## 504304534 04/04/2017

## PATENT ASSIGNMENT COVER SHEET

Electronic Version v1.1 Stylesheet Version v1.2 EPAS ID: PAT4351215

SUBMISSION TYPE:		NEW ASSIGNMENT			
NATURE OF CONVEYANCE:		ASSIGNMENT	ASSIGNMENT		
CONVEYING PARTY D	ΑΤΑ				
		Name		Execution Date	
ARNAZ S. MALHI				09/26/2011	
RECEIVING PARTY DA	TA				
Name:	TYCO HEALTHCARE GROUP LP				
Street Address:	15 HAMPSHIRE STREET				
City:	MANSFIELD				
State/Country:	MASSACHUSETTS				
Postal Code:	02048				
Application Number	15	192655			
Property Type		Number			
Application Number:	1.5	192000			
Application Number:	13	192000			
		192000			
CORRESPONDENCE D Fax Number:	<b>ATA</b> (50	08)261-6225			
CORRESPONDENCE D Fax Number: <i>Correspondence will b</i>	ATA (50 e sent to th	08)261-6225 <b>ne e-mail address first; if th</b> a			
CORRESPONDENCE D Fax Number: <i>Correspondence will b</i>	ATA (50 e sent to th provided; in	08)261-6225			
CORRESPONDENCE D Fax Number: <i>Correspondence will be</i> <i>using a fax number, if p</i> Phone:	ATA (50 e sent to th provided; in 50	08)261-6225 <b>ne e-mail address first; if th</b> a f <b>that is unsuccessful, it wi</b>			
CORRESPONDENCE D Fax Number: <i>Correspondence will b</i> <i>using a fax number, if</i>	ATA (50 e sent to th provided; in 50 iple	08)261-6225 <b>ne e-mail address first; if th</b> f <b>that is unsuccessful, it wi</b> 82618000			
CORRESPONDENCE D Fax Number: <i>Correspondence will b</i> <i>using a fax number, if p</i> Phone: Email:	ATA (50 e sent to th provided; in 50 iple CC	08)261-6225 <b>ne e-mail address first; if tha</b> f <b>that is unsuccessful, it wi</b> 82618000 egalus@covidien.com			
CORRESPONDENCE D Fax Number: <i>Correspondence will be using a fax number, if p</i> Phone: Email: Correspondent Name:	ATA (50 e sent to th brovided; in 50 iple CC 15	08)261-6225 <b>ne e-mail address first; if th</b> f <b>that is unsuccessful, it wi</b> 82618000 egalus@covidien.com DVIDIEN LP	l be sent via L		
CORRESPONDENCE D Fax Number: <i>Correspondence will be using a fax number, if p</i> Phone: Email: Correspondent Name: Address Line 1: Address Line 4:	ATA (50 e sent to th provided; in 50 iple CC 15 MA	08)261-6225 <b>be e-mail address first; if th</b> <b>f that is unsuccessful, it win</b> 82618000 egalus@covidien.com OVIDIEN LP HAMPSHIRE STREET	l be sent via L		
CORRESPONDENCE D Fax Number: <i>Correspondence will be using a fax number, if p</i> Phone: Email: Correspondent Name: Address Line 1: Address Line 4:	ATA (50 e sent to th provided; in 50 iple CC 15 MA	08)261-6225 <b>ne e-mail address first; if th</b> f <b>that is unsuccessful, it wi</b> 82618000 egalus@covidien.com OVIDIEN LP HAMPSHIRE STREET ANSFIELD, MASSACHUSET	l be sent via L		
CORRESPONDENCE D Fax Number: <i>Correspondence will b</i> <i>using a fax number, if p</i> Phone: Email: Correspondent Name: Address Line 1: Address Line 4: ATTORNEY DOCKET NUNAME OF SUBMITTER:	ATA (50 e sent to th provided; in 50 iple CC 15 MA	08)261-6225 <b>be e-mail address first; if th</b> f <b>that is unsuccessful, it win</b> 82618000 egalus@covidien.com OVIDIEN LP HAMPSHIRE STREET ANSFIELD, MASSACHUSET HKN-01840.USC1	l be sent via L		
CORRESPONDENCE D Fax Number: <i>Correspondence will b</i> <i>using a fax number, if p</i> Phone: Email: Correspondent Name: Address Line 1:	ATA (50 e sent to th provided; in 50 iple CC 15 MA	08)261-6225 <b>be e-mail address first; if tha</b> <b>f that is unsuccessful, it win</b> 82618000 egalus@covidien.com DVIDIEN LP HAMPSHIRE STREET ANSFIELD, MASSACHUSET HKN-01840.USC1 BLAINE A. PAGE	l be sent via L		
CORRESPONDENCE D Fax Number: <i>Correspondence will buusing a fax number, if p</i> Phone: Email: Correspondent Name: Address Line 1: Address Line 4: ATTORNEY DOCKET NUNAME OF SUBMITTER: SIGNATURE:	ATA (50 e sent to th provided; in 50 iple CC 15 MA JMBER:	08)261-6225 <b>be e-mail address first; if tha</b> <b>f that is unsuccessful, it will</b> 82618000 egalus@covidien.com OVIDIEN LP HAMPSHIRE STREET ANSFIELD, MASSACHUSET HKN-01840.USC1 BLAINE A. PAGE /blaine a. page/ 04/04/2017	l be sent via L		

