Exhibit 28

UNITED STATES DISTRICT COURT

NORTHERN DISTRICT OF CALIFORNIA

THE BOARD OF TRUSTEES OF THE :
LELAND STANFORD JUNIOR :
UNIVERSITY :
Plaintiff :
v. : Case No.
ROCHE MOLECULAR SYSTEMS, et al: C 05 04158 MHP
Defendants :

* * * * * * * * * * *

ROCHE MOLECULAR SYSTEMS, et al:
Counterclaimants :
v. :
THE BOARD OF TRUSTEES OF THE :
LELAND STANFORD JUNIOR :
UNIVERSITY; THOMAS MERIGAN; :
AND MARK HOLODNIY :
Counterclaim Defendants :

Deposition of JEFFREY DAVID LIFSON, M.D.

Baltimore, Maryland

Wednesday, September 5, 2007

9:05 a.m.

Job No.: 399424

Pages: 1 - 102

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A Yes.
Q Does the article show correlations between quantitative HIV RNA measurements and therapeutic efficacy?
A No.
MR. CANNON: Object to the form of the question.
Q I'm sorry, could you repeat your answer?
A No.
Q Are you aware of any article in the PCR Protocols book that does show any correlations between quantitative HIV RNA copy numbers and therapeutic efficacy?
MR. CANNON: Object to the form of the question. Lacks foundation.
A Again, without having a clear understanding of what's intended by the term therapeutic efficacy it's hard to answer the question, but I don't believe there's anything in there that even approaches the question.
Q Are you aware of any articles prior to May of 1992 that correlated quantitative HIV RNA copy number analysis with therapeutic effectiveness?
MR. CANNON: Object to the form of the question. Lacks foundation.

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A Can you repeat the question again? I just want to make sure I understand exactly what you're asking.
Q Sure, sure.
Are you aware of any articles prior to May of 1992 that correlated quantitative HIV RNA copy number analysis with therapeutic effectiveness?
MR. CANNON: Same objections.
A So the same point about the term therapeutic effectiveness not really being defined is problematic here as well, so from that perspective I'm not aware of any article that, that did define that in that time. In that time frame there were a number of antecedent articles using a variety of other virologic techniques suggesting that treatment might result in a measurable decrease in a measurable parameter of the amount of virus in blood samples.
Q Are you done?
A Yes.
Q Were you aware of the publications that were being issued at that time?
MR. CANNON: Object to the form of the question.
MR. DAMSTEDT: Let me strike that.
Q In this article -- there were a number of

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publications being published about quantitative PCR analyses, correct?
A I'm sorry, say that again.
Q Yeah, let me strike that one, too.
At that time you kept up-to-date on the publications that were being published about PCR, correct?
A I certainly made a well-intentioned effort to do so, yes.
Q And you did in fact do so, correct?
A To the best of my ability, yes.
Q What's the ordinary meaning of the word measuring to a person of ordinary skill in May of 1992?
A In the specific context of quantitative PCR, is that the person of ordinary skill we're referring to?
Q Sure, we'll try that one.
Let me rephrase the question. We'll do that one later.
What's the ordinary meaning of the word measuring to a person of ordinary skill in May of 1992?
MR. CANNON: Object to the form of the question. Same objections as before.

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A As applied to quantitative PCR?
Q In the field that was identified by you for persons of ordinary skill in the art.
A I would say to perform a PCR manipulation and then to perform an intervention to get some sort of a quantitative parameter derived from the manipulation.
Q Has the ordinary meaning of that term, the word measure, to a person of ordinary skill in the art changed since May of 1992?
A I think that the underlying concept of performing a manipulation in order to derive a measurement has not changed. What has changed dramatically is the nature of the manipulations that would be performed today to obtain that measurement.
Q Okay. So your testimony is that the techniques that may be used to measure have changed, but that the meaning of the word measuring itself has not changed; is that correct?
MR. CANNON: Object to the form of the question.
A I don't want to belabor a semantic point, but I think the nature of the techniques used has changed in a sufficiently dramatic way that the nature of the measurements, to me as someone who works in

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this field, is different. The basic idea of trying to measure something is the same, but how we go about it these days is very, very different.
Q And to, I guess push a semantic point just a bit, the word measuring is used in applications today just as it was used in applications in May of 1992; correct?
MR. CANNON: Object to the form of the question.
A Actually wherever possible I sort of prefer, rather than use a vague term like measuring, to talk about, you know, quantifying some specific thing that's being analyzed and defining it operationally in the context of a specific assay or measurement technique.
Q You call the term measuring vague. Isn't it true that it's in fact a broad term?
A If by that you mean that it can have many meanings, yes.
Q And the term measuring can include a wide range of different types of measurements, correct?
MR. CANNON: Object to the form of the question. Are you saying as the term is used in the patent claims or just independent of the patent claims?

