

06-09-1999



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RECORDATION FORM COVER SHEET  
TRADEMARKS ONLY

U.S. DEPARTMENT OF COMMERCE  
Patent and Trademark Office

2

Department of Patents and Trademarks. Please record the attached original document or copy thereof.

conveying an interest:

1. Name and Address of Party(ies) conveying an interest:  
 Name: Surgical Data management Corporation  
 Street Address: \_\_\_\_\_  
 Internal Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

2. Name and Address of Party(ies) receiving an interest:  
 Name: Care Management Science Corporation  
 Street Address: 3600 Market Street  
 Internal Address: \_\_\_\_\_  
 City: Philadelphia State: Pennsylvania Zip: 19104

Individual(s)  General Partnership  
 Association  Limited Partnership  
 Corporation Virginia  
 Other

Additional name(s) of conveying party(ies) attached?  Yes  No

3. Nature of Conveyance: 5-36-99  
 Assignment  Merger  
 Security Agreement  Change of Name  
 Other Correction To The Assignment of Trademark

Effective Date: December 12, 1998

Individual(s) citizenship \_\_\_\_\_  
 Association \_\_\_\_\_  
 General Partnership \_\_\_\_\_  
 Limited Partnership \_\_\_\_\_  
 Corporation \_\_\_\_\_ Pennsylvania  
 Other \_\_\_\_\_

Additional name(s) & address(es) attached?  Yes  No

4. Application number(s) or registration number(s):  
 A. Trademark Application No.(s): N/A  
 B. Trademark Registration No.(s): 1,948,692

Additional numbers attached?  Yes  No

5. Name and address of party to whom correspondence concerning document should be mailed:  
 Name: Mark H. Webbink, Esq.  
 Internal Address: Moore & Van Allen, PLLC  
 Street Address: 2200 West Main Street, Suite 800  
 City: Durham State: NC ZIP: 27705

6. Total number of applications and registrations involved: 1

7. Total fee (37 CFR 3.4): ..... \$ 40.00  
 Enclosed  
 Authorized to be charged to deposit account  
 (Any Deficiency)

8. Deposit account number:  
13-4365  
 (Attach duplicate copy of this form if paying by deposit account):

DO NOT USE THIS SPACE

9. Statement and signature.  
*To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.*

Mark H. Webbink, Esq. [Signature] 4/30/99  
 Name of Person Signing Signature Date

Total number of pages including cover sheet, attachments and document: 7 **40E**

Mail documents to be recorded with required cover sheet information to:  
 Commissioner of Patents and Trademarks  
 Box Assignments  
 Washington, D.C. 20231

00000119 1948692  
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CERTIFICATE OF MAILING

I hereby certify that this paper is being deposited with the United States Postal Service as first class mail in an envelope addressed to the Commissioner Of Patent And Trademarks, Washington, DC 20231, BOX ASSIGNMENTS.

TIM KROLL  
 (Typed or printed name of person signing the certificate)

[Signature]  
 (Signature of the person signing the certificate)

4/30/99  
 (Date of Signature)

16/08/1999 NTHA11  
11 FC:481

01-27-1999



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### RECORDATION FORM COVER SHEET TRADEMARKS ONLY

TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

#### Submission Type

New MRO  
1-27-99

Resubmission (Non-Recordation)  
Document ID #

Correction of PTO Error  
Reel #  Frame #

Corrective Document  
Reel #  Frame #

#### Conveyance Type

Assignment  License

Security Agreement  Nunc Pro Tunc Assignment

Merger Effective Date  
Month Day Year  
12/12/98

Change of Name

Other

#### Conveying Party

Mark if additional names of conveying parties attached

Execution Date  
Month Day Year

Name

Formerly

Individual  General Partnership  Limited Partnership  Corporation  Association

Other

Citizenship/State of Incorporation/Organization

#### Receiving Party

Mark if additional names of receiving parties attached

Name

DBA/AKA/TA

Composed of

Address (line 1)

Address (line 2)

Address (line 3)

City

State/Country

Zip Code

Individual  General Partnership  Limited Partnership  Corporation  Association

Corporation  Association

Other

If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative should be attached. (Designation must be a separate document from Assignment.)

