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IN THE UNITED STATES DISTRICT COURT

FOR THE NORTHERN DISTRICT OF CALIFORNIA

SAN JOSE DIVISION

INARI MEDICAL, INC., Plaintiff, v. IMPERATIVE CARE, INC., Defendant.	Civil Action No. 5:24-cv-03117-EKL-SVKx **IMPERATIVE CARE, INC.'S OPPOSITION TO INARI'S MOTION FOR LEAVE TO FILE THIRD AMENDED COMPLAINT** Hon. Eumi K. Lee Hearing Date: May 28, 2025 Time: 9:30 a.m. Courtroom: 7, 4th Floor

Imperative Care v. Inari Medical
US Patent 11,865,291
Imperative Care Ex. 1024

Defendant Imperative Care, Inc. ("Imperative Care") hereby opposes Plaintiff Inari Medical, Inc.'s ("Stryker/Inari") Motion for Leave to File Third Amended Complaint ("Motion"). This Opposition is supported by the Declaration of Joseph Re filed herewith.

Imperative Care opposes this Motion under the current schedule and proposes the Court ***vacate*** the schedule so Stryker/Inari can finish prosecuting its patent applications before the U.S. Patent & Trademark Office ("PTO") and include in this case ***all*** the patents it intends to assert against Imperative Care's Symphony Thrombectomy System ("Symphony") as currently designed. At that point, the Court should set a new schedule to accommodate all the patents Stryker/Inari intends to assert.

I. INTRODUCTION

Imperative Care opposes Stryker/Inari's Motion only to the extent necessary for this case to proceed in an orderly fashion and to ensure that Imperative Care can obtain the final relief it seeks. The issue in this case is whether Imperative Care can continue to sell Symphony. Stryker/Inari moved for a preliminary injunction to stop the sale of Symphony, claiming it infringes two patents. Resolution of that motion determines whether Imperative Care can sell Symphony until trial. Resolution of this case must resolve whether Imperative Care can sell Symphony thereafter. Declaring that issue in Imperative Care's favor is the very relief it has sought since its first responsive pleading. But Stryker/Inari's continuous assertion of new patents as they issue from the PTO frustrates this Court's ability to offer that relief. This scenario is unacceptable to Imperative Care and should be unacceptable to the Court.

Stryker/Inari's Motion warns that it has "more than fifty patents" and the PTO "continues to issue new patents" to it. Br. at 3. When Imperative Care asked Stryker/Inari to confirm it would not add more patents to the case after this Motion, Stryker/Inari refused, preserving the option to add ***more*** patents. Clearly, there is no end in sight to Stryker/Inari's strategy to overwhelm and outspend the smaller Imperative Care with a steady barrage of patents. The unfairness to Imperative Care of having to expend resources litigating against a

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shifting collection of patents is readily apparent. And the prejudice to it mounts as the parties keep litigating in this Court ***and*** in the PTO.

The situation grows more chaotic as the parties try to comply with dates in the Scheduling Order. Stryker/Inari fails to address the changes to the Scheduling Order (Dkt. #56) that would be necessary to accommodate yet another patent. The parties have already exchanged terms for claim construction and, by the time this Motion is heard, will have exchanged proposed claim constructions and extrinsic evidence, filed their joint claim construction prehearing statement, served expert reports, and completed claim construction discovery. Stryker/Inari's request to add a new patent and another 21 patent claims would require the Parties to restart that process. Yet, Stryker/Inari does not propose a revised case schedule. Rather, it argues Imperative Care should just assume the new patent is in the case and immediately start proposing new claim constructions and serving contentions. Such a process would prejudice Imperative Care and implicitly recognizes that the current schedule must change for the new patent.

Thus, Imperative Care proposes that the Court vacate the current Scheduling Order, except for the preliminary injunction hearing scheduled for May 28, 2025, and wait to set a new case schedule until Stryker/Inari finishes its patent prosecution before the PTO or represents that it is done asserting patents against Symphony as it is currently designed. This proposal provides Stryker/Inari with its requested relief while ensuring that the Court and Parties do not waste valuable resources repeating case activities with no possibility of resolving the dispute against the sale of Symphony.[1]

II. FACTUAL BACKGROUND

On May 22, 2024, Stryker/Inari filed its original Complaint, asserting that Imperative Care's sale of Symphony infringes eight Inari patents. Dkt. #1. Over a month later, Stryker/Inari filed its First Amended Complaint, which alleged infringement of a ninth patent.

