

1 UNITED STATES PATENT AND TRADEMARK OFFICE
2 BEFORE THE PATENT TRIAL AND APPEAL BOARD

3 MEDTRONIC, INC., AND MEDTRONIC
4 VASCULAR, INC.,

5 Petitioners,

6 vs.

7 TELEFLEX INNOVATIONS S.A.R.L.,

8 Patent Owner.

9 IPR2020-00126 (Patent 8,048,032 B2)

10 IPR2020-00127 (Patent 8,048,032 B2)

11 IPR2020-00128 (Patent RE45,380 E)

12 IPR2020-00129 (Patent RE45,380 E)

13 IPR2020-00130 (Patent RE45,380 E)

14 IPR2020-00132 (Patent RE45,760 E)

15 IPR2020-00134 (Patent RE45,760 E)

16 IPR2020-00135 (Patent RE45,776 E)

17 IPR2020-00136 (Patent RE45,776 E)

18 IPR2020-00137 (Patent RE47,379 E)

19 IPR2020-00138 (Patent RE47,379 E)

20 VIDEOTAPED DEPOSITION OF
21 DR. STEPHEN BRECKER

22 DATE: January 14, 2021

23 TIME: 5:06 a.m. (Central Standard Time)

24 PLACE: Veritext Virtual Videoconference

25 REPORTED BY: PAULA K. RICHTER, RMR, CRR, CRC

Veritext Legal Solutions

www.veritext.com

888-391-3376

Page 2	<p>1 APPEARANCES</p> <p>2 (All parties appeared via videoconference)</p> <p>3 ON BEHALF OF THE PETITIONERS:</p> <p>4 Ms. Sharon Roberg-Perez, Esq.</p> <p>5 Mr. Cyrus A. Morton, Esq.</p> <p>6 Mr. Christopher A. Pinahs, Esq.</p> <p>7 ROBINS KAPLAN, LLP</p> <p>8 800 LaSalle Avenue, Suite 2800</p> <p>9 Minneapolis, Minnesota 55401</p> <p>10 (612) 349-8500</p> <p>11 sroberg-perez@robinskaplan.com</p> <p>12 cmorton@robinskaplan.com</p> <p>13 cpinahs@robinskaplan.com</p> <p>14</p> <p>15 ON BEHALF OF THE PATENT OWNER:</p> <p>16 Mr. J. Derek Vandenburg, Esq.</p> <p>17 Mr. Peter M. Kohlhepp, Esq.</p> <p>18 CARLSON, CASPERS, VANDENBURGH & LINDQUIST</p> <p>19 225 South Sixth Street, Suite 4200</p> <p>20 Minneapolis, Minnesota 55402</p> <p>21 (612) 436-9600</p> <p>22 dvandenburg@carlsoncaspers.com</p> <p>23 pkohlhepp@carlsoncaspers.com</p> <p>24</p> <p>25 (APPEARANCES continued on next page)</p>	Page 4
Page 3	<p>1 APPEARANCES (Continued)</p> <p>2 ON BEHALF OF PATENT OWNER:</p> <p>3 Mr. Kenneth E. Levitt, Esq.</p> <p>4 THE DORSEY FIRM</p> <p>5 50 South Sixth Street, Suite 1500</p> <p>6 Minneapolis, Minnesota 55402</p> <p>7 (612) 340-2600</p> <p>8 levitt.kenneth@dorsey.com</p> <p>9</p> <p>10</p> <p>11 ALSO PRESENT BY VIDEOCONFERENCE:</p> <p>12 Phil Glauberson - Videographer</p> <p>13 Greg Smock - Teleflex 05:05:52</p> <p>14 05:06:09</p> <p>15</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p> <p>25</p>	Page 5
Page 2	<p>1 INDEX</p> <p>2 WITNESS: DR. STEPHEN BRECKER PAGE:</p> <p>3 EXAMINATION BY MR. VANDENBURGH..... 8</p> <p>4 EXAMINATION BY MS. ROBERG-PEREZ..... 178</p> <p>5 FURTHER EXAMINATION BY MR. VANDENBURGH..... 181</p> <p>6</p> <p>7 EXHIBITS MARKED: PAGE:</p> <p>8 EXHIBIT 2222 Teleflex Pronto V3 Extraction</p> <p>9 Catheter Brochure..... 84</p> <p>10 EXHIBIT 2223 Catheter Figures..... 43</p> <p>11 EXHIBIT 2224 U.S. Patent 7,273,486..... 45</p> <p>12 EXHIBIT 2225 Page 57 from Exhibit 1807,</p> <p>13 Jones Declaration..... 146</p> <p>14 EXHIBIT 2226 Modified Kontos Devices..... 160</p> <p>15 EXHIBIT 2227 Article - Advances in</p> <p>16 Procedural Techniques -</p> <p>17 Antegrade..... 174</p> <p>18</p> <p>19 (Original exhibits attached to original transcript;</p> <p>20 copies provided to counsel.)</p> <p>21</p> <p>22 EXHIBITS PREVIOUSLY MARKED AND REFERRED TO:</p> <p>23 EXHIBIT 1007 U.S. Patent 7,736,355..... 59</p> <p>24 EXHIBIT 1008 U.S. Patent 7,604,612..... 65</p> <p>25 (EXHIBITS continued on next page)</p>	Page 4
Page 3	<p>1 (EXHIBITS continued)</p> <p>2 EXHIBIT 1009 U.S. Patent 5,439,445..... 59</p> <p>3 EXHIBIT 1115 6/15/18 Deposition Transcript</p> <p>4 of Howard Root..... 120</p> <p>5 EXHIBIT 1806 Supplemental Declaration of</p> <p>6 Dr. Stephen Brecker..... 8</p> <p>7 EXHIBIT 1840 Article - Coaxial Technique for</p> <p>8 Catheterization of the Coronary</p> <p>9 Arteries With a Very Dilated</p> <p>10 Ascending Aorta by Gejjer..... 34</p> <p>11 EXHIBIT 1841 Case Report - Coaxial Double</p> <p>12 Catheter Followed by Buddy Wire</p> <p>13 Placement by Furuichi..... 34</p> <p>14</p> <p>15</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p> <p>25</p>	Page 5