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A Could you clarify that point?
Q Let's talk first about the ordinary meaning of that term to a person of ordinary skill in the art. That can be used in a wide range of different types of measurements, correct?
A I suppose so. I'm not sure I quite understand your question.
Q Measuring is a broad term that encompasses a wide variety of different types of measurements --
MR. CANNON: Object to the form of the question.
Q -- isn't that correct?
MR. CANNON: Object to the form of the question. I don't know if you're asking him about the patent -- term used in the patent, or the term separate from the patent.
MR. DAMSTEDT: Those are speaking objections, Brian. I'll have to ask you to cut down just a little bit.
Q Anyway, you can answer.
A I'm sorry, could you -- could you repeat the question?
Q So measuring is a broad term that encompasses a wide variety of different types of measurements; isn't that correct?

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A As a general term used in common language, measuring, you know, could apply to various different measurements, I suppose.
Q And as applied in the field of art to a person of ordinary skill that's also true; isn't that correct?
MR. MARTER: Object to the form of the question.
A So again, in the context that we've gone now from general language to the context of in terms of the patent and one of skill in the art measuring now, I think for one of skill in the art, part of that art is, you know, understanding, you know, what is the particular approach to measurement that's under consideration.
Q But there --
A Otherwise the term is sufficiently vague to not be operationally useful.
Q In your view, did the patents and prosecution history use the term measuring in a broad sense to encompass a variety of different types of measurements?
MR. CANNON: Object to the form of the question.
A Based on my review of the patents and

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portions of the prosecution history, everything seems to be referenced back to a particular measurement technique that is spelled out in the specification of the patents and in some of the published papers from the group, which is basically an endpoint PCR with a non-isotopic detection step and external standard for the quantification step.
Q In your Declaration did you identify any portion of the patent or any portion of the prosecution history where the patentee redefined the term measuring to mean only the measurement techniques we described in the written description?
MR. CANNON: Objection to the form of the question. Assumes facts not in evidence.
A No, I -- I believe that in the Declaration I point out that the only one that seems to be referenced, and referenced repeatedly, is the particular technique I just described.
Q But is there anyplace where in the patent or the prosecution history the patentee says, measuring is normally a broad term that can be applied to a variety of different measurements, but when we use the term measure, we really mean it only to mean the particular assay that we've discussed?
MR. CANNON: Object to the form of the

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PCR-based methods for attempting to quantify a target, but they differ from each other in fundamental ways. And so if that's what you mean by are there different kinds of PCR, then the answer would be yes.
Q Okay. What other kinds of PCR are there?
MR. CANNON: Object.
Q Let me rephrase it.
You talked about endpoint PCR with external control, endpoint PCR with internal control, and realtime PCR. Are there any other general types of PCR of which you're aware?
A Quantitative competitive PCR would be another category. For quantification -- quantitative applications and for nonquantitative applications, there are all different kinds of -- different varieties for different specific applications.
So PCR is a very versatile technique that's been adapted to a lot of different applications.
Q Is endpoint PCR a term that's used by persons of skill in the art today?
A Yeah.
Q Is it a term that was used by persons of skill in the early 1990s?
A Uh-huh.
Q I'm sorry?

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A Yes. Sorry.
Q So that was a term that people knew of and were aware of in May of 1992?
A It was a term that I and my colleagues would use with each other to describe the type of assay we've been discussing, yes.
Q Was it generally known?
A I believe so, yes.
Q Do you agree that endpoint PCR is within the scope of the claims of the patents-in-suit?
MR. CANNON: Object to the form of the question. Calls for a legal conclusion.
A Certainly the assay that's described in the patents is an endpoint PCR assay.
Q So as used in the patents-in-suit, PCR includes at least endpoint PCR; is that correct? Is that your testimony?
A That's what's described in the patents, yes.
Q I'm asking a slightly different question. So as used in the patents-in-suit, PCR includes at least endpoint PCR; is that correct?
MR. CANNON: Objection. Lacks foundation.
A Since that's the only thing that's described or referenced, it seems that that's what is intended by the use of PCR in the context of the patent.