Citizenship/State of Incorporation/Organization

01/27/1999 DMGUYEN 00000325 500754 1948692

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**Domestic Representative Name and Address**

Enter for the first Receiving Party only.

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

**Correspondent Name and Address**

Area Code and Telephone Number

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

**Pages** Enter the total number of pages of the attached conveyance document including any attachments. #

**Trademark Application Number(s) or Registration Number(s)**

Mark if additional numbers attached

Enter either the Trademark Application Number or the Registration Number (DO NOT ENTER BOTH numbers for the same property).

Trademark Application Number(s)

Registration Number(s)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="1948692"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Number of Properties** Enter the total number of properties involved. #

**Fee Amount** Fee Amount for Properties Listed (37 CFR 3.41): \$

Method of Payment: Enclosed  Deposit Account

Deposit Account

(Enter for payment by deposit account or if additional fees can be charged to the account.)

Deposit Account Number: #

Authorization to charge additional fees: Yes  No

**Statement and Signature**

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. Charges to deposit account are authorized, as indicated herein.

Howard A. Jacobson

Name of Person Signing

Signature

1/14/99

Date Signed

ASSIGNMENT OF TRADEMARK

This ASSIGNMENT OF TRADEMARK AND ACCOMPANYING GOODWILL ("Assignment") is made effective the 12<sup>th</sup> day of DECEMBER 1998 ("Effective Date"), by Surgical Data Management Corporation, a Virginia corporation and its subsidiaries and affiliates, with offices at 810 Three Chopt Road, Richmond, Virginia 23288 ("SDM") to Care Management Science Corporation, a Pennsylvania corporation and its subsidiaries and affiliates, with offices at 3600 Market Street, Philadelphia, Pennsylvania 19104 ("CMS").

WHEREAS, CMS and SDM have entered into that certain Assignment and License Agreement effective on or about the Effective Date ("Agreement"); and

WHEREAS, SDM is the owner of the PTO Trademark Registration Number 1,948,692 ("CADUCEUS Registration") for the mark CADUCEUS and claims ownership of this trademark, service mark, and trade name and all word, stylized and design marks incorporating the word "Caduceus" or any abbreviation or phonetically or orthographically similar form thereof, as used by SDM ("CADUCEUS Mark") and all applications and registrations of the CADUCEUS mark made or obtained in the name of SDM (or any affiliate, officer, director, successor, predecessor, or representative of them) from any authority or agency; and

WHEREAS, pursuant to the Agreement, SDM has agreed to assign to CMS all of its claimed right, title, and interest in and to the CADUCEUS and all applications and registrations of the CADUCEUS mark made or obtained in the name of SDM (or any affiliate, officer, director, successor, predecessor, or representative of them).

NOW, THEREFORE, in consideration of the mutual covenants and premises made in the Agreement and for other good and valuable consideration, receipt of which SDM acknowledges by its execution below, SDM assigns to CMS all its right, title and interest in and to the CADUCEUS and all applications and registrations of the CADUCEUS mark made or obtained in the name of SDM (or any affiliate, officer, director, successor, predecessor, or representative of them) together with the goodwill associated with and symbolized by the CADUCEUS mark. SDM further assigns to CMS all claims, demands, causes of action, damages, and appurtenant rights that SDM has or may have against any person or entity arising from or related to the CADUCEUS mark.

Care Management Science Corporation  
By: [Signature]  
Name: RONALD A. PARUS  
Title: PRESIDENT  
Date: 12/14/98

Surgical Data Management Corporation  
By: [Signature]  
Name: TERRY L. WHIPPLE  
Title: CEO  
Date: 12-12-98