2 (Pages 2 - 5)

Veritext Legal Solutions

www.veritext.com

888-391-3376



Find authenticated court documents without watermarks at docketalarm.com.

Page 6	Page 8
<p>1 PROCEEDINGS</p> <p>2 THE VIDEOGRAPHER: Good morning. We 05:06:09</p> <p>3 are going on the record at 5:06 a.m. Central Time, 05:06:10</p> <p>4 January 14, 2021. 05:06:18</p> <p>5 Please note that microphones are 05:06:20</p> <p>6 sensitive and may pick up whispering and private 05:06:23</p> <p>7 conversations. Please mute your microphone 05:06:25</p> <p>8 whenever possible. Audio and video recording will 05:06:29</p> <p>9 continue to take place unless all parties agree to 05:06:32</p> <p>10 go off the record. 05:06:35</p> <p>11 This is Media Unit 1 of the 05:06:38</p> <p>12 video-recorded deposition of Dr. Stephen Brecker, 05:06:41</p> <p>13 in the matter of Medtronic, Inc., et al. versus 05:06:44</p> <p>14 Teleflex Innovations, S.A.R.L., filed in the U.S. 05:06:52</p> <p>15 Patent and Trademark Office, Numbers 05:07:05</p> <p>16 IPR2020-00126, IPR2020-00129 -- 128, 05:07:08</p> <p>17 IPR2020-00129, IPR2020-00132, IPR2020-00134, 05:07:16</p> <p>18 IPR2020-00135, IPR2020-00137. 05:07:25</p> <p>19 This deposition is being held 05:07:32</p> <p>20 remotely. 05:07:34</p> <p>21 My name is Phil Glauberson from the 05:07:35</p> <p>22 firm Veritext, and I am the videographer. The 05:07:37</p> <p>23 court reporter is Paula Richter from Veritext. 05:07:40</p> <p>24 I am not authorized to administer an 05:07:43</p> <p>25 oath. I am not related to any party in this 05:07:46</p>	<p>1 swear the witness, please. 05:08:57</p> <p>2 DR. STEPHEN BRECKER, 05:09:12</p> <p>3 duly sworn, was examined and testified as follows: 05:09:12</p> <p>4 EXAMINATION 05:09:12</p> <p>5 BY MR. VANDENBURGH: 05:09:12</p> <p>6 Q. All right. Good morning again, Dr. Brecker. 05:09:13</p> <p>7 A. Good morning. 05:09:16</p> <p>8 Q. I'm going to skip the usual intro. This is 05:09:17</p> <p>9 the third time that we've had one of these 05:09:19</p> <p>10 depositions. I guess the only thing I will ask 05:09:23</p> <p>11 is, is there anything that would prevent you from 05:09:27</p> <p>12 testifying truly or correctly today? 05:09:30</p> <p>13 A. There is not. 05:09:35</p> <p>14 Q. Okay. Can you -- I'm just going to just walk 05:09:37</p> <p>15 through your latest declaration today, so if you 05:09:40</p> <p>16 could just go ahead and pull that up and have that 05:09:44</p> <p>17 in front of you, the binder that we sent you, 05:09:47</p> <p>18 Exhibit 1806, for the record. 05:09:50</p> <p>19 A. I'm just going to make it a bit louder. 05:09:59</p> <p>20 Okay. 05:10:02</p> <p>21 Q. All right. And let's start near the 05:10:03</p> <p>22 beginning where you are talking on, oh, roughly 05:10:06</p> <p>23 paragraphs 7 through 13 regarding the term 05:10:13</p> <p>24 "interventional cardiology devices," and in 05:10:18</p> <p>25 particular, the Venn diagram that you have in 05:10:24</p>
Page 7	Page 9
