Page 1

UNITED STATES COURT OF APPEALS FOR THE FEDERAL CIRCUIT

VASCULAR SOLUTIONS, INC.,

Appeal No. 14-1185

Plaintiff-Appellee,

vs.

BOSTON SCIENTIFIC CORPORATION,

Defendant-Appellant.

TRANSCRIPT OF PROCEEDINGS

DATE TAKEN: APRIL 8, 2014

TIME: 10:00 A.M.

PLACE: UNITED STATES COURT OF APPEALS

717 MADISON PLACE, NORTHWEST

WASHINGTON, D.C. 20437

BEFORE: HONORABLE KIMBERLY A. MOORE

HONORABLE S. JAY PLAGER HONORABLE RAYMOND T. CHEN

This cause was electronically recorded at the date and time aforesaid. The following proceedings reflect the transcription produced by:

Trina B. Wellslager Registered Professional Reporter



April 8, 2014

Page 2	Page 4
1 APPEARANCES	1 THEREUPON, the following proceedings were
2 Counsel for Plaintiff-Appellee:	2 electronically recorded at 10:00 a.m.:
3 J. THOMAS VITT, ESQUIRE	3 JUDGE MOORE: 2014-1185, Vascular Solutions
Dorsey & Whitney, LLP 4 50 South 6th Street, Suite 1500	4 versus Boston Scientific.
Minneapolis, Minnesota 55402	5 Mr. Wolf, so the panel is somewhat confused
5	6 about how the invention works. And so not you
6 Counsel for Defendant-Appellant:	7 don't have to worry about your time. We want to
7 MATTHEW M. WOLF, ESQUIRE Arnold & Porter, LLP	8 spend a bit here at the beginning getting from both
8 555 Twelfth Street, NW	9 counsel the equivalent of a technical tutorial, what
Washington, D.C. 20004-1206	10 you would normally give to a district court judge or
9	a jury, because we're sort of struggling to
10	12 understand how the technology works. The patent
12	doesn't always correlate items in the figures with
13	the numbers in the spec and then how the accused
14	15 device actually works.
15	So rather than try to jump into your claim
16 17	17 construction arguments, would you mind stepping back
18	18 and giving us the equivalent of a technical
19	tutorial? Is that something that you're okay doing this morning?
20	20 this morning?21 MR. WOLF: Absolutely, Your Honor.
21 22	22 THE COURT: Okay.
23	23 JUDGE PLAGER: Let me sharpen it from my
24	24 personal viewpoint.
25	25 MR. WOLF: Yes, Your Honor.
Page 3	Page 5
1 INDEX	1 JUDGE PLAGER: Which is, if I'm a cardiologist.
2 WITNESS PAGE	2 MR. WOLF: Yes.
3 Argument by Mr. Wolf 4	3 JUDGE PLAGER: And I've got a patient in front
4 Argument by Mr. Vitt	4 of me who I'm about to use either one of these
5 Rebuttal Argument by Mr. Wolf	5 devices, what goes in first? What goes in second?
6	6 MR. WOLF: Right.
7	7 JUDGE PLAGER: What am I doing?
8 Certificate of Reporter Oath 79	8 JUDGE MOORE: What's the push rod push? We
9	9 can't figure out all these things.
10	MR. WOLF: Understood, Your Honor. So let's
11 12	 let's start with may it please the Court. Matthew Wolf for Boston Scientific.
13	12 Matthew Wolf for Boston Scientific. 13 Let's start with a guide catheter.
13	14 JUDGE PLAGER: No, let's start with a
15	15 guidewire. Does that come first?
16	16 MR. WOLF: It
17	JUDGE PLAGER: There's lot of stuff in here
18	18 about particularly in the patent about
19	guidewires. What is a guidewire and, I mean, is it
20	20 like a telephone cable? What is it?
21	21 MR. WOLF: A guidewire is literally a wire a
22	long wire with like a pigtail at the end that can be
23	23 various shapes. And if you imagine it's it's
24	relatively stiff, but also flexible, and it has a
25	25 little twist knob at the end.



