10/27/2015 503541632

PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2

EPAS ID: PAT3588259

SUBMISSION TYPE:	NEW ASSIGNMENT	
NATURE OF CONVEYANCE:	ASSIGNMENT	

CONVEYING PARTY DATA

Name	Execution Date
LARS HOFF	04/27/2015
JONNY OESTENSEN	06/24/2015
HENRIK RASMUSSEN	03/17/2015
AUDUN TORNES	04/20/2015

RECEIVING PARTY DATA

Name:	GE HEALTHCARE AS	
Street Address:	NYCOVEIEN 2	
Internal Address:	POSTBOKS 4220, NYDALEN	
City:	OSLO	
State/Country:	: NORWAY	
Postal Code:	Postal Code: N-0401	

PROPERTY NUMBERS Total: 1

Property Type	Number	
Application Number:	14467152	

CORRESPONDENCE DATA

Fax Number: (678)365-4450

Correspondence will be sent to the e-mail address first; if that is unsuccessful, it will be sent using a fax number, if provided; if that is unsuccessful, it will be sent via US Mail.

Phone: 678-365-4444

amittons@parks-wood.com Email:

Correspondent Name: PARKS WOOD LLC

Address Line 1: 730 PEACHTREE STREET, NE

Address Line 2: SUITE 600

Address Line 4: ATLANTA, GEORGIA 30308

ATTORNEY DOCKET NUMBER: GEHC-174980CON		
NAME OF SUBMITTER: ADRIENNE MITTONS		
SIGNATURE:	/amittons/	
DATE SIGNED: 10/27/2015		
	This document serves as an Oath/Declaration (37 CFR 1.63).	

PATENT REEL: 036892 FRAME: 0001

503541632

Total Attachments: 7 source=174980 Dec-Assignment#page1.tif source=174980 Dec-Assignment#page2.tif source=174980 Dec-Assignment#page3.tif source=174980 Dec-Assignment#page4.tif source=174980 Dec-Assignment#page5.tif source=174980 Dec-Assignment#page6.tif source=174980 Dec-Assignment#page7.tif

PATENT REEL: 036892 FRAME: 0002

COMBINED DECLARATION AND GLOBAL ASSIGNMENT FOR UTILITY OR DESIGN PATENT APPLICATION

As the below named inventor(s), we hereby declare that:

This declaration and assignment are directed to:			
METHOD, COMPOUNDS AND PREPARATIONS FOR THE IDENTIFICATION OF			
	SENTINEL LYMPH NODES		
	the specification of which is attached hereto OR		
	United States application of PCT international application number 14/467152 filed on 25 August 2014, as amended on [date] (if applicable). (We hereby authorize and request the Company or its delegated attorneys or agents		

to insert above the application number and filing date of the application when known.)

The above-identified application was made or authorized to be made by us.

We believe that we are original joint inventors of a claimed invention in the application,

We hereby acknowledge that any willful false statement made in this declaration is punishable under 18 USC § 1001 by fine or imprisonment of not more than five (5) years, or both.

We have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment referred to above.

We acknowledge the duty to disclose information which is material to the patentability of this application as defined in 37 CFR § 1.56, including, for continuation-in-part applications, material information which became available between the filing date of the prior application and the filing date of the continuation-in-part application.

In accordance with our obligation(s) under an Employee Innovation and Proprietary Information Agreement or (as applicable) arising out of other agreements (such as, but not limited to, the Services Agreement between General Electric Company or any of its affiliates, and our employers), and/or for other good and valuable consideration of which we acknowledge receipt, I/we,

Inventor First Name	Inventor Middle Name	Inventor Last Name		Residence Town	Residence State	Residence Country
Lars		HOFF	of	Tonsberg		NO
Jonny		OESTENSEN	of	Oslo		NO
Henrik		RASMUSSEN	of	Heggedal		NO
Audun		TORNES	of	Drammen		NO

hereby sell and assign to:

Name of Company: GE Healthcare AS
Entity Type (optional):
Address: Nycoveien 2, Postboks 4220 Nydalen, N-0401- Oslo, Norway

herein referred to as "Company", its successors and assigns our entire respective rights, titles and interests in and to the invention and improvements made or conceived by us described in the application(s) listed above and in the following table:

Country of Filing	Type of Filing	Application Number	Filing Date	Title
NO	PRI	20024755	03OCT2002	SENTINEL LYMPH NODE DETECTION
WO	ORD	NO2003/000328	01OCT2003	METHOD, COMPOUNDS AND PREPARATIONS FOR THE IDENTIFICATION OF SENTINEL LYMPH NODES
US	PCT	10/530094	26JAN2006	METHOD, COMPOUNDS AND PREPARATIONS FOR THE IDENTIFICATION OF SENTINEL LYMPH NODES
US	CON	14/467152	25AUG2014	METHOD, COMPOUNDS AND PREPARATIONS FOR THE IDENTIFICATION OF SENTINEL LYMPH NODES

(We hereby authorize and request the Company or its delegated attorneys or agents to insert above the application number and filing date of the application(s) when known.)

and any and all applications for patent and patents therefrom in any and all countries, including all divisions, continuations, continuations-in-part, reexaminations, renewals, and reissues thereof, and all rights of priority resulting from the filling of the application(s), and authorize and request any official whose duty it is to issue patents, to issue any patent on the inventions and improvements resulting therefrom to the Company, or its successors or assigns, and agree that on request and without further consideration, we will communicate to the Company or its representatives or nominees any facts known to us respecting the inventions and improvements and testify in any legal proceeding, make all rightful oaths, sign all lawful papers and execute all instruments or documents required or requested for the

making and prosecution of any applications of any type for patent, utility model, or other similar rights in all countries including, but not limited to, any provisional, non-provisional, continuation, continuation-in-part, divisional, renewal or substitute thereof, for any derivation proceedings relating thereto, and, as to any patents that issue from such applications, for any supplemental examination, derivation proceeding, opposition, post grant review, reissue, re-examination, inter partes review, or extension thereof, and generally do everything possible to aid the Company, its successors, assigns, and nominees to obtain and enforce proper patent protection for the invention and its improvements in all countries.

Remuneration claims of the inventor(s)/assignor(s) potentially arising from German Law on Employee Inventions, or any other respective country law, remain unaffected by this assignment.

INVENTOR 1	
Signature: <u>Las Hoff</u> HOFF, Lars	Date: Z7 April Zo15
Witnessed by: <u>Uwik Hanka</u> Signature	Date: 27/4 - 2015
ULRIK HAWKE Printed Name of Witness	
Witnessed by: Signature	Date: 27/4 - 2015
Svein Husa Printed Name of Witness	
SECTION BELOW IS FOR USE ONLY IF SIGNIN	NG IN PRESENCE OF A NOTARY
Date	9;
Inventor Name	
STATE OF ss. COUNTY OF	
This day of,,, named <u>Inventor Name</u> , to me personally known as assignment, who acknowledged to me that he/she effor the purposes therein set forth.	before me personally came the above- the individual who executed the foregoing executed the same of his/her own free will
Seal	
	(Notary Public)

a so successive models of control of Sens Angles Selection of Sens Angles	Date:
Inventor Name	
STATE OF	
COUNTY OF	SS.
This day of day of day of do maked inventor Name, to make a signment, who acknowledge for the purposes therein set to	ML, before me personally came the above- e personally known as the individual who executed the foregoing ged to me that he/she executed the same of his/her own free will orth.
Seal	
<u> </u>	 (Notary Public)

INVENTOR 3	
Signature:RASMUSSEN, Henrik	Date: 19ARCH 19th 2015
Witnessed by:Signature	Date: <u>Макси 19^{ти}, 2015</u>
Сомы Сансіа, Vi'стол Маниег Printed Name of Witness	
Witnessed by: <i>Kina Kjølen</i> Signature	Date:
バINA KJのLEN Printed Name of Witness	1
SECTION BELOW IS FOR USE ONLY IF SIG	Date:
STATE OF ss.	
This day of, named <u>Inventor Name</u> , to me personally knowr assignment, who acknowledged to me that he/s for the purposes therein set forth.	n as the individual who executed the foregoing
Seal	
	(Notary Public)

INVENTOR 4	
Signature: TORNES, Audun Witnessed by: Signature	Date: 20. April 2015 Date: 20 April 2015
Solvei & Blekke Printed Name of Witness Witnessed by: And Signature	Date: 20 April 2015
CAROLYN CLARK Printed Name of Witness SECTION BELOW IS FOR USE ONLY IF SIG	NING IN PRESENCE OF A NOTARY
CECTION BELOW TO LONG OF CALL, IT COMMON TO LARGE OF A TOTAL	
[Date:
Inventor Name	
STATE OF	
COUNTY OF	
This day of, before me personally came the above-named Inventor Name, to me personally known as the individual who executed the foregoing assignment, who acknowledged to me that he/she executed the same of his/her own free will for the purposes therein set forth.	
Seal	
	(Notary Public)

Page 7 of 7