<p>1 action, nor am I financially interested in the 05:07:49</p> <p>2 outcome. 05:07:51</p> <p>3 Counsel will please now state their 05:07:52</p> <p>4 appearances and affiliations for the record. If 05:07:55</p> <p>5 there are any objections to proceeding or to the 05:07:58</p> <p>6 court reporter administering the oath virtually, 05:08:00</p> <p>7 please state them at the time of your appearance, 05:08:03</p> <p>8 beginning with the noticing attorney. 05:08:06</p> <p>9 MR. VANDENBURGH: Yes. On behalf of 05:08:07</p> <p>10 the Patent Owner, Teleflex, this is Derek 05:08:09</p> <p>11 Vandenburg of the Carlson Caspers firm. Also 05:08:12</p> <p>12 with us today is Peter Kohlhepp of our firm, Ken 05:08:15</p> <p>13 Levitt of the Dorsey firm, and Greg Smock of 05:08:22</p> <p>14 Teleflex. 05:08:25</p> <p>15 MS. ROBERG-PEREZ: On behalf of 05:08:26</p> <p>16 Petitioner, Medtronic, Sharon Roberg-Perez of 05:08:27</p> <p>17 Robins Kaplan. With me are my colleagues, Chris 05:08:31</p> <p>18 Pinahs and Cy Morton. 05:08:35</p> <p>19 MR. VANDENBURGH: And before we 05:08:39</p> <p>20 swear the witness, I'll just state for the record, 05:08:40</p> <p>21 I appreciate the list of cases, Phil, but there 05:08:41</p> <p>22 are actually 11 total all together. I don't think 05:08:44</p> <p>23 they were all on your list, but I think counsel 05:08:46</p> <p>24 all understand which IPRs that are at issue here. 05:08:48</p> <p>25 So, Paula, can you go ahead and 05:08:55</p>	<p>1 paragraph 12. 05:10:28</p> <p>2 Is it your opinion that everything 05:10:32</p> <p>3 that is used during an interventional cardiology 05:10:35</p> <p>4 procedure is an interventional cardiology device 05:10:40</p> <p>5 as that term is used in the Teleflex patents? 05:10:44</p> <p>6 A. Well, just to break that up, first of all, 05:10:53</p> <p>7 everything used -- not everything used in an 05:10:59</p> <p>8 interventional cardiology procedure would 05:11:03</p> <p>9 necessarily be called an interventional cardiology 05:11:07</p> <p>10 device, just thinking about it in the broadest 05:11:11</p> <p>11 sense. 05:11:13</p> <p>12 When you say how is an 05:11:17</p> <p>13 interventional cardiology device defined in the 05:11:20</p> <p>14 Teleflex patent, that's a separate issue; and 05:11:22</p> <p>15 there are various interpretations on that, as we 05:11:29</p> <p>16 have discussed. 05:11:32</p> <p>17 Q. So it sounds like you would agree that the 05:11:35</p> <p>18 term as it's used in the patents is not the same 05:11:42</p> <p>19 as it may be used outside the context of the 05:11:48</p> <p>20 patents? 05:11:51</p> <p>21 MS. ROBERG-PEREZ: Object to form. 05:11:52</p> <p>22 THE WITNESS: It may or may not be. 05:11:56</p> <p>23 BY MR. VANDENBURGH: 05:12:00</p> <p>24 Q. Okay. So there are certainly instances where 05:12:00</p> <p>25 what's considered to be an interventional 05:12:08</p>

3 (Pages 6 - 9)

Veritext Legal Solutions

www.veritext.com

888-391-3376



Find authenticated court documents without watermarks at docketalarm.com.

