

12/08/01



12-17-01

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

A/PROV

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PROVISIONAL APPLICATION FOR PATENT COVER SHEET

This is a request for filing a PROVISIONAL APPLICATION FOR PATENT under 37 CFR 1.53(e).

Express Mail Label No. [Redacted]

Jc657 U.S. PTO
60/340062



INVENTOR(S)					
Given Name (first and middle (if any))		Family Name or Surname		Residence (City and either State or Foreign Country)	
Omar M.		Lattouf		Atlanta, GA	
<input type="checkbox"/> Additional inventors are being named on the _____ separately numbered sheets attached hereto					
TITLE OF THE INVENTION (500 characters max)					
Endoscopic Trans Thoracic Epicardiac, Endocardiac and Endo Aortic / Endovascular Interventional Therapy					
Direct all correspondence to: CORRESPONDENCE ADDRESS					
<input type="checkbox"/> Customer Number		[Redacted]		Place Customer Number Bar Code Label here	
OR					
<input checked="" type="checkbox"/> Firm or Individual Name		Omar M. Lattouf			
Address		2419 Highland Grove, NE			
City		State	GA	ZIP	30345
Country		Telephone	404.636.2948	Fax	404.636.9743
ENCLOSED APPLICATION PARTS (check all that apply)					
<input type="checkbox"/>	Specification	Number of Pages	[]	<input type="checkbox"/>	CD(s), Number
<input type="checkbox"/>	Drawing(s)	Number of Sheets	[]	<input type="checkbox"/>	Other (specify)
<input type="checkbox"/>	Application Data Sheet, See 37 CFR 1.76				
METHOD OF PAYMENT OF FILING FEES FOR THIS PROVISIONAL APPLICATION FOR PATENT					
<input checked="" type="checkbox"/>	Applicant claims small entity status. See 37 CFR 1.27.				FILING FEE AMOUNT (\$)
<input checked="" type="checkbox"/>	A check or money order is enclosed to cover the filing fees				\$80.00
<input type="checkbox"/>	The Commissioner is hereby authorized to charge filing fees or credit any overpayment to Deposit Account Number: []				
<input type="checkbox"/>	Payment by credit card. Form PTO-2038 is attached				
The invention was made by an agency of the United States Government or under a contract with an agency of the United States Government.					
<input checked="" type="checkbox"/>	No.				
<input type="checkbox"/>	Yes, the name of the U.S. Government agency and the Government contract number are: _____				

Respectfully submitted,
 SIGNATURE [Signature]
 TYPED or PRINTED NAME Omar M. Lattouf
 TELEPHONE 404.636.2948

Date 12-8-01
 REGISTRATION NO. (if appropriate) _____
 Docket Number: _____

USE ONLY FOR FILING A PROVISIONAL APPLICATION FOR PATENT

This collection of information is required by 37 CFR 1.51. The information is used by the public to file (and by the PTO to process) a provisional application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 8 hours to complete, including gathering, preparing, and submitting the complete provisional application to the PTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Box Provisional Application, Assistant Commissioner for Patents, Washington, D.C. 20231.

Express Mail # EK399057973US

FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$) **80.00**

Complete if Known

Application Number	To be assigned
Filing Date	12.8.2001
First Named Inventor	Omar M. Lattouf
Examiner Name	
Group Art Unit	
Attorney Docket No.	

METHOD OF PAYMENT	FEE CALCULATION (continued)																																																																																																																																																																																																
<p>1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</p> <p>Deposit Account Number: _____ Deposit Account Name: _____</p> <p><input type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p><input checked="" type="checkbox"/> Applicant claims small entity status See 37 CFR 1.27</p> <p>2. <input type="checkbox"/> Payment Enclosed:</p> <p><input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p>	<p>3. ADDITIONAL FEES</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Fee Code</th> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee Code</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>206</td><td>65</td><td>Surcharge - late filing fee or both</td><td></td></tr> <tr><td>127</td><td>60</td><td>227</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet</td><td></td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td>For filing a request for ex parte reexamination</td><td></td></tr> <tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>113</td><td>1,840*</td><td>113</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>115</td><td>110</td><td>215</td><td>65</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>116</td><td>400</td><td>216</td><td>200</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>117</td><td>920</td><td>217</td><td>460</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>118</td><td>1,440</td><td>218</td><td>720</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>128</td><td>1,960</td><td>228</td><td>980</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>119</td><td>320</td><td>219</td><td>160</td><td>Notice of Appeal</td><td></td></tr> <tr><td>120</td><td>320</td><td>220</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>121</td><td>280</td><td>221</td><td>140</td><td>Request for oral hearing</td><td></td></tr> <tr><td>158</td><td>1,510</td><td>138</td><td>1,510</td><td>Petition to Institute a public use proceeding</td><td></td></tr> <tr><td>140</td><td>110</td><td>240</td><td>65</td><td>Petition to revive - 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SUBMITTED BY		<i>Complete if applicable</i>	
Name (Print/Type)	Omar M. Lattouf	Registration No. (Attorney/Agent)	
Signature		Telephone	404.636.2948
		Date	12-8-2001

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231

Express Mail # EK 39905 7973US

Omar M. Lattouf MD PHD
2419 Highland Grove NE Atlanta, GA 30345
(Tel.404-636-2948) (Fax.404-636-9743)

Subject: Endoscopic Transthoracic Epicardiac, Endocardiac and Endoaortic/Endovascular Interventional Therapy.