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	Page 6		Page 8
1	JUDGE PLAGER: Does it go in first?	1	particularly
2	MR. WOLF: Usually. The guidewire and guide	2	JUDGE MOORE: Okay. Well, no, we'll hear from
3	catheter end up together in there. Usually the	3	you later. Go ahead.
4	guidewire goes in and the guide catheter goes over	4	MR. WOLF: There was no movie. So
5	it. There can be exceptions.	5	JUDGE PLAGER: Is there a cardiologist in the
6	JUDGE PLAGER: Now, when you say the guide	6	audience?
7	catheter goes over it, that was one of the	7	MR. WOLF: So the guidewire goes up and across
8	questions.	8	the lesion, the area of stenosis, where the blockage
9	All the way through you gentlemen in your	9	of the artery occurs.
10	briefs talk about the guide catheter goes over the	10	JUDGE PLAGER: Okay.
11	wire. Does that mean it's got little rollers that	11	MR. WOLF: So it's now a track. It's like a
12	it rolls on over the wire or if the wire's above it	12	railroad track you're going to run everything else
13	and goes under it then it goes under the what is	13	along.
14	the relationship between the guidewire and the guide	14	JUDGE PLAGER: But it's just a single wire.
15	catheter?	15	MR. WOLF: It's a wire.
16	MR. WOLF: So just imagine the guide catheter's	16	JUDGE PLAGER: Okay.
17	nothing more than a very small garden hose.	17	MR. WOLF: Think of a stiff human hair.
18	JUDGE PLAGER: Yeah, okay.	18	JUDGE PLAGER: Then what happens?
19	MR. WOLF: The guidewire is exactly what it	19	MR. WOLF: Then you take the guide catheter,
20	sounds like. It's a relatively stiff wire.	20	which is really just a garden hose. There can be
21	JUDGE PLAGER: All right.	21	bells and whistles. But it runs and it's got a
22	MR. WOLF: The cardiologist, usually through	22	diameter enough that you can run catheters through
23	the femoral artery, runs the guidewire through the	23	it. It runs along the guidewire up to the point
24	vasculature and this is	24	along
25	JUDGE MOORE: What's on the end of it,	25	JUDGE PLAGER: Along, you mean
	Page 7		Page 9
1	anything? On the end of the guidewire. Is it	1	MR. WOLF: Inside it. So imagine
2	literally just a wire or does it have some sort of	2	JUDGE PLAGER: Hold it. It runs in what
3	sinker or something on the end of it?	3	runs inside what?
4	MR. WOLF: On the distal end, the part away	4	MR. WOLF: The guidewire so this is the
5	from the doctor, that's where that pigtail goes.	5	guidewire, this is the guide catheter, pardon me.
6	JUDGE MOORE: Okay.	6	That's the relationship.
7	MR. WOLF: At the proximal end there's usually	7	JUDGE PLAGER: Oh, the guidewire is inserted
8	a little handle.	8	into the guide catheter as
9	JUDGE MOORE: You're not allowed to laugh when	9	JUDGE MOORE: No, the guidewire's already in
10	I ask stupid questions either.	10	the body. The catheter's inserted over it.
11	MR. WOLF: So the guidewire is run through the	11	
12	femoral artery, and this is very cool to watch on	12	JUDGE PLAGER: Oh, the catheter is inserted MR. WOLF: Exactly.
13	fluoroscopy, up through the vasculature and across		·
14	the lesion you're trying to target.	13	JUDGE PLAGER: is inserted in a way so the
15	JUDGE MOORE: Wasn't there a movie or a	14	guidewire ends up in the catheter.
		15	MR. WOLF: Right. So the guidewire is sticking
16	technical tutorial presented below that possibly we	16	outside the body, and it runs all the way through.
17	could have you give to us? Only if it was part of	17	They're very long.
18	the record below.	18	JUDGE PLAGER: I've got that much.
19	MR. WOLF: There were there were definitely	19	MR. WOLF: And it's across the lesion.
20	pictures.	20	JUDGE PLAGER: Okay.
21	JUDGE MOORE: You said it's cool to watch in a	21	MR. WOLF: So you now have this wire sticking
22	movie, so I was thinking maybe	22	out there
23	MR. WOLF: Counsel, do you recall a video?	23	JUDGE PLAGER: It would be easier to
24	MR. VITT: Your Honor, there was no movie.	24	MR. WOLF: Here's the guidewire right here.
25	Mr. Root's first declaration starting at A-200, and	25	JUDGE PLAGER: Okay.