Page 10	Page 12
1 cardiology device outside the scope of the patents 05:12:10	1 cardiology device. It just says that the segment 05:15:48
2 is broader than how you would use that term within 05:12:12	2 defining a partially cylindrical opening is 05:15:53
3 the patent itself? 05:12:17	3 configured to receive one or more interventional 05:15:58
4 A. That's correct. There are interventional 05:12:20	4 cardiology devices. 05:16:01
5 cardiology devices which may not fulfill the 05:12:25	5 Now, it's saying it's configured to 05:16:06
6 criteria of an interventional cardiology device as 05:12:33	6 receive devices. That doesn't -- if you're saying 05:16:09
7 one might interpret it in the patent. It's not 05:12:35	7 could -- let me -- could any device be considered 05:16:15
8 defined in the patent. 05:12:40	8 an interventional cardiology device, well, it 05:16:20
9 Q. I'm sorry. So it is -- you do consider it to 05:12:42	9 could still be considered an interventional 05:16:23
10 be defined in the patent? 05:12:46	10 cardiology device without it necessarily 05:16:26
11 MS. ROBERG-PEREZ: Object to form. 05:12:48	11 fulfilling the ability for this to be configured 05:16:27
12 THE WITNESS: No. I said it's not 05:12:49	12 to it, to accept it. This doesn't define an 05:16:33
13 defined in the patent. 05:12:50	13 interventional cardiology device. 05:16:37
14 BY MR. VANDENBURGH: 05:12:53	14 Q. I agree. I'm not trying to at this point -- 05:16:39
15 Q. I misheard. 05:12:54	15 A. Yeah. 05:16:43
16 So as it's used in the patent, would 05:12:57	16 Q. -- you know, get to a definition. I just 05:16:43
17 you consider a guide catheter to be an 05:13:01	17 want to understand when -- that term has a 05:16:46
18 interventional cardiology device? 05:13:04	18 meaning, correct? We need to give words and 05:16:52
19 A. When you say "as it's used in the patent," 05:13:18	19 claims meaning. You understand that? 05:16:55
20 you would need to take me to a specific example. 05:13:20	20 A. I do. 05:16:57
21 Q. Okay. 05:13:24	21 Q. Okay. So as those words are used in that 05:16:58
22 A. There are examples in the patent where it 05:13:26	22 claim, interventional cardiology device, what does 05:17:01
23 says interventional cardiology device, dot, dot, 05:13:29	23 it mean? 05:17:05
24 dot, and then it gives a specification to it. I 05:13:32	24 A. Well, this -- what it means is a device that 05:17:06
25 mean, a guide catheter is an interventional 05:13:37	25 can go through a guide extension catheter. 05:17:09
Page 11	Page 13
1 cardiology device in general terms. 05:13:42	1 Q. Okay. So does that mean that anything that 05:17:13
2 Q. Okay. So, for example, let's -- we can go 05:13:44	2 can go through a guide extension catheter is an 05:17:16
3 ahead and pull up a specific patent. Do you have 05:13:50	3 interventional cardiology device within the scope 05:17:20
4 a binder with the patents in them? 05:13:53	4 of that claim, in your opinion? 05:17:22
5 A. I do. That would be -- I've got binder 2 05:13:56	5 A. I'm not -- I'm not quite sure I understand. 05:17:29
6 from the original deposition, which has the 05:14:04	6 Anything that could go through an -- a guide 05:17:34
7 patents. 05:14:10	7 extension catheter -- you're asking me in a 05:17:40
8 Q. Perfect. So let's use as an example the '776 05:14:11	8 different direction. This is simply saying 05:17:46
9 Patent, RE 45776. 05:14:16	9 that -- this is giving characteristics of a guide 05:17:50
10 A. Have you got that as a -- yeah, I have that. 05:14:22	10 extension catheter and saying it's configured to 05:17:52
11 That's 135. 1001-135 as I've got it marked. 05:14:26	11 accept one or more interventional cardiology 05:17:56
12 Q. I believe it's Exhibit 1001 to the 035 IPR. 05:14:33	12 devices, but that doesn't define what an 05:17:57
13 A. Yeah, I have that. 05:14:42	13 interventional cardiology device -- nor does it 05:18:03
14 Q. Okay. And if we go to Claim 25 of the '776 05:14:46	14 say that anything, absolutely anything that goes 05:18:05
15 Patent. 05:15:04	15 through would be a device. So I'm struggling to 05:18:10
16 A. I have it. 05:15:04	16 think of something that you would put through a 05:18:14
17 Q. I believe you will see two-thirds of the way 05:15:04	17 guide extension catheter that wouldn't be a 05:18:16
18 down the longer paragraph that starts, "A segment 05:15:08	18 device. I mean -- 05:18:19
19 defining ..." It says, it needs to be configured 05:15:11	19 Q. Wouldn't it be an -- just to clarify, 05:18:21
20 to receive one or more interventional cardiology 05:15:14	20 wouldn't it be an interventional cardiology 05:18:24
21 devices therethrough." 05:15:17	21 device? 05:18:27
22 So in the context that it's used 05:15:21	22 A. Yes. I'm struggling to think of an example 05:18:29
23 there, would you consider a guide catheter to be 05:15:24	23 of something that a cardiologist would put through 05:18:33
24 an interventional cardiology device? 05:15:27	24 a guide extension catheter that wouldn't be an 05:18:38
25 A. It doesn't define an interventional 05:15:45	25 interventional cardiology device. I can't 05:18:42