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Q Do you agree that realtime PCR is within the scope of the claims of the patents-in-suit?
MR. CANNON: Object to the form of the question.
A I consider myself qualified to assess technical questions, and from that perspective, realtime PCR is conceptually different from endpoint PCR in a very, very fundamental way. The technical execution is fundamentally different. And there's nothing in the published papers or the patents that, to me, either states or implies anything having to do with realtime PCR, which is based on a fundamentally different principle than endpoint PCR, being a kinetic assay rather than an endpoint assay.
Q Let's go to your Declaration for a second.
A Uh-huh.
Q The basis for your opinion in your Declaration that realtime PCR is not covered by the claims is that realtime PCR was not yet developed in May of 1992 and that all the claims refer to 30 cycles of PCR or about 30 cycles of PCR; is that correct?
A Just turning to the relevant text.
Q Please.
A Okay, I found it. I'm sorry, could you repeat the question?

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Q Yeah. The basis for your opinion that realtime PCR is not within the scope of the claims of the patents-in-suit is that realtime PCR was not yet developed in May of 1992 and that all the claims refer to 30 cycles of PCR or about 30 cycles of PCR; is that correct?
A So my understanding is that the use of realtime PCR for quantitative applications was neither developed or known within the field in 1992. The patents and the published papers, again, all reference an endpoint PCR assay based on 30 or around 30 cycles of amplification with an endpoint measurement as the basis for quantification. And realtime PCR is based on a series of ongoing measurements through the course of the PCR reaction using a non-invasive quantification technique, and the basic principle of measurement consists not in measuring the amount of PCR product that's accumulated at the end of a fixed number of amplification cycles, but rather determining the amplification cycle at which you first achieve an above-background measurable amount of product.
So it's a -- for me, a fundamentally different approach to, to things, and there's nothing in the patent that would lead me to that.
Q Okay. So I want to be clear about what

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the specification of the patents and the supporting publications, yes.
Q I'm going to read again from a bit of your Declaration. It's the end of the first sentence where you say specifically the HIV standards and methods then available and/or described.
A I'm sorry, where are you?
Q Oh. I am in the first sentence of Paragraph 46.
A Still on 46. Okay.
Q Yeah. And the end of that sentence says, specifically the HIV standards and methods then available and/or described for quantification.
A Uh-huh.
Q So by HIV standards and methods then available, what were your referring to?
A The methods that are referenced in the patent specification and publications are endpoint PCR as we've discussed.
Q So by publications, are you talking about only things that were referenced in the patent itself, or are you talking about publications more generally?
A I guess for me as one skilled in the art reading the material, I understood the methods referenced in the paper and publication and related

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methods. So if you had done an endpoint PCR and instead of the horseradish peroxidase conjugated detection probe you used an alkaline phosphatase detection probe, it would still be an endpoint PCR with non-isotopic detection in those methods, and that was my understanding of what I intended there. That was how I read the patent.
Q So in your Declaration, using the phrase then available really means available and related in some sense to the assay that's actually disclosed?
A Then available to do what they describe in the patent.
Q How did you determine which assays were sufficiently related to what was disclosed in the patent to qualify as being within the scope of the patent claims?
A I made that distinction based on my accumulated expertise of working in the field for a number of years on the conceptual principle of measurement that was involved.
Q So how did you choose which techniques were sufficiently close and which techniques weren't?
A Endpoint PCR with an external standard quantification of the amplified product at the end of the assay to me, even with variations on that, to me

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seemed within the scope of things. Something that relied on an alternative principle of measurement didn't seem to be stated or implied in the patent.
Q Well, what I'm trying to get at is how -- what principle did you use to distinguish between what was described in the patent and what you say is outside what was described in the patent?
MR. CANNON: Objection. Asked and answered.
A The principle of measurement.
Q What do you mean by principle of measurement?
A The basis for quantification.
Q So how that assay specifically worked to measure the HIV RNA; is that what you're saying?
A The underlying conceptual principle for the quantitation, yes.
Q Continuing in Paragraph 46, the next sentence reads, since that time numerous improvements have been incorporated into quantitative PCR assays for HIV. For example, including the use of internal controls and armored RNA standards, and I'll end there.
In using the phrase "for example" and "including", are you intending to limit your opinion as to only those two improvements, or are there other