Utilizing tiny incisions in the chest wall with the visualization aided by thoroscopes, the pericardium is opened and pacing leads are screwed on the epicardium then tunneled out of the ribcage and connected to a pacemaker that has been implanted under the skin.

I have clinically utilized this approach, successfully, in over ^{one}~~two~~-dozen patients so far.

Other applications for this surgical approach to include:

- 1) Trans-ventricular Endo-Aortic stenting for aortic dissections and aortic aneurysm therapy.
- 2) Removal of clots and vegetations of prosthetic valves.
- 3) Valve repair, and peri-valve leak repair.
- 4) Excision of heart tumors.
- 5) Endo-Ventricular heart assist devices implantation for treatment of heart failure.
- 6) Heart stem cell implantation and vascular growth factor implantation.
- 7) TMR laser treatment.
- 8) Ventricular septal defect (VSD) closure.



Omar M. Lattouf MD PHD

Express Mail #

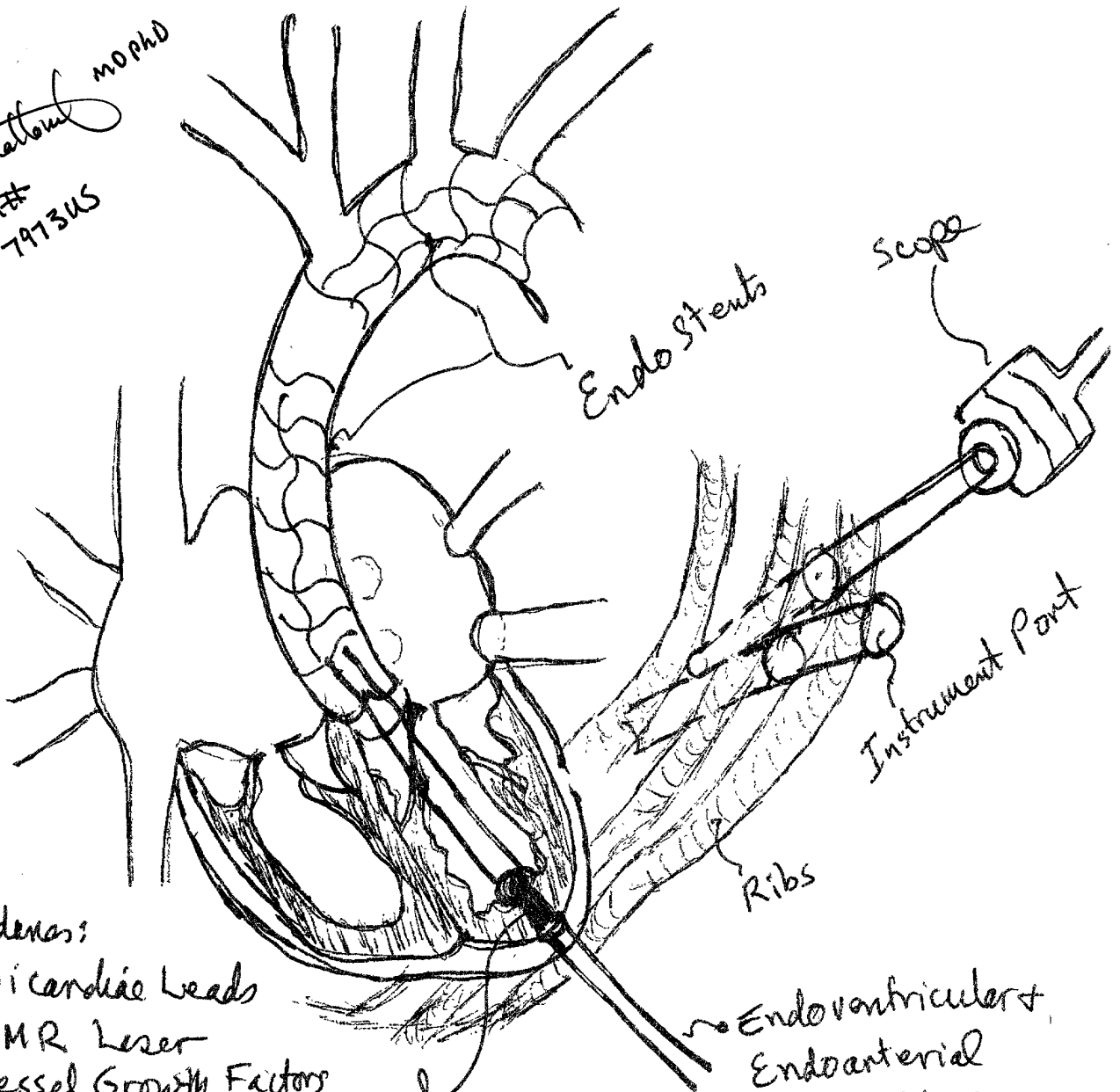
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December 8, 2001

(Page 1) Drawing
 Transcatheter Epicardial, Endocardial + Endo Aortic
 Interventional Procedures

Owen A. Talbot M.D.
 Expires Mail#
 EK 39905 7973US

FOBIET 29004E09



Procedures:

1. Epicardial Leads
2. TMR Laser
3. Vessel Growth Factors
4. Stem Cell Deposit
5. Valve Repair / Perivalve Leak Repair
 Transmural Valved Gateway
6. Removal of clots + vegetation of Prosthetic Valve
7. Endo Aortic Stenting for dissection + aneurysm therapy.

Endoventricular +
 Endoarterial
 Interventional
 Catheter