4 (Pages 10 - 13)

Veritext Legal Solutions

www.veritext.com

888-391-3376



Find authenticated court documents without watermarks at docketalarm.com.

Page 14	Page 16
1 think -- I mean, I-- you know, you could inject 05:18:47	1 A. Yes. I mean, there are some syringes that 05:22:06
2 drugs, for example. But, I mean, in terms of a 05:18:52	2 are very specifically adapted and have 05:22:09
3 piece of kit, if you were advancing a piece of 05:18:57	3 characteristics to them, and there are some 05:22:10
4 equipment through a guide extension catheter, it 05:19:01	4 devices that are used for injection, like an 05:22:13
5 would be an interventional cardiology device. 05:19:06	5 automated injector. And I think many 05:22:16
6 Q. Okay. So you can't think of anything that a 05:19:09	6 cardiologists would consider those interventional 05:22:19
7 cardiologist would put through a guide extension 05:19:15	7 cardiology devices in the broadest general sense. 05:22:23
8 catheter that would not be an interventional 05:19:22	8 But they wouldn't -- they wouldn't go into the 05:22:29
9 cardiology device? 05:19:24	9 guide catheter. 05:22:32
10 A. I'm struggling to think of an example. 05:19:27	10 Q. Okay. Does -- let's see. Does any part of 05:22:33
11 Q. Okay. Now, is it your opinion -- because you 05:19:30	11 the syringe go into the proximal end of the guide 05:22:43
12 used the word "through," is it your opinion that 05:19:35	12 catheter? 05:22:47
13 to be an interventional cardiology device, it has 05:19:39	13 A. Well, the syringe typically does not. There 05:22:50
14 to come out the other side of the guide extension 05:19:42	14 is -- the syringe is attached to a manifold which 05:22:55
15 catheter? 05:19:45	15 has three-way taps on it and terminates in a flush 05:22:59
16 MS. ROBERG-PEREZ: Object to form. 05:19:45	16 port, that you then -- you screw onto the hub of 05:23:07
17 THE WITNESS: Again, if you're tying 05:19:57	17 the guide catheter -- well, you screw onto the hub 05:23:12
18 me to the language of the claim, again, this is 05:19:59	18 of the O-ring hemostatic valve that screws onto 05:23:16
19 defining what the guide extension catheter is 05:20:04	19 the guide catheter. 05:23:20
20 doing, not what the interventional cardiology 05:20:09	20 Q. Okay. All right. 05:23:21
21 device is doing. 05:20:11	21 A. You don't inject -- you don't attach the 05:23:22
22 For example, if you were advancing a 05:20:15	22 syringe directly to a guide catheter heart. 05:23:25
23 stent through the extension catheter but you 05:20:18	23 Q. Right. Right. The hemostatic valve, does it 05:23:29
24 couldn't actually, for one reason or another, exit 05:20:26	24 actually engage within the proximal end of the 05:23:31
25 the extension catheter, that doesn't mean that the 05:20:28	25 guide catheter? 05:23:35
Page 15	Page 17
1 stent is not an interventional cardiology device. 05:20:34	1 A. Well, the guide catheter will terminate in a 05:23:37
2 BY MR. VANDENBURGH: 05:20:40	2 hub. So the material of the -- the catheter will 05:23:41
3 Q. Now, an interventional cardiology device can 05:20:46	3 terminate at its proximal end in a hub made of 05:23:51
4 also include things that just go into the guide 05:20:50	4 plastic and that's the bit that screws onto the 05:23:59
5 catheter, right? 05:20:52	5 manifold. You -- where the hub is considered part 05:24:01
6 MS. ROBERG-PEREZ: Object to form. 05:20:54	6 of the guide catheter. I suppose it is, but it's 05:24:04
7 THE WITNESS: It's possible, but do 05:21:03	7 a matter of debate, I suppose. I haven't thought 05:24:07
8 you have an example in mind? 05:21:07	8 about it. 05:24:11