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improvements?
A That was not intended to be a limiting example.
Q And that's because you were -- you used the word includes, or including, excuse me; is that correct?
A It wasn't intended to be a limiting example. Just an example.
Q And the way that you stated that it wasn't intended to be a limiting example was by using the words "for example" and "including", correct?
MR. CANNON: Objection. Asked and answered.
A I am just a scientist and I'm reluctant to pars language with a lawyer. The -- it was written to be an example, not a limiting example. And I don't have an opinion on the exact grammatical construction, I'm sorry.
Q Yeah. To your view as a scientist, using the term including was not intended to be limiting; is that correct?
MR. CANNON: Objection. Asked and answered.
A That's correct, it was not intended to be limiting.
Q I want to talk a little bit about the specific examples you used. The JID article describes

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a CRNA gag gene construct as one of the standards that's used in quantification; is that correct?
A Uh-huh. Yes.
Q Could the CRNA construct have been used as an internal control?
MR. CANNON: Objection. Incomplete hypothetical.
A Could it technically have been used as an internal control? Is that your question?
Q Yes.
A I think there's -- there are -- to use it as an internal control would entail two elements, I think. One is the -- it being technically adequate to be employed as an internal control, and also sort of the understanding and notion that it was possible, useful and desirable to use as an internal control.
Q Okay. Well, let's break those out. Was the CRNA construct technically adequate to have been used as an internal control?
MR. MARTER: Objection. Incomplete hypothetical.
A In principle that construct could be, could be used that way. We and others have used similar constructs as internal controls.
Q Going to the second element, see if I've got

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this. Would it, or could it have been possible, useful and/or desirable to use the CRNA construct as an internal control?
MR. CANNON: Objection. Incomplete hypothetical.
A There is nothing in anything in the specifications in the patent or any of the supporting publications that indicated to me that the authors considered it to be potentially useful or helpful to do so.
Q What's the benefit of using an internal control?
MR. CANNON: Objection. Lacks foundation.
A An internal -- an internal control provides you with some experimental feedback as to the adequacy of certain aspects of your procedure. As an example, if you were to simply run an assay without an internal control and to obtain a result that was below the threshold of your assay, that it scored less than your threshold, it is possible that that could be because the amount of a target template and your starting sample was actually below the threshold of your assay. It could also be possible that there was something in your sample that was inhibiting the reverse transcription reaction and/or the PCR amplification

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reaction.
If you include an RNA standard internal control in the assay and that also fails to give you amplified product, then you know there was a problem with the assay. If you get the expected result from the spiked internal control but still have a below-threshold result for your test sample, it raises your level of confidence that that's a true negative result and not due to problems with the procedure.
Q Was the distinction between internal and external controls known generally in the field prior to May of 1992?
A There were certainly publications of procedures employing internal controls prior to May of 1992.
Q And did those publications relate to PCR -- PCR quantitative assays for HIV?
A I can't answer that question specifically as of May of '92 without reviewing the literature.
Q Can you answer the question as to PCR assays generally? Were there publications as of May of 1992 in which quantitative PCR assays included an internal control?
A Yes.
Q Let me go back a bit. I'm just trying to

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understand the logic behind your reasoning that a person of ordinary skill would not understand these improved techniques as you -- these improvements as you describe them for measuring to be within the scope of the term measuring.
So is it your understanding that the scope of a patent's terms can never be construed to include later improvements?
A We're getting into a question of law that's outside of my expertise.
Q Is it your understanding that improvements cannot infringe an earlier patent?
MR. CANNON: Objection. Lacks foundation.
A Same answer.
Q And is it your understanding that the scope of a claim term is limited to the specific examples that are described in the written description?
A Again, that's a legal question, not a technical one, and I don't have an answer for you.
Q So your opinion is that the assay that was specifically disclosed in the JID article and the additional assays that were disclosed in the patent specifications are different from some other assays; is that correct?
MR. CANNON: Object to the form of the

