05-15	-2001					
Form PTO 1595 1-31-92 RECOR	ET U.S. DEPARTMENT OF COMMERCE Patent and Trademark Office F-6902					
To the Honorable Commissioner 10171	6377					
1. Name of conveying party(ies):	 Name and address of receiving party(ies): 					
Karl-Heinz HECKER Rudolf SCHINAGL	Name: <u>MPO Gesellschaft für Medizintechnische</u>					
Thomas O.F. WAGNER	Produkt Organisation mbH					
Additional name(s) of conveying party(ies) attached? Yes [] No [>						
3. Nature of conveyance: 4-27-01						
[x] Assignment [] Merger	Street Address: <u>Hohenbergstr. 57</u> ,					
[] Security Agreement [] Change of Name	D-83229 Aschau, Germany					
[] Other						
Execution Date: <u>June 28, 2000</u>	Additional name(s) & address(es) attached? [] Yes [X] No					
4. Application number(s) or patent number(s):						
If this document is being filed together with a new appl	ication, the filing date of the application is					
A. Patent Application No.(s)	B. Patent No.(s)					
I hereby certify that this correspondence is being deposited with the United States Postal Services as	5,957,128					
First Class Mail in an envelope addressed to: Commissioner Of Patents and Trademarks, Washington, D.C. 20231, on <u>April 24, 2001</u>	5,957,120					
Washington, D.C. 20231, on <u>April 24, 2001</u>						
C. Bruče Hamburg Reg. No. 22,389						
	s attach d? [] Yes [X] No					
 Name and address of party to whom correspondence concerning document should be mailed: 	6. Total number of applications and patents involved:					
Name: <u>C. Bruce Hamburg, Esq.</u>	7. Total fee (37 CFR 3.41):\$40.00					
Internal Address: <u>Jordan and Hamburg LLP</u>	[] Enclosed					
Chanin Building	$-$ [X] Authorized to be charged to deposit $40 \in$					
Suite 4000	account 10-1250					
Street Address: <u>122 East 42nd Street</u>	 8. Charge any excess or credit any refund to the same deposit account number indicated above. 					
City: New York State: New York Zip: 10168						
05/14/2001 DBYRNE 00000056 101250 3337120 DO NOT USE THIS SPACE						
01 FC:501 40.00 CH 9. Statement and signature.						
To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.						
C. Bruce Hamburg April 24, 2001						
Name of Person Signing Date						
	Total number of pages comprising cover sheet: 3					
OMB No. 0651-0011 (exp. 4/94) Mail documents to be recorded with required cover sheet information to:						
Commissioner of Patent	Commissioner of Patents & Trademarks, Box Assignments Washington, D.C. 20231					

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PATENT REEL: 011783 FRAME: 0603

ORIGINAL ASSIGNMENT

For valuable consideration, I (we) the below signed inventor(s) of record, hereby assign to

MPO Gesellschaft für Medizintechnische Produkt Organisation mbH

having a place of business at: Hohenbergstr. 57, D-83229 Aschau, Germany

and its successors and assigns (collectively hereinafter called "the Assignee"), the entire right, title and interest throughout the world in the inventions and improvements which are the subject of U.S. Patent Number 5,957,128, entitled:

"Method and Device for Determination of the Functional Residual Capacity (FRC)"

this assignment including said patent, any and all United States and foreign patents, utility models, design registrations, inventor's certificates and other similar rights granted for any of said inventions or improvements, and the right to claim priority based on the filing date of said application under the International Convention for the Protection of Industrial Property, the Patent Cooperation Treaty, the European Patent Convention, and all other treaties of like purposes; and I authorize the Assignee to apply in all countries in my name, or in its own name, for patents, utility models, design registrations and like rights of exclusion and for inventors' certificates for said inventions and improvements; and I agree for myself and my heirs, legal representatives and assigns, without further compensation to perform such lawful acts and to sign such further applications, assignments, Preliminary Statements and other lawful documents as the Assignee may reasonably request to effectuate fully this assignment.

IN WITNESS WHEREOF, I hereby set my hand, date of signature and place of signature as indicated below.

	Full Name of Sol (if other names)		Karl-Heinz Hecker			
	Residence:	Hohenbergstrasse 57, D-	83229, Aschau			
	Citizenship:	Germany				
	Post Office Addr	ess: / Hohenbergstras	se 57, D-83229, Aschau			
	Signature of Sole	or First Inventor	28. 6. 2000 Date of Signature	Place of Signature:		
		cond Joint Inventor::	Rudolf Schinagl	(City, Country)		
	Residence:	Fasanenstrasse 177, D-82				
Citizenship: Germany						
Post Office Address: Fasanenstrasse 177, D-82008 Unterhaching						
X	Signature of Seco	<u>ulling</u>	Date of Signature	Place of Signature: (City, Country)		

Page 1 of Original Assignment

PATENT REEL: 011783 FRAME: 0604

Full Name of T	hird Joint l	nventor::	Thomas O.	F. Wag	iner
Residence: -Ellernstrasse 41, D-30175-		75-Hannover	Pau	l-Ehrlich-Str.30,	
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Post Office Ad	Paul-Ehrlich				, 60596 Frankfurt r
Signiture of Th	iri Invento	or A	2Y.M Date of Sig		

RECORDED: 04/27/2001

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PATENT REEL: 011783 FRAME: 0605