9 BY MR. VANDENBURGH: 05:21:08	9 Q. So have you applied a definition of 05:24:12
10 Q. Well, I mean, a stent catheter is an 05:21:08	10 interventional cardiology device as you analyzed, 05:24:18
11 interventional cardiology device regardless of 05:21:11	11 for example, Claim 25 of the '776 Patent? 05:24:22
12 whether it's put in a guide catheter or a guide 05:21:13	12 A. So looking at Claim 25 -- and I'd just like 05:24:31
13 extension catheter, right? 05:21:16	13 to -- although I've read it several times, I just 05:24:34
14 A. That's correct, yes. And that's the point I 05:21:17	14 want to read it through myself again because I 05:24:36
15 was making. 05:21:20	15 want to be -- I want to give you an accurate 05:24:39
16 Q. Yeah, yeah. Now, would a syringe for 05:21:21	16 answer. (Reviews document.) 05:24:41
17 injecting contrast be considered to be an 05:21:28	17 The claim is describing 05:25:01
18 interventional cardiology device? 05:21:32	18 characteristics of the guide extension catheter, 05:25:03
19 A. Well, now, stepping back out of the context 05:21:38	19 and it's saying it's configured to receive 05:25:05
20 of the claims, if I went upstairs to the cath labs 05:21:42	20 interventional cardiology devices. So what the 05:25:08
21 and asked my colleague, is that syringe that 05:21:48	21 cardiologist is thinking reading that is, of all 05:25:15
22 you're using to inject an interventional 05:21:51	22 the interventional cardiology devices that exist, 05:25:19
23 cardiology device, you'd get a range of answers. 05:21:53	23 the ones that this is referring to are those that 05:25:20
24 Q. Okay. So the answer is, if it's outside the 05:21:59	24 would be passed through or those that would be 05:25:23
25 scope of the patent, it depends on who you ask. 05:22:01	25 passed into, because it's configured to receive, 05:25:26

5 (Pages 14 - 17)

Veritext Legal Solutions

www.veritext.com

888-391-3376



Find authenticated court documents without watermarks at docketalarm.com.

Explore Litigation Insights

Docket Alarm provides insights to develop a more informed litigation strategy and the peace of mind of knowing you're on top of things.

Real-Time Litigation Alerts



Keep your litigation team up-to-date with **real-time alerts** and advanced team management tools built for the enterprise, all while greatly reducing PACER spend.

Our comprehensive service means we can handle Federal, State, and Administrative courts across the country.

Advanced Docket Research



With over 230 million records, Docket Alarm's cloud-native docket research platform finds what other services can't. Coverage includes Federal, State, plus PTAB, TTAB, ITC and NLRB decisions, all in one place.

Identify arguments that have been successful in the past with full text, pinpoint searching. Link to case law cited within any court document via Fastcase.

Analytics At Your Fingertips



Learn what happened the last time a particular judge, opposing counsel or company faced cases similar to yours.

Advanced out-of-the-box PTAB and TTAB analytics are always at your fingertips.

API

Docket Alarm offers a powerful API (application programming interface) to developers that want to integrate case filings into their apps.

LAW FIRMS

Build custom dashboards for your attorneys and clients with live data direct from the court.

Automate many repetitive legal tasks like conflict checks, document management, and marketing.

FINANCIAL INSTITUTIONS

Litigation and bankruptcy checks for companies and debtors.

E-DISCOVERY AND LEGAL VENDORS

Sync your system to PACER to automate legal marketing.