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quantify HIV, yes.
MR. CANNON: I'd like to take a short break.
(Break taken.)
BY MR. DAMSTEDT:
Q In your Declaration, do you offer any opinion or explanation as to what the term qualitative result means?
A Not as such. If you look at Paragraph 45, that is -- deals with testing for the presence or testing for the absence of a particular target sequence.
Q Okay. Let's turn to that part. Paragraph 45 states, to the extent that testing for the presence or testing for the absence are interpreted to refer to quantification of HIV RNA, it is also my opinion that those terms would have been understood to mean that HIV RNA was detectably present or absent based on an endpoint RT PCR assay of a fixed sensitivity.
Did I read that correctly?
A That's correct.
Q What did you mean by the term detectably present or absent?
A As laid out in the specification and the supporting publications, there is a threshold sensitivity that's repeatedly cited based on the

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optical density in the horseradish peroxidase readout reaction. I believe the value is 0.135, reflecting the average of HIV-negative samples plus, I believe three standard deviations. And if the signal in the assay is that level or less, the assay can distinguish between a positive or a negative result.
Q Speaking more generally, what does the term detectably present or absent mean?
A It means that the test target sequence can be reliably quantified in the sample, test sample using a particular assay. But those terms -- as I've alluded to before, those terms are problematic if they're not used in reference to a particular assay because let's say that we have a sample that has 5,000 copies of a target sequence in it. If we test it in an assay that has a low sensitivity, it may be detectably present. If we test it in another assay that has a higher sensitivity above the copy number that's present in the sample, it won't be detectably present. It will be the same sample.
Q So in your opinion, detectably present refers to whether or not the quantitative HIV RNA is above or below the specific threshold sensitivity for that -- for a particular assay; is that correct? Did I --

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A No. What I'm trying to say is that if the terms aren't used in reference to a particular assay, they're not meaningful.
Q But when they are used in reference to a particular assay, the term simply refers to HIV copy numbers being above or below the threshold sensitivity of that particular assay; is that correct?
A Yes.
Q When did you come up with the opinions that you list in your Declaration?
A Through the month of August of this year.
In reference to providing an opinion here?
Q Yes.
A Through the month of August of this year.
Q Did you participate in drafting a Disclosure of the expert testimony that you might provide with counsel?
MR. CANNON: Object to the form of the question. To the extent we're getting into areas that are outside of our mutual agreement with respect to expert discovery, I object.
Answer the question if you can.
A I'm sorry, could you say the question again?
Q Are you aware that there was a Disclosure of testimony that you might provide that was made to the

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Court and to Stanford?
A Yes.
Q Did you participate in drafting that Disclosure?
MR. CANNON: Object to the form of the question.
A I had a telephone conversation with Mr. Cannon that -- I think some of the ideas from that telephone conversation may have been incorporated into that Disclosure.
Q Did you come up with any new opinions that are disclosed in your Declaration after the Expert Disclosure was filed?
MR. CANNON: Object to the form of the question. Lacks foundation.
You can answer it if you can.
A I'm sorry, could you say that again?
Q Yeah. Did you come up with any new opinions that are disclosed in your Declaration after the Disclosure was filed with the Court?
MR. CANNON: Object to the form of the question.
A I would have to review the exact timing of things to answer the question.
Q Sure.

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MR. DAMSTEDT: Handing to the Court Reporter Roche's Patent Local Rule 4-3(d) Disclosure. It lists at the top that it was filed July 6th, 2007.
(Exhibit No. 699 was marked for identification and was attached to the transcript.)
BY MR. DAMSTEDT:
Q Have you had a chance to review that document?
A I'm reviewing it now.
(Reviewing.)
Yes.
Q So does that refresh your recollection as to about when the Disclosure was filed?
A It does.
Q And so my question is, did you come up with any new opinions that are in your Declaration after that Disclosure was filed?
MR. CANNON: Object to the form of the question. Document speaks for itself. Both sets of documents speak for themselves.
A I would reiterate that that -- and clarify my recollection on the timing of working on the Declaration through July and August, and I think the -- I don't -- I don't believe that there is any fundamentally new interpretation presented in the