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[1] Imperative Care will also move to stay the litigation pending the outcome of its IPRs. A stay pending resolution of the IPRs would also give Stryker/Inari time to complete prosecution at the PTO and identify ***all*** the patents it intends to assert against Symphony.

Dkt. #20. In response to these and future Complaints, Imperative Care sought a declaration that it "has the lawful right to manufacture, import, use, sell, and/or offer to sell [Symphony] in the United States, consistent with its approval from the Food and Drug Administration." Dkt. #25 at 43; *see* Dkt. #91 at 53. Stryker/Inari also filed its Motion for Preliminary Injunction ("PI Motion," Dkt. #24), which Imperative Care opposed (Dkt. #34-5).

On December 19, 2024, the Court issued a Case Management and Scheduling Order. Dkt. #54. The Scheduling Order set a February 7, 2025, deadline to amend the pleadings without leave of Court. *Id.* at 2. Both Parties agreed to this deadline in their joint scheduling proposal. Dkt. #51 at 1. The Scheduling Order also set deadlines for Stryker/Inari's infringement contentions (January 13, 2025), Imperative Care's invalidity contentions (February 27, 2025), and claim construction beginning with the exchange of terms for construction (March 13, 2025). *Id.*

Stryker/Inari served its infringement contentions on January 13, asserting 131 patent claims across the nine asserted patents. Ex. 5 at 3-4. On February 7, 2025, the last day to amend pleadings, Stryker/Inari filed its Second Amended Complaint, which added two more patents to the case. Dkt. #68. Stryker/Inari also dropped U.S. Patent No. 11,697,011 ("the '011 patent") from the complaint admittedly because of the PTO's decision instituting an *inter partes* review ("IPR") of the '011 patent. Dkt #97 at 2 n.1. The PTO found a reasonable likelihood that Imperative Care would prevail in invalidating claims of the '011 patent. *See* Dkt. #89 (Supp. Brief discussing impact of IPR on PI Motion). With its Second Amended Complaint, Stryker/Inari also served supplemental infringement contentions, asserting an additional 50 patent claims for the two new patents, and bringing the total number of asserted claims in the case to 181. Ex. 6 at 3-4. Inari did not seek leave of Court to serve supplemental contentions even though the infringement-contention deadline in the Scheduling Order had passed.

On February 27, 2025, Imperative Care served its invalidity contentions for the patents asserted in the original and first amended complaints. Dkt. #54; Re Decl. ¶2. However, Imperative Care recognized it needed leave of Court to serve invalidity contentions

for the newly added patents after the Scheduling Order deadline. Thus, Imperative Care obtained agreement from Stryker/Inari that it could serve its invalidity contentions for the newly added patents (and the 50 new asserted claims) on March 24, 2025, and the Court subsequently entered an order granting that extension. Dkt. #74.

While Imperative Care was preparing its invalidity contentions, Stryker/Inari began demanding that Imperative Care produce samples and information relating to a blood return device that it had submitted to the FDA for possible clearance. Stryker/Inari alleged, albeit incorrectly, that Imperative Care "may have debuted or be testing with customers a blood return device for use with its Symphony system." Ex. 7 at 1. Imperative Care explained that the blood return system had not been sold or even approved by the FDA and, therefore, could not infringe any patents or be relevant to the case.

Stryker/Inari then wrote to Imperative Care, warning Imperative Care to "consider" over 60 ***new*** unasserted claims in ***six*** Stryker/Inari patents "in connection with its blood return system." Ex. 8 at 1. And in the Joint Letter Brief on its motion to compel before Magistrate Judge van Keulen, Stryker/Inari argues that it should be permitted to take discovery about the blood return system so that it can assert ***additional*** claims ***in this case*** rather than in a second case. Dkt. #94 at 5-6.

On March 4, 2025, the patent at issue on this Motion, U.S. Patent 12,239,333 ("the 12-'333 patent"), issued. Ex. 1 at Ex. W. A day later, Inari filed this Motion. Along with the Motion, Stryker/Inari also sent Imperative Care what it described as its second supplemental preliminary infringement contentions, which identified 21 more allegedly infringed patent claims from the 12-'333 patent. If added to the case, this new patent would bring the total number of asserted claims to ***202***. Stryker/Inari did not seek leave of Court to amend its infringement contentions after the deadline and includes only a brief footnote in this Motion addressing such leave. Dkt. #88 at 2, n.3.

On March 13, 2025, the Parties exchanged proposed claim terms for construction, just 10 days after the 12-'333 patent issued. Exs. 9-10. The Parties will complete several more claim construction tasks before this Motion is heard, including: (1) exchanging preliminary

claim constructions and extrinsic evidence (April 3, 2025); (2) filing the Joint Claim Construction and Prehearing Statement and serving claim construction expert reports (April 28, 2025); and (3) completing claim construction discovery (May 28, 2025). Dkt. #54.