	Page 10		Page 12
1	MR. WOLF: Out of the body. And you now take	1	MR. WOLF: That's exactly right, Your Honor.
2	the tube and put it over the end of the guidewire	2	So you have this guide catheter that's largely a
3	and string it along. So you now have the guidewire	3	consistent diameter and usually does the job, gets
4	inside the guide catheter.	4	to where you want to go. But sometimes you need to
5	JUDGE MOORE: Back over here, because we record	5	go farther.
6	this.	6	JUDGE PLAGER: To get into the artery.
7	MR. WOLF: I apologize, Your Honor.	7	MR. WOLF: To get to the lesion you need to get
8	JUDGE PLAGER: So you have the guidewire inside	8	to, to the blockage.
9	the guide catheter. This is the first time I've	9	JUDGE MOORE: Right.
10	understood that part.	10	MR. WOLF: And so in 1996 Boston Scientific
11	MR. WOLF: Yes.	11	filed the patent, the Adams patent, for what's
12	JUDGE PLAGER: Go ahead.	12	called the guide catheter extension. And really
13	MR. WOLF: Okay. So then the problem is in	13	what it is is, so a guide catheter's really long.
14	some circumstances, the guide catheter the	14	Imagine we chopped off the end of it, made the
15	diameter of the guide catheter is too big to get to	15	end small a little bit smaller but much more
16	where you want to go. So imagine a small artery, a	16	flexible tubing, and just stuck a long push rod on
17	larger guide catheter, and they butt up against each	17	it.
18	other. You want that guide catheter to stay in	18	JUDGE PLAGER: Now, wait. Hold it. Stuck a
19	place because subsequently you're going to be	19	long push rod on what?
20	putting, for example, a stent delivery system	20	MR. WOLF: On this so this is the garden
21	through it.	21	hose that is the guide catheter.
22	JUDGE MOORE: Is that the purpose of the	22	JUDGE PLAGER: Yeah.
23	tapered part then?	23	MR. WOLF: We're going to take another piece of
24	MR. WOLF: Yes; but it still can be too big.	24	slightly smaller garden hose, maybe ten inches, and
25	And that's where the products at issue in this case	25	we're going to have a long, maybe hundred centimeter
		23	
	Page 11		Page 13
1	come in.	1	push rod. So we're now
			=
2	JUDGE PLAGER: The coaxial, what they call an	2	JUDGE PLAGER: And this is to the bottom of
3	coaxial catheter.	3	JUDGE PLAGER: And this is to the bottom of this interior hose.
3 4	coaxial catheter. MR. WOLF: That's right.	3 4	JUDGE PLAGER: And this is to the bottom of this interior hose. MR. WOLF: Right. So we're going to now push
3 4 5	coaxial catheter. MR. WOLF: That's right. JUDGE PLAGER: Why is it called a coaxial	3 4 5	JUDGE PLAGER: And this is to the bottom of this interior hose. MR. WOLF: Right. So we're going to now push it along so the
3 4 5 6	coaxial catheter. MR. WOLF: That's right. JUDGE PLAGER: Why is it called a coaxial catheter?	3 4 5 6	JUDGE PLAGER: And this is to the bottom of this interior hose. MR. WOLF: Right. So we're going to now push it along so the JUDGE MOORE: Is this picture in the reply
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	Page 14		Page 16
1	figure.	1	inches are now beyond. It's like you've added an
2	JUDGE MOORE: Yeah.	2	extension to it.
3	MR. WOLF: But it's much, much longer.	3	JUDGE PLAGER: Where is the coaxial catheter at
4	JUDGE MOORE: I see.	4	this point?
5	MR. WOLF: So we're now going to push this blue	5	JUDGE MOORE: In the body.
6	inside the guide catheter all the way to the end and	6	JUDGE PLAGER: It's inside as well.
7	past the end.	7	MR. WOLF: Yes.
