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11  
12 **IN THE UNITED STATES DISTRICT COURT**  
13 **FOR THE NORTHERN DISTRICT OF CALIFORNIA**  
14 **SAN JOSE DIVISION**

15  
16 INARI MEDICAL, INC.,

17 Plaintiff,

18 v.

19 IMPERATIVE CARE, INC.,

20 Defendant.  
21

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, 4<sup>th</sup> Floor

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25  
26 *Imperative Care v. Inari Medical*  
27 US Patent 11,969,333  
28 **Imperative Care Ex. 1047**

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

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

10 **I. INTRODUCTION**

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

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

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

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

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

## 22 **II. FACTUAL BACKGROUND**

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

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26  
27 <sup>1</sup> Imperative Care will also move to stay the litigation pending the outcome of its IPRs. A  
28 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.

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

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

13 Stryker/Inari served its infringement contentions on January 13, asserting 131 patent  
14 claims across the nine asserted patents. Ex. 5 at 3-4. On February 7, 2025, the last day to  
15 amend pleadings, Stryker/Inari filed its Second Amended Complaint, which added two more  
16 patents to the case. Dkt. #68. Stryker/Inari also dropped U.S. Patent No. 11,697,011 (“the  
17 ’011 patent”) from the complaint admittedly because of the PTO’s decision instituting an  
18 *inter partes* review (“IPR”) of the ’011 patent. Dkt #97 at 2 n.1. The PTO found a  
19 reasonable likelihood that Imperative Care would prevail in invalidating claims of the ’011  
20 patent. *See* Dkt. #89 (Supp. Brief discussing impact of IPR on PI Motion). With its Second  
21 Amended Complaint, Stryker/Inari also served supplemental infringement contentions,  
22 asserting an additional 50 patent claims for the two new patents, and bringing the total  
23 number of asserted claims in the case to 181. Ex. 6 at 3-4. Inari did not seek leave of Court  
24 to serve supplemental contentions even though the infringement-contention deadline in the  
25 Scheduling Order had passed.

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

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

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

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

18 On March 4, 2025, the patent at issue on this Motion, U.S. Patent 12,239,333 (“the  
19 12-’333 patent”), issued. Ex. 1 at Ex. W. A day later, Inari filed this Motion. Along with the  
20 Motion, Stryker/Inari also sent Imperative Care what it described as its second supplemental  
21 preliminary infringement contentions, which identified 21 more allegedly infringed patent  
22 claims from the 12-’333 patent. If added to the case, this new patent would bring the total  
23 number of asserted claims to **202**. Stryker/Inari did not seek leave of Court to amend its  
24 infringement contentions after the deadline and includes only a brief footnote in this Motion  
25 addressing such leave. Dkt. #88 at 2, n.3.

26 On March 13, 2025, the Parties exchanged proposed claim terms for construction, just  
27 10 days after the 12-’333 patent issued. Exs. 9-10. The Parties will complete several more  
28 claim construction tasks before this Motion is heard, including: (1) exchanging preliminary

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

4 On March 20, 2025, in an effort to narrow the issues on this Motion, Imperative Care  
5 wrote to Stryker/Inari to explain the prejudice caused by Stryker/Inari's strategy to serially  
6 assert patents against Symphony in this case, particularly that such strategy "prevents the  
7 Court from issuing final relief to Imperative Care so that it can keep selling Symphony." Ex.  
8 11 at 2-3. Imperative Care proposed, as it does in this Opposition, that "the parties agree to  
9 vacate the case schedule (except for the PI hearing and pending leave of Court) until  
10 Stryker/Inari has identified *all* the patents it will assert against Imperative Care relating to the  
11 sale of Symphony (not potential future products such as any blood return system)." *Id.* If  
12 Stryker/Inari agreed to the proposal, Imperative Care explained it would agree that all those  
13 patents should be asserted in this case. *Id.*

14 Stryker/Inari responded the next day that it "does not agree to entirely suspend the  
15 schedule ...." *Id.* at 2. Stryker/Inari again asserted that Imperative Care should treat the 12-  
16 '333 patent as if it was already part of the case and propose claim terms for construction. *Id.*  
17 Stryker/Inari also represented that it "cannot commit at this stage that it will not seek leave to  
18 amend the complaint again at any time in the future." *Id.*