On March 20, 2025, in an effort to narrow the issues on this Motion, Imperative Care wrote to Stryker/Inari to explain the prejudice caused by Stryker/Inari's strategy to serially assert patents against Symphony in this case, particularly that such strategy "prevents the Court from issuing final relief to Imperative Care so that it can keep selling Symphony." Ex. 11 at 2-3. Imperative Care proposed, as it does in this Opposition, that "the parties agree to vacate the case schedule (except for the PI hearing and pending leave of Court) until Stryker/Inari has identified ***all*** the patents it will assert against Imperative Care relating to the sale of Symphony (not potential future products such as any blood return system)." *Id.* If Stryker/Inari agreed to the proposal, Imperative Care explained it would agree that all those patents should be asserted in this case. *Id.*

Stryker/Inari responded the next day that it "does not agree to entirely suspend the schedule …." *Id.* at 2. Stryker/Inari again asserted that Imperative Care should treat the 12-'333 patent as if it was already part of the case and propose claim terms for construction. *Id.* Stryker/Inari also represented that it "cannot commit at this stage that it will not seek leave to amend the complaint again at any time in the future." *Id.*

III. THE COURT HAS BROAD DISCRETION TO SET THE CASE SCHEDULE

District courts have inherent power to control their docket and calendar. *Yong v. I.N.S.*, 208 F.3d 1116, 1119 (9th Cir. 2000). This includes "broad discretion in supervising the pretrial phase of litigation" and "broad discretion to grant or deny leave to amend[.]" *Zivkovic v. S. Cal. Edison Co.*, 302 F.3d 1080, 1087 (9th Cir. 2002); *Mir v. Fosburg*, 646 F.2d 342, 347 (9th Cir. 1980). In considering whether an amendment is proper, "it is the consideration of prejudice to the opposing party that carries the greatest weight." *Eminence Cap., LLC v. Aspeon, Inc.*, 316 F.3d 1048, 1052 (9th Cir. 2003). Courts have found prejudice exists where an amendment would disrupt the current claim construction proceedings. *Alzheimer's Inst. of Am. v. Elan Corp. PLC*, 274 F.R.D. 272, 276 (N.D. Cal. 2011); *see also*

Dexcom, Inc. v. AgaMatrix, Inc., No. CV 16-05947 SJO (ASx), 2017 WL 3433543, *7 (C.D. Cal. Feb. 3, 2017) (denying motion to amend to add new patent due to prejudice). Courts have also recognized that the addition of new claims during litigation can thwart the ability to issue final relief and provides a basis to deny amendment. *See Matter of Beverly Hills Bancorp*, 752 F.2d 1334, 1338 (9th Cir. 1984) (denying amendment as improper attempt to add *seriatim* claims); *Cobb v. Ocwen Loan Servicing, LLC.*, No. EDCV JGB 16-1659 (KKX), 2017 WL 10560638, *2-3 (C.D. Cal. June 15, 2017) (denying motion to file third amended complaint adding claims because it would not encourage finality).

As shown below, Imperative Care suffers prejudice if the Court cannot resolve the dispute between the parties and if a new patent is added to the case without an adjustment of the case schedule.

IV. STRYKER/INARI'S SERIAL ASSERTION OF PATENTS AGAINST SYMPHONY PREJUDICES IMPERATIVE CARE

Stryker/Inari's serial assertion of patents against Imperative Care's sale of Symphony prejudices Imperative Care because Stryker/Inari is frustrating the Court's ability to give Imperative Care final relief. Imperative Care requests a declaration that it "has the lawful right to manufacture, import, use, sell, and/or offer to sell the Symphony Thrombectomy System in the United Sates, consistent with its approval from the Food and Drug Administration." Dkt. #91 at 53. Conversely, Stryker/Inari seeks to enjoin Imperative Care, both preliminarily and permanently, from selling Symphony. Dkt. #24. The question remains how the Court can resolve this dispute when Stryker/Inari continues to prosecute and obtain new patents for the purpose of asserting them against Symphony as currently sold.

