

DEC 06 2002

K023577

## 510(k) SUMMARY

Submitted For: **YTY INDUSTRY (MANJUNG) SDN BHD**

Submitted By: **TUCKER & ASSOCIATES**  
Official Correspondent for YTY INDUSTRY  
(MANJUNG) SDN BHD  
**JANNA P. TUCKER**, President-CEO  
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Date of Submission: 21 October 2002

Device Name: **Powder Free, Natural and/or Colored Latex Exam  
Gloves, with Protein labeling (<50ug/g) and Polycoating  
Class I Device, 80LYY**

Proprietary Name: (Multiple Private Labels)

Labels/Labeling: This device will be marketed to healthcare professionals at  
Dentist and Doctor Offices, Laboratories, Clinics and  
Hospitals through its distributors for the intended use.

Intended Use: A patient examination glove is a disposable device intended  
for medical purposes that is worn on the examiner's hand  
or finger to prevent contamination between patient and  
examiner.

Substantial Equivalence: Both in its intended use and/or physical  
characteristics, this device is equivalent to devices  
currently marketed by U.S. companies. It is **Substantially  
Equivalent** to the devices manufactured by Supergrade  
Healthcare Products SDN BHD, except for color, K014134,  
and by Shield Gloves Manufacturer (M), except for scent,  
K000156.

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**Summary of Performance Data:**

Performance data of gloves based on ASTM D3578-01<sup>A62</sup> and FDA 1000ML watertight test.

<u>TEST</u>	ASTM D3578-01A <sup>62</sup>	YTY INDUSTRY POWDER FREE LATEX EXAM. GLOVES
1. Watertight (1000ml)	Multiple Normal GI AQL = 2.5	Pass GI AQL = 2.5
2. Length (mm) Size XS S M L XL	Min 220 Min 220 Min 230 Min 230 -	240 mm minimum for all sizes
3. Palm width (mm) Size XS S M L XL	70 ± 10 80 ± 10 95 ± 10 111 ± 10 -	73 – 78 83 – 88 93 – 98 103 – 107
4. Thickness (mm) (Single Layer)  Finger Palm	Min 0.08 Min 0.08	Min 0.10 Min 0.10
5. Physical Properties  Before Aging Tensile Strength (MPa) Ultimate Elongation (%) Stress at 500% Elongation  After Aging Tensile Strength (MPa) Ultimate Elongation (%)	Min 18 Min 650 Max 5.5  Min 14 Min 500	23 – 27 820 – 900 2.9-3.8  22 – 26 780 – 860
6. Powder Content	Max 2.0mg/glove	Below 2 mg/glove
7. Protein Content	Max 50 microgram/gram	Below 50 microgram/gram

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Test Results (Means  
and/or Successful  
Results:

This device has met or exceeded the following  
standards and/or tests:

ASTM D 5712-99  
ASTM D 3578-01<sup>ae2</sup>  
ASTM D 6124-01  
ASTM D 5151-99  
ISO 2859

Bio-Compatibility:  
Dermal Sensitization  
Primary Skin Irritation

Conclusion:

This device is substantially equivalent to the devices  
approved as K014134 and K000156.

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Food and Drug Administration  
9200 Corporate Boulevard  
Rockville MD 20850

YTY Industry (MANJUNG) Sdn Bhd  
C/O Ms. Janna P. Tucker  
Tucker & Associates  
198 Avenue De La D'Emerald  
Sparks, Nevada 89434-9550

Re: K023577

Trade/Device Name: Powder Free, Latex Examination Gloves, Poly Coated  
Natural and/or Green Color, with Protein Labeling Contains 50 Micrograms  
Or Less of Total Water Extractable Protein Per Gram

Regulation Number: 880.6250

Regulation Name: Patient Examination Gloves

Regulatory Class: I

Product Code: LYY

Dated: October 21, 2002

Received: October 23, 2002

Dear Ms. Tucker:

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.

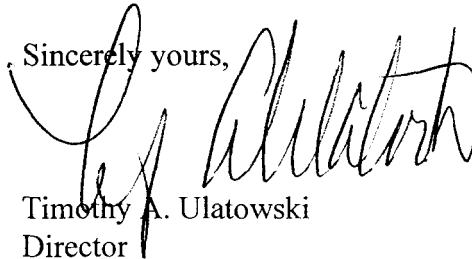
If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish 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); 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.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (301) 594-4618. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address <http://www.fda.gov/cdrh/dsma/dsmamain.html>

Sincerely yours,



Timothy A. Ulatowski  
Director

Division of Anesthesiology, General Hospital,  
Infection Control and Dental Devices  
Office of Device Evaluation  
Center for Devices and  
Radiological Health

Enclosure

**INDICATIONS FOR USE**

**APPLICANT:** **YTY INDUSTRY (MANJUNG)  
SDN. BHD.**

**510(k) NUMBER:**     K023577    

**DEVICE NAME:** **POWDER FREE LATEX EXAM  
GLOVES, POLY COATED, NATURAL  
AND/OR GREEN COLOR, WITH  
PROTEIN LABELING (<50ug/g)** *Contains 50mcgr  
or less of Total Water Extractable Protein per gram*

A patient examination glove is a disposable device intended for medical purposes that is worn on the examiner's hand or finger to prevent contamination between patient and examiner.

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED)

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Concurrence of CDRH, Office of Device Evaluation (ODE)

*Chin S. Lin*  
(Division Sign-Off)  
Division of Anesthesiology, General Hospital,  
Infection Control, Dental Devices

510(k) Number:     K023577    

Prescription Use \_\_\_\_\_  
(Per 21 CFR 801.109)

OR

Over-The-Counter Use \_\_\_\_\_

(Optional Format 1-2-96)

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