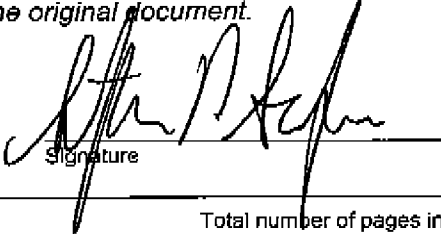


Substitute Form PTO-1595
Attorney Docket No.: 10527-522001
Client's Ref. No.: 03-257

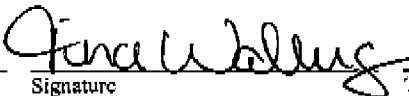
RECORDATION FORM COVER SHEET
PATENTS ONLY

Commissioner for Patents: Please record the attached original document(s) or copy(ies).	
1. Name of conveying party(ies): (1) Martin Willard; (2) Kent Harrison Additional name(s) attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	2. Name and address of receiving party(ies): Scimed Life Systems, Inc. One Scimed Place Maple Grove, MN 55311-1566 Additional names/addresses attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
3. Nature of conveyance: <input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Merger <input type="checkbox"/> Security Agreement <input type="checkbox"/> Change of Name <input type="checkbox"/> Other: Execution Date: November 13, 2003	
4. Application number(s) or patent number(s): If this document is being filed with a new application, the execution date of the application is: A. Patent Application No(s): 10/715,636 B. Patent No(s): Additional numbers attached? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
5. Name/address of party to whom correspondence concerning document should be mailed: STEPHEN R. SCHAEFER Fish & Richardson P.C., P.A. 60 South Sixth Street Suite 3300 Minneapolis, MN 55402	6. Total number of applications/patents involved: 1 7. Total fee (37 CFR §3.41): \$40 <input type="checkbox"/> Enclosed <input checked="" type="checkbox"/> Authorized to charge Deposit Account. 8. Deposit Account No.: 06-1050 Please apply any additional charges, or any credits, to our Deposit Account No. 06-1050.
DO NOT USE THIS SPACE	
9. Statement and Signature: <i>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.</i> Stephen R. Schaefer Reg. No. 37,927 Name of Person Signing  Signature Jan. 15, 2004 Date Total number of pages including coversheet, attachments and document: 4	

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CERTIFICATE OF TRANSMISSION BY FACSIMILE

I hereby certify that this correspondence is being transmitted by facsimile to the Patent and Trademark Office on the date indicated below.

January 15, 2004
Date of Transmission

Signature
Tina Walberg
Typed Name of Person Signing Certificate

700060976

PATENT
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Attorney Docket No: 10527-522001/03-257

ASSIGNMENT

For valuable consideration, we, MARTIN WILLARD of 1514 Raleigh Drive Burnsville, MN 55337, KENT HARRISON of 15407 Elm Road North Maple Grove, MN 55311, hereby assign to: Scimed Life Systems, Inc., a corporation of Minnesota having a place of business at:

One Scimed Place
Maple Grove, MN 55311-1566; 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 subject of an application for United States Patent signed by us, entitled INTRAVASCULAR COOLING DEVICE AND METHOD, filed 11/18/2003, and assigned U.S. Serial Number 10/715,636 and we authorize and request the attorneys appointed in said application to hereafter complete this assignment by inserting above the filing date and serial number of said application when known; this assignment including said application, any and all United States and foreign patents, utility models, and design registrations 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 we authorize the Assignee to apply in all countries in our 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 we agree for ourselves and our respective 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.

Attorney Docket No: 10527-522001/03-257

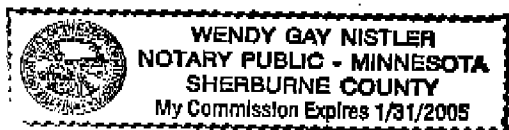
IN WITNESS WHEREOF, I hereto set my hand and seal at _____,
this 13th day of November, 2003
Martin Willard L.S.
MARTIN WILLARD

State of Minnesota :

: SS.

County of Hennepin:

Before me this 13th day of November, 2003, personally appeared
MARTIN WILLARD known to me to be the person whose name is subscribed to the foregoing
Assignment and acknowledged that he executed the same as his free act and deed for the
purposes therein contained.



[Notary's Seal Here]

Wendy G Nistler
Notary Public
My Commission Expires:

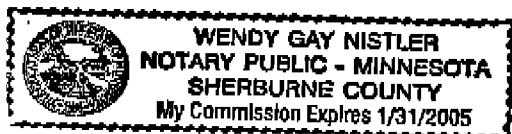
Attorney Docket No: 10527-522001/03-257

IN WITNESS WHEREOF, I hereto set my hand and seal at _____,
this 13th day of November, 2003
[Signature] L.S.
KENT HARRISON

State of Minnesota :
: ss.

County of Hennepin :

Before me this 13th day of November, 2003, personally appeared
KENT HARRISON known to me to be the person whose name is subscribed to the foregoing
Assignment and acknowledged that he executed the same as his free act and deed for the
purposes therein contained.



[Notary's Seal Here]

Wendy G Nistler
Notary Public
My Commission Expires:

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