### 19 **III. THE COURT HAS BROAD DISCRETION TO SET THE CASE SCHEDULE**

20 District courts have inherent power to control their docket and calendar. *Yong v.*  
21 *I.N.S.*, 208 F.3d 1116, 1119 (9th Cir. 2000). This includes "broad discretion in supervising  
22 the pretrial phase of litigation" and "broad discretion to grant or deny leave to amend[.]"  
23 *Zivkovic v. S. Cal. Edison Co.*, 302 F.3d 1080, 1087 (9th Cir. 2002); *Mir v. Fosburg*, 646 F.2d  
24 342, 347 (9th Cir. 1980). In considering whether an amendment is proper, "it is the  
25 consideration of prejudice to the opposing party that carries the greatest weight." *Eminence*  
26 *Cap., LLC v. Aspeon, Inc.*, 316 F.3d 1048, 1052 (9th Cir. 2003). Courts have found prejudice  
27 exists where an amendment would disrupt the current claim construction proceedings.  
28 *Alzheimer's Inst. of Am. v. Elan Corp. PLC*, 274 F.R.D. 272, 276 (N.D. Cal. 2011); *see also*

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

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

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

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

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

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

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

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

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

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

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

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

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

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

5 If the Court is not inclined to vacate the current schedule and wait for the completion  
6 of Stryker/Inari's patent prosecution as proposed above, the Court should at least revise the  
7 current case schedule to accommodate adding the 12-'333 patent. *See e.g., Ziptronix, Inc. v.*  
8 *Omnivision Techs., Inc.*, No. 10-cv-05525-SBA, 2012 WL 3155554, \*3 (N.D. Cal. Aug. 2,  
9 2012) (amending the schedule to accommodate new patents); *Sage Electrochromics, Inc. v.*  
10 *View, Inc.*, No. 12-cv-6441-JST, 2014 WL 1379282, \*7 (N.D. Cal. Apr. 8, 2014) (finding  
11 where amended claims would prejudice defendant, modified case schedule is required).

12 The parties have already exchanged proposed claim terms for construction. Exs. 9-10.  
13 And the parties will complete several more claim construction submissions before this  
14 Motion is heard on May 28, 2025, including: (1) exchanging preliminary claim constructions  
15 and extrinsic evidence on April 3, 2025; (2) filing the Joint Claim Construction and  
16 Prehearing Statement and serving claim construction expert reports on April 28, 2025; and (3)  
17 completing claim construction discovery on May 28, 2025. Dkt. #54. Thus, if the Court  
18 grants this Motion, the parties will have to revise these submissions to include the 12-'333  
19 patent. *See Alzheimer's Inst. of Am.*, 274 F.R.D. at 276 (finding prejudice for addition of new  
20 patent where new claim construction required); *DCG Sys. v. Checkpoint Techs., LLC*, No. C  
21 11-03792 PSG, 2012 WL 1309161, at \*3 (N.D. Cal. Apr. 16, 2012) ("While an amendment  
22 may force [defendant] to research further the prior art, amend its invalidity contentions, and  
23 perhaps supplement its claim construction briefing that is due shortly, [plaintiff] is no position  
24 to object to appropriate accommodations in the pretrial schedule that might be required.").

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

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

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

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

## 24 CONCLUSION

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

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Respectfully Submitted,

KNOBBE, MARTENS, OLSON & BEAR, LLP

Dated: March 26, 2025

By: /s/ Joseph R. Re

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**Sent:** Wednesday, March 26, 2025 2:08 PM

**To:** [efiling@cand.uscourts.gov](mailto:efiling@cand.uscourts.gov)

**Subject:** Activity in Case 5:24-cv-03117-EKL Inari Medical, Inc. v. Imperative Care, Inc., et al Opposition/Response to Motion

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**U.S. District Court**

**California Northern District**

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The following transaction was entered by Re, Joseph on 3/26/2025 at 2:07 PM and filed on 3/26/2025

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**Case Number:** [5:24-cv-03117-EKL](#)

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#### **Docket Text:**

**[OPPOSITION/RESPONSE \(re \[88\] MOTION for Leave to File \*Third Amended Complaint\*\) filed byImperative Care, Inc.. \(Re, Joseph\) \(Filed on 3/26/2025\)](#)**

**5:24-cv-03117-EKL Notice has been electronically mailed to:**

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