Stryker/Inari argues that it "tried to avoid this suit by asking [Imperative Care] to cease selling [Symphony] until the parties could resolve the infringement issues." Dkt. #88 at 2. But as this Motion illustrates, the "infringement issues" will ***never*** be resolved because Stryker/Inari plans to continue asserting new patents as they issue against Symphony. In correspondence concerning this Motion, Stryker/Inari made clear its intent to keep asserting more patents. Ex. 11 at 2. Stryker/Inari also warns that it has "more than fifty patents" and

the PTO "continues to issue new patents." Dkt. #88 at 3. PTO records confirm that Stryker/Inari has at least ***thirteen*** pending continuation patent applications relating to hemostasis valves and aspiration systems in patent families already asserted in this case. Re Decl., ¶ 3. And Stryker/Inari recently threatened Imperative Care with ***five*** additional patents and numerous claims not in this case. *See* Ex. 8. It also moved to compel Imperative Care to produce information about a blood return system (though it is not approved by the FDA and thus has never been introduced). In its briefing before Magistrate Judge van Keulen on this issue, Stryker/Inari argued it should be allowed to add more patent claims to this case if the discovery sought suggests infringement. Dkt. #94 at 6.

Stryker/Inari has also established a pattern of adding patents to the case as they issue and dropping patents as soon as Imperative Care gets a favorable IPR decision. Stryker/Inari initially asserted eight patents in the complaint. But it has already filed two Amended Complaints (Dkt. ##20, 68) to add three new patents and 77 asserted patent claims. Further, when Imperative Care obtained institution of the '011 patent IPR, Stryker/Inari promptly dropped the patent from this case. *Compare* Dtk. #20 and #68. Stryker/Inari now seeks to file a Third Amended Complaint to assert another new patent and 21 more patent claims, bringing its total to 11 asserted patents and over 200 asserted patent claims.

Stryker/Inari argues that "it will be efficient to treat [the new patent] together with this case, rather than forcing Inari to file a separate suit …." Dkt. #88 at 2. But nothing is efficient about disrupting the case schedule by continuously adding new patents to the case, something that has already happened twice. Nor is it efficient for Stryker/Inari to assert patents in this case causing Imperative Care to expend resources defending against those patents in this Court and at the PTO and then dropping the patents in favor of another patent (or two) as soon as the Patent Office institutes the IPRs. Imperative Care has filed three more pending IPRs challenging claims like those in the instituted '011 patent IPR, suggesting more dismissed claims are ahead. And Imperative Care plans to continue filing IPRs on each asserted patent because the patents all relate to well-known techniques for aspirating blood clots and using basic components for doing so. Thus, the determination of which 200+

claims Stryker/Inari can actually assert at trial is far away.

Imperative Care agrees that the most efficient litigation would include ***all*** asserted patents against the accused Symphony device in a single case. But Stryker/Inari's game of whack-a-mole is hardly the way to efficiently and effectively resolve the parties' dispute. The Court and parties are wasting time and effort on patents that will never make it to trial. But worse than that, this lawsuit will never be able to resolve the parties' fundamental dispute whether Imperative Care can sell Symphony. That relief is only possible once Stryker/Inari represents it has finished asserting patents against Symphony as currently designed. Otherwise, Stryker/Inari will keep asserting new patents against Symphony in future lawsuits.

Further, Stryker/Inari repeatedly confirms the prejudice to Imperative Care. Stryker/Inari argues that the parties "conserve judicial resources by litigating similar patents covering related technologies in a single judicial action." Dkt. #88 at 4. It also argues that "[i]t is indisputably most efficient to litigate the [12-'333] Patent with the existing patents-in-suit" because "[a]ll of the previous asserted patents in this case involve thrombectomy systems" and other patents already asserted in the case "are part of the same patent family as the [12-'333] Patent." *Id.* Stryker/Inari also argues that its new patent "will involve many of the same witnesses, documents, and accused products as are implicated by the existing claims" and that "[r]equiring the [12-'333] Patent to be litigated separately would force the Court and parties to needlessly duplicate the work done in this case." *Id.* And all that may be true. But those same arguments would apply to Stryker/Inari's many other ***yet-to-be-issued*** patents. Stryker/Inari cannot have it both ways. Stryker/Inari cannot cite efficiency to justify adding patents to the case whenever it wants but dismiss the clear inefficiency of disrupting the case schedule and preventing the Court from finally resolving the parties' dispute by serially asserting patents against Symphony.

While Stryker/Inari correctly observes "no rule" limits "the number of patents that Inari can assert," (Dkt. #88 at 5-6), no rule requires the Court to continuously permit Stryker/Inari to add (and drop) patents while frustrating the Court's ability to give final relief to Imperative Care and disrupting the case schedule. Vacating the case schedule will give

Stryker/Inari time to identify all the patents it intends to assert against Imperative Care's Symphony product and ensure that the parties do not waste resources redoing case activities or litigating patents that will not be part of the case in the future.