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Declaration that isn't at least outlined in the Disclosure.
Q Is there any statement in your Disclosure about the terms presence, or testing for the presence of HIV encoding nucleic acid or testing for the absence of -- excuse me or absence of HIV encoding nucleic acid being limited to endpoint PCR?
A I'm sorry, did you say Disclosure or Declaration?
Q Disclosure.
A Because at least as I understand it, this isn't my Disclosure in the sense that I didn't prepare the document.
Q Yeah, let me rephrase the question. Is there anything in that Disclosure that says you're going to testify about testing for the presence of HIV encoding nucleic acid or the term absence of HIV encoding nucleic acid and that you will testify that those terms are limited to endpoint PCR?
MR. CANNON: Object to the form of the question. The document speaks for itself. Asked and answered.
A There is nothing in here that explicitly addresses that question. There's a general sentence that says Doctor Lifson may also point out aspects of

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the patents that bear on each of the terms, which seems it might generally cover the topic but there's nothing specifically relating to the presence or absence.
Q Anything specifically related to armored RNA standards?
A No.
Q I want to have you look at the JID article. That may take me a second to find it. I'm sorry.
A Uh-huh.
MR. DAMSTEDT: This one has already been marked as Exhibit 1, so we'll just hand it over.
Q It's your opinion, if I understand it correctly, that the JID article discloses a threshold level of sensitivity of 40 copies per 200 microliters; is that correct? Is that your opinion?
A What it actually discloses is a -- (reviewing) -- discloses a threshold sensitivity on the second page, the first partial paragraph, of an optical density absorbance cutoff of .135 optical density units which -- so that's the sensitivity that's --
Q Can you point any -- I'm sorry, were you finished?
A So it's in the second page of the article

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below that graph --
Q Uh-huh.
A -- that first partial paragraph, and there the optical density of .135 is what they define as their cutoff that they're, in their reconstruction experiments they say satisfy 30 cycles of amplification, ten tissue culture infectious dose 50 units of HIV, 100 copies of CRNA, and 10 copies of HIV plasma DNA gave an absorbance greater than a negative absorbance cutoff 0.135 defined as the mean absorbance obtained from 15 sera negative sera 0.084, plus or minus 0.017, plus three standard deviations.
Q So what I'm looking for is, is there anywhere in the JID article that says that that absorbance level of 0.135 corresponds to 40 HIV RNA copy per 200 microliters of sample?
A (Reviewing.)
I'm looking for it. I think that -- I think there is.
(Reviewing.)
Q Please feel free to take as much time as you need.
A (Reviewing).
Can I have a copy of the JCI paper?
Q Sure.

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I don't seem to have it in the materials I brought down --
A Okay.
Q -- but you do have the patents.
A Yeah.
Q I guess -- I mean the question really was is there anything in the JID article that you can find?
A That specifically reference --
Q -- 40 copies per 200 microliters?
A It references the negative absorbance cutoff in the optical density, which I believe in the JCI paper and the patents -- and that's what I was looking for -- the authors link a sensitivity of 40 copies per 200 microliters of plasma.
Q But there's nothing in the JID article that says that?
A I don't see anything based on my review right here.
Q Great. Thanks.
MR. DAMSTEDT: I'm done for now.
MR. CANNON: Okay, take a short break.
(Break taken.)
MR. CANNON: This is Brian Cannon on behalf of Roche. I just wanted to reflect for the record that this morning Doctor Lifson brought hard copies,

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two copies of documents that had been previously identified that reflect a response to Request for Production No. 17, and I would just like to read into the record the citations for these documents.
The first is a research report Quantitative Competitive Polymerase Chain Reaction for Accurate Quantification of HIV DNA or Other Species by Piatak, et al. That's from Biotechniques, Volume 14, No. 1, 1993.
Next article is entitled High Levels of HIV 1 in Plasma During all Stages of Infection Determined by Competitive PCR. That's by Piatak, et al. in Science, Volume 259, March 19th, 1993.
Next article is from the Landset, Volume 341, April 24th, 1993, Page 1099, and is an article by Piatak, et al.
Next article is Determination of Plasma Viral Load HIV 1 Infection by Quantitative Competitive Polymerase Chain Reaction by Piatak, et al. That's from AIDS 1993, Volume 7, Pages S65 through S71.
The next article title is Viral Dynamics in Human Immunodeficiency Virus Type 1 Infection, by Wei, et al., and that is from Nature, Volume 373, January the 12th, 1995.
The next article is entitled Non-cytolytic

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Cd8 T-cell Anti-HIV Responses in