8	JUDGE MOORE: So in theory this catheter is a	8	JUDGE MOORE: Butted up to the artery but not
9	narrower diameter so it's going to slide inside the	9	being able to get through.
10	other catheter. But I still don't get, what is	10	MR. WOLF: Right.
11	pushing? Like, oh, is what are you what's the	11	JUDGE MOORE: So what goes inside this hole
12	push rod pushing?	12	then in your device? Like this is so this is a
13	MR. WOLF: It's pushing that last ten inches.	13	catheter, right?
14	So in order to get that so that ten inches, just	14	MR. WOLF: Right. And it's big enough.
15	imagine at the end of the day	15	JUDGE MOORE: What's going to go into it?
16	JUDGE MOORE: Okay. So here's a really stupid	16	MR. WOLF: Typically they're an angioplasty
17	question.	17	catheter or a stent delivery catheter or, frankly,
18	MR. WOLF: Yeah.	18	both.
19	JUDGE MOORE: So is the flexible tip the part	19	JUDGE MOORE: Okay. The thing you're going to
20	going in first and the push rod is what the doctor	20	leave in the body ultimately is going to be fed
21	is using to push the whole catheter in or is the	21	through this interior catheter all the way through
22	push rod going in first and the flexible tip is at	22	into the artery, and that's what's going to be left
23	the back end?	23	there ultimately.
24	MR. WOLF: The flexible tip is going first.	24	MR. WOLF: Exactly, the stent, or the balloon,
25	JUDGE MOORE: I get it.	25	whatever the case may be.
	Page 15		Page 17
1	MR. WOLF: So you're pushing that so imagine	1	JUDGE PLAGER: So basically we end up with
2	at the end of the day	2	three more or less tubes running up in there, the
3	JUDGE PLAGER: You're pushing it with the push	3	last one having the stent or whatever it is on the
4	rod.	4	end of it.
5	MR. WOLF: Yes.	5	MR. WOLF: Right.
6	JUDGE PLAGER: And then do you extract the push	6	JUDGE PLAGER: And all that's done through a
7	rod?	7	little piece of the body.
8	MR. WOLF: No, it stays. It's all one piece.	8	MR. WOLF: Yes. It's all done typically
9	It's all of a piece.	9	through the groin.
10	JUDGE MOORE: Well, it will ultimately be	10	JUDGE PLAGER: These are very small hoses.
11	extracting before the surgery is completed.	11	MR. WOLF: Exactly, Your Honor. Stents are
12	MR. WOLF: Right, right. Right, right, right,	12	a grain of rice gives you a rough idea of the size
13	right.	13	we're talking about.
14	JUDGE PLAGER: Not too many people walk around	14	JUDGE MOORE: I think we ought to get going
15	with push rods in them.	15	though on the argument now, if you don't mind.
16	MR. WOLF: Hopefully not.	16	And, don't worry, we'll give you extra time at
17	JUDGE PLAGER: The doctor pushes this ten-inch	17	the front end, if you want to devote it exclusively
18	extension all the way in to where he or she wants	18	to technology, especially if you disagree with
19	it, and leaves it in place, that is, in the guide	19	Mr. Wolf on anything he says.
20	catheter. Actually now it's in the coaxial	20	JUDGE CHEN: May I ask a follow-up question?
21	catheter, isn't it?	21	JUDGE MOORE: Yes, of course.
22	MR. WOLF: So imagine that one a typical	22	JUDGE CHEN: Thank you. A tapered inner
23	procedure might say five inches of the ten inches we	23	catheter, do you have a tapered inner catheter that
24	see in blue remain in the guide catheter or at the	24	works with your Guidezilla? The patent talks about
	far end of the guide catheter. The other five	25	a tapered inner catheter that goes inside of the
25			a apered miler cameter that goes histate of the



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