V. ADDING A NEW PATENT WOULD REQUIRE A NEW CASE SCHEDULE

If the Court is not inclined to vacate the current schedule and wait for the completion of Stryker/Inari's patent prosecution as proposed above, the Court should at least revise the current case schedule to accommodate adding the 12-'333 patent. *See e.g., Ziptronix*, *Inc. v. Omnivision Techs.,Inc.*, No. 10-cv-05525-SBA, 2012 WL 3155554, *3 (N.D. Cal. Aug. 2, 2012) (amending the schedule to accommodate new patents); *Sage Electrochromics, Inc. v. View, Inc.*, No. 12-cv-6441-JST, 2014 WL 1379282, *7 (N.D. Cal. Apr. 8, 2014) (finding where amended claims would prejudice defendant, modified case schedule is required).

The parties have already exchanged proposed claim terms for construction. Exs. 9-10. And the parties will complete several more claim construction submissions before this Motion is heard on May 28, 2025, including: (1) exchanging preliminary claim constructions and extrinsic evidence on April 3, 2025; (2) filing the Joint Claim Construction and Prehearing Statement and serving claim construction expert reports on April 28, 2025; and (3) completing claim construction discovery on May 28, 2025. Dkt. #54. Thus, if the Court grants this Motion, the parties will have to revise these submissions to include the 12-'333 patent. *See Alzheimer's Inst. of Am.*, 274 F.R.D. at 276 (finding prejudice for addition of new patent where new claim construction required); *DCG Sys. v. Checkpoint Techs., LLC*, No. C 11-03792 PSG, 2012 WL 1309161, at *3 (N.D. Cal. Apr. 16, 2012) ("While an amendment may force [defendant] to research further the prior art, amend its invalidity contentions, and perhaps supplement its claim construction briefing that is due shortly, [plaintiff] is no position to object to appropriate accommodations in the pretrial schedule that might be required.").

In correspondence between the parties, Stryker/Inari has suggested that Imperative Care should treat the 12-'333 patent as if it is already in the case. But doing so would prejudice Imperative Care for several reasons. First, Imperative Care anticipates it will have some terms to propose for construction from the 12-'333 patent. However, the terms most

likely to impact this dispute will depend on the relevant prior art. Because the 12-'333 patent issued recently, Imperative Care is still searching for and reviewing the relevant prior art. Thus, it cannot fairly propose claims terms for the patent without more time.

Second, Imperative Care has already proposed 10 terms for construction from the asserted patents. If the 12-'333 patent is added to the case, Imperative Care will need to revise its list of terms for construction to comply with the Court's presumptive limit of 10 terms for construction. Stryker/Inari should not be required to hamstring itself on the ten asserted patents to accommodate an eleventh patent that is not yet part of the case.

Third, Stryker/Inari's growing list of asserted patents dramatically reduces the Court's ability to resolve the legitimate claim-construction disputes, as required by the Federal Circuit, without construing a burdensome number of claims. As explained above, the addition of the 12-'333 patent will increase the asserted claims to ***over 200***. If Stryker/Inari intends to continue adding claims, the Court should force Stryker/Inari to reduce the number of asserted claims before claim construction to reduce the ultimate burden on the Court. While Stryker/Inari argues this case has not yet reached the typical point of narrowing, (Dkt. #88 at 6), Stryker/Inari ignores the many cases requiring parties asserting a largeS number of claims to reduce the asserted claims before claim constructions. *Thought, Inc. v. Oracle Corp.*, No. 12-cv-05601-WHO, 2013 WL 5587559, *2 (N.D. Cal. Oct. 10, 2013) (requiring plaintiff to limit from "demonstrably unmanageable" 102 claims to 32 claims prior to construction); *Universal Elecs. Inc. v. Roku Inc.*, No. SACV 18-1580 JVS (ADx), 2019 WL 1878351, *3 (C.D. Cal. Mar. 14, 2019) (requiring plaintiff to limit from 106 claims to 25 claims prior to claim construction). Revising the case schedule will give the Court an opportunity to address this additional issue.

CONCLUSION

The Court should grant the Motion for leave to amend but only if it vacates the current case schedule so Inari/Stryker can finish prosecuting its patent applications and include in this case all the patents it desires to assert against Symphony as currently designed. At that point, the Court should set a new schedule.

Respectfully Submitted,

KNOBBE, MARTENS, OLSON & BEAR, LLP

Dated: March 26, 2025

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California Northern District

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