

**Appendix A-10**  
**Invalidity of U.S. 9,125,739 in View of Paniagua**

The asserted claims of the '739 patent are anticipated or obvious over United States Patent Publication No. 2004/0111111 (‐Paniagua‐), alone or in combination with the knowledge of a person of ordinary skill in the art (‐POSITA‐) and with one or more other references disclosed in Medtronic's Invalidity Contentions, including other charted references.

Paniagua was filed on July 10, 2004, published on May 26, 2005, and is prior art under 35 U.S.C. § 102(a), (b) and (c). The '739 patent is not entitled to any priority date earlier than April 15, 2014.

The citations provided below are exemplary and do not necessarily include each and every disclosure of the limitations of the asserted claims. Medtronic has endeavored to cite to the most relevant portions of the identified prior art, but other portions may be disclosed either expressly or inherently, and/or render obvious one or more limitations of the asserted claims. Thus, Medtronic has the right to rely on: (1) uncited portions of the identified prior art; (2) other prior art not identified herein; (3) references to the state of the art (irrespective of whether such references themselves qualify as prior art to the asserted patents); (4) statements from the inventors or authors of the prior art references, or purveyors of prior art devices; and/or (5) expert testimony in context to or aid in understanding the prior art and the state of the art at the time of the alleged invention.

The lack of a citation for an element should not be deemed an admission that the element is not disclosed or is not disclosed by the reference. When the chart indicates a particular reference discloses or embodies a limitation, the terms ‐discloses‐, ‐embodies,‐ and ‐embodied‐ refer to explicit and/or inherent disclosure and/or obvious variations of the actual limitation. To the extent Medtronic asserts that a claim is indefinite, Medtronic has used its best efforts to reasonably interpret the claim and their duties in charting the prior art references.

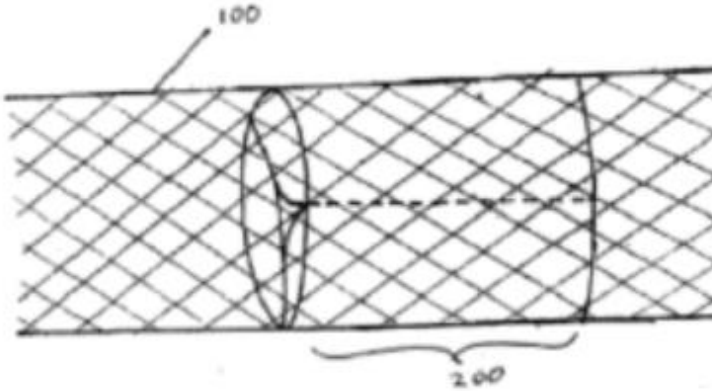
Where Medtronic cites to a particular drawing or figure in the accompanying charts, the citation encompasses that drawing or figure, as well as any text associated with the drawing or figure. Similarly, where citations are made to text concerning a drawing or figure, the citation encompasses that drawing or figure. Certain identified prior art inherently disclose features of the asserted claims. Medtronic reserves the right to rely on inherency to demonstrate the invalidity of the asserted claims. Moreover, certain prior art references may inherently disclose certain features of the asserted claims as construed. Medtronic may rely on cited or uncited portions of the prior art, other documents, factual testimony, and expert testimony to demonstrate the inherency of certain features of the prior art to invalidate the asserted claims.

To the extent Colibri contends that the prior art reference does not disclose any particular limitation of the asserted claims, either expressly or inherently, it would have been obvious to a person of ordinary skill in the art as of the time of the invention to modify the reference and/or to combine its teachings with other prior art references, including but not limited to the prior art references identified in Medtronic's invalidity contentions and the relevant sections of the claim charts for the asserted claims in a manner that renders such claims invalid as obvious.


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	Claim language	Exemplary disclosure
1.pre	An assembly to treat a native heart valve in a patient, the assembly for use in combination with a guidewire, the assembly comprising:	<p>To the extent this preamble is limiting, Paniagua discloses “[a]n assembly valve in a patient, the assembly for use in combination with a guidewire, comprising.”</p> <p>For example,</p> <p style="padding-left: 40px;">The present invention comprises a percutaneously implantable valve device and a method of making same. The replacement heart valve comprises a stent member made of stainless steel or self-expanding biological tissue artificial valve means disposed within the inner member. An implantation and delivery system having a central portion of a flexible hollow tube catheter that allows a metallic wire guide inside it. The endovascular stented-valve is created from a glutaraldehyde biocompatible tissue material which has two or three cusps that permit unidirectional blood flow. The present invention also comprises a method of making a replacement heart valve by taking a fragment of biological tissue material and treating, drying, folding and rehydrating it in a solution to form a two- or three-leaflet/cusp valve with the leaflets/cusps formed thereby eliminating the extent of suturing required, providing improved performance and function.</p> <p>Paniagua at Abstract.</p>
1.a	a prosthetic heart valve including: a stent member having an inner channel, the stent member collapsible, expandable and configured for transluminal	<p>Paniagua discloses “a prosthetic heart valve including: a stent member having an inner channel, the stent member collapsible, expandable and configured for transluminal use wherein.”</p> <p>For example, Paniagua’s artificial valve includes a stent member (100) having</p>