## ASSIGNMENT OF INVENTION, PRIORITY RIGHTS AND RIGHTS TO APPLY FOR PATENTS

I the undersigned, Arnaz Malhi, Watertown, Massachusetts, (US) do HEREBY STATE UNDER OATH that I am the original, first and true inventor of an invention for COMPRESSION GARMENT HAVING SEALABLE BLADDER POCKET currently attorney docket H-KN-01840/ TYCV 1840 as described and/or claimed in my application COMPRESSION GARMENT HAVING SEALABLE BLADDER POCKET.

NOW, THEREFORE, I HEREBY ASSIGN; TRANSFER AND SELL my entire right, title, and interest in and to said invention and application unto

## Tyco Healthcare Group LP

a Delaware limited partnership having an office and doing business at 15 Hampshire Street, Mansfield, Massachusetts 02048, as the Assignee, without any restrictions, reservations or limitations, the entire right, title and interest in and to the aforesaid application for Letters Patent and all patents which may be granted thereon, and all divisions, continuations, continuations-inpart, reissues and extensions thereof;

INCLUDING ALL RIGHTS in and to said invention in any country of the world, including, but not limited to, all priority rights derived from the aforesaid application for Letter Patent by virtue of the International Convention for the Protection of Industrial Property and for any and all member countries of the aforesaid International Convention;

AND FURTHER INCLUDING THE SOLE RIGHT to file such applications under the Patent Laws of any country of the World in its name and/or ours, and the sole right to have patents granted on said applications in its name and/or to the full end of the term for which said patents may be granted as fully and entirely as the same would have been held by us had this assignment not been made, and to enforce said patents with our right to sue in any court of competent jurisdiction and obtain all remedies available, including but not limited to injunctions and to recover lost profits or compensatory and enhanced damages and attorneys fee for any and all infringements thereof:

AND AUTHORIZE our attorney(s) to take any action necessary to prosecution this invention and application my behalf;

AND AUTHORIZE AND REQUEST the Commissioner of Patents and Trademarks to Issue all patents on said invention resulting therefrom to said Tyco Healthcare Group LP as Assignee of the entire right, title and interest, and covenant that we have the full right so to do, and agree that we will communicate to said Tyco Healthcare Group LP or its representatives any facts known to us respecting said invention and testify in legal proceedings, sign all lawful papers, execute all divisional, continuing, continuation-in-part, extensions and reissue applications, make all rightful oaths and generally nominees, to obtain and enforce proper protection for said invention in all countries.

Hmannale

Arnaz S. Malhi

WRE/cjl RECORDED: 04/04/2017

09/26/201

Date

PATENT REEL: 041840 FRAME: 0490