Electromagnet for holding rover to docker	Yes	No	1	Yes
Docker dimensions	25" x 20" x 22"	20" × 16" × 28"	6,	23" x 23" x 16"
Docker supports	Casters with adjustable extensions	Information not available		Fixed rubber pads
Vacuum System				
Vacuum control range	254 - 483 mm-Hg	14 - 700 mm-Hg		50 - 480 mm-Hg
Suction filtration efficiency	НЕРА	НЕРА		НЕРА
Vacuum limit adjustable	sak	Yes		Yes
Simultaneous levels of suction	1	2		2
Optional wall suction ports	Yes	Yes		Yes
Canister vacuum indicator	Analog gauge (mm-Hg, in-Hg)	Digital display (mm-Hg)		Digital display (mm-Hg)

Canister vacuum level regulation	Mechanical regulator	Electronic regulator		Electronic regulator
Collection Canisters				
Rover canister capacity	20 L	33 L or 52 L (depending on model)		24 L
Canister graduation label	Yes	Yes	gr [†]	Yes
Electronic canister overfill protection	Yes	Yes		Yes
Mechanical canister overfill protection	Float-style shut-off valve in rover	Hydrophobic filter located in disposable canister lid.		Float-style shut-off valve in rover
Volume display accuracy	± 175 mL	± 150 mL	.	± 150 mL , ± 50 mL (20 L canister, 4 L canister)
Volume display resolution	50 mL	10 mL		50 ml, 20 mL (20 L canister, 4 L canister)
Lighted canister contents	No	Yes		ON
Smoke Evacuator				
Filtration efficiency	НЕРА		ULPA	ULPA
Maximum flow rate	33 CFM		20 CFM	24 CFM
Minimum flow rate	0 CFM		3 CFM	21 CFM
Maximum Suction Range (100% power)	61 mm-Hg		99 mm-Hg	67 mm-Hg
Minimum suction range (20% power)	0 mm-Hg		12 mm-Hg	34 mm-Hg
Pre-filter	Single-use disposable		Single-use disposable	Multi-use disposable
Filter life indicator	Yes		Yes	Yes
Variable speed settings	Infinite (continuous rotary dial)		5	6

Automatic activation # of port sizes Disposable tubing sizes Disposable cautery pencil attachment	Yes			
# of port sizes Disposable tubing sizes Disposable cautery pencil attachment			Yes	Yes
Disposable tubing sizes Disposable cautery pencil attachment	1	,	1	3
Disposable cautery pencil attachment	1/8"		3/8", 7/8"	3/8", 7/8"
	Yes		Yes	Yes
Tubing/attachment sterility	EO	, SH	Information not available	EO
Tubing/attachment ISC biocompatibility	ISO 10993-1	4 k	ISO 10993-1	ISO 10993-1
Manifold				
Insertion direction	Vertical	45 degree		Horizontal
Port size (outer diameter)	.375"	2x .320" and 1x .375"		.375"
Use restrictions Single	Single patient use	Single patient use		Single patient use
Suction port quantity	1-port or 4-port	3-port	aks	1-port or 4-port
Pathology specimen collector	Yes	Yes		Yes
Weight (size)	4.7 oz	3.1 oz	ir.	1.6 oz
Sterility	Non-sterile	Non-sterile	# · · · · · · · · · · · · · · · · · · ·	Non-sterile
IV Pole				
Powered actuation	Yes	Yes		Yes
Actuation method Electric	Electric motor-driven	Information not available	,	Electric motor-driven
# of hooks	2	2		4

Travel	29 in	Information not available		32 in
Maximum height from floor	89 in	Information not available		102 in
Environmental Conditi	litions			
Operation Temp	10 - 40°C	10 - 40°C	Information not available	10 - 40°C
Operation Humidity	30 - 75%	30 - 75%	Information not available	30 - 75%
Operation Barometric Pressure	700 - 1060 hPa	700 - 1060 hPa	Information not available	700 - 1060 hPa
Storage / Transportation Temp	-20 - 40°C	-20 - 40°C	Information not available	-20 - 40°C
Storage / Transportation Humidity	10 - 75%	10 - 75%	Information not available	10 - 75%
Storage / Transportation Barometric Pressure	500 - 1060 hPa	500 -1060 hPa	Information not available	500 - 1060 hPa



Food and Drug Administration 10903 New Hampshire Avenue Document Control Center – WO66-G609 Silver Spring, MD 20993-0002

December 20, 2013

Stryker Corporation
Michelle Jump, RAC, M.S.
Regulatory Affairs Associate Analyst
4100 E. Milham Ave,
KALAMAZOO MI 49001

Re: K132671

Trade/Device Name: Neptune 2 Waste Management System

Regulation Number: 21 CFR 872.4780

Regulation Name: Apparatus, suction, ward use, portable, ac-powered

Regulatory Class: II Product Code: JCX, FYD Dated: November 14, 2013 Received: November 15, 2013

Dear Ms. Jump:

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. 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); good manufacturing practice requirements as set 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.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm.

Sincerely yours,

Tejashri Purohit-Sheth, M.D.
Clinical Deputy Olrector
DAGRID

Erin I. Keith, M.S.
Acting Director
Division of Anesthesiology, General Hospital,
Respiratory, Infection Control and
Dental Devices
Office of Device Evaluation
Center for Devices and
Radiological Health

Enclosure

510(K) Number (if known): <u> </u>	2671	
Device Name: Stryker® Neptune 2		
Indications for Use		
The Neptune 2 Waste Management Spathology, surgical centers, and doct as well as collect smoke generated fr	or's offices to collect a	and dispose of surgical fluid waste
	•	
		·
Prescription UseX	and/or	Over-The-Counter Use
(Part 21 CFR 801 Subpart D)		(21 CFR 801 Subpart C)
(PLEASE DO NOT WRITE BELC	W THIS LINE-CONTI NEEDED)	NUE ON ANOTHER PAGE IF
Concurrence of CDI	RH, Office of Device E	Evaluation (ODE)

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