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	percutaneous delivery, wherein	<p>The valve means 200 is then attached to the inner channel of the stent member 100 by suturing the outer surface of the valve means' pericardium material to the stent member.</p> <p>Paniagua at paragraph [0049]. Paniagua further discloses that the stent member 100 is self-expandable and configured for transluminal percutaneous delivery:</p> <p>The present invention comprises a percutaneously implantable replacement heart valve and a method for making same. The artificial heart valve device of the present invention is capable of exhibiting a variable diameter between a collapsed position and an expanded position. A preferred embodiment of a replacement heart valve device according to the present invention is shown in FIG. 5. The replacement heart valve device comprises a stent member 100 and a valve means 200. The stent member 100 is preferably self-expandable. Balloon-expandable stents can be used as well, and has a first polymeric configuration in a compressed or collapsed configuration and a second, larger polymeric configuration in an expanded configuration.</p> <p>Paniagua at paragraph [0037]. The drawings below show the expanded and collapsed configurations of the stent:</p> 
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		<p>Paniagua at FIG. 5 (showing stent in the expanded configuration).</p>  <p>Paniagua at FIG. 6 (showing stent in the collapsed configuration).</p>
1.b	<p>the stent member includes a tubular structure away from a central portion that flares at both ends in a trumpet-like configuration; and</p>	<p>Paniagua discloses “the stent member includes a tubular structure away from its central portion that flares at both ends in a trumpet-like configuration; and”</p> <p>For example:</p> <p style="padding-left: 40px;">The stent used in a preferred embodiment of the present invention is made of a “shaped memory” alloy, nitinol, which is composed of nickel and titanium. The wire is first fashioned into the desired shape for the device and then annealed. A meshwork of nitinol wire of approximately 0.008 inch diameter is formed into a tubular structure with a minimum central diameter of 20 millimeters. Away from its central portion, the tubular structure flares markedly in a trumpet-like configuration. The maximum diameter of the flared end is approximately 50 mm. The purpose of the stent is to maintain a clear channel through the diseased cardiac valve following its implantation.</p> <p>Paniagua at paragraph [0041].</p>
1.c	<p>a valve means including two to four individual leaflets made of fixed pericardial tissue,</p>	<p>Paniagua discloses “a valve means including two to four individual leaflets made of fixed pericardial tissue, wherein the valve means resides entirely within the inner member, and wherein no reinforcing members reside within the inner channel of the inner member”</p>

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<p>wherein the valve means resides entirely within the inner channel of the stent member, and wherein no reinforcing members reside within the inner channel of the stent member</p>	<p>For example, Paniagua's artificial valve includes two to four individual leaflets attached to pericardial tissue:</p> <p>The present invention also comprises a method of making a replacement valve device. In order to make the valve, the biocompatible tissue material is cleaned, and all the fat tissue and extra fibers are removed. Cleaning is preferably accomplished by using a hydromechanical force-based cleaning device to separate the tissue from hydration with distilled water to remove unwanted layers. Once the tissue is completely clean, it is subjected to photo-mechanical compression, and is then formed and placed in sequential solutions of isopropyl alcohol of about 70-100% ethanol of about 70-100% glycerol and glutaraldehyde preferably at a concentration of about 0.07-25% for about 36 hours, respectively. The material is then photomechanically compressed to remove lipids and produce proteolytic products that make the surface smoother and more compact and biocompatible by increasing the molecular distance of collagen fibers. The exposure to light and photo-mechanical compression cause protein denaturation making the material structurally homogeneous and biocompatible. Gas sterilization can also be used to sterilize the tissue membrane material. The valve is formed by taking a flat sheet of pericardium material and folding it in such a way that forms a three-leaflet or desired number of leaflets valve as shown in FIGS. 3A and 3B and/or FIGS. 9A, 9B and 9C. The use of pericardium material to create the cusps or leaflets reduces the need for additional material otherwise required, and resembles the natural form and function of the natural valve. It also greatly reduces the risk of tearing of the cusps or leaflets because the leaflets are integral to the valve rather than being attached by suturing.</p> <p>Paniagua at paragraph [0046]. Paniagua further discloses that the valve means resides entirely within the inner channel of the stent member (100), and wherein no reinforcing members reside within the inner channel of the stent member:</p> <p>The valve means 200 is then attached to the inner channel of the stent member by suturing the outer surface of the valve means' pericardium material to the stent member. FIG. 7 depicts preferred suture points of one embodiment of the present invention: 3-point fixation or 6-point fixation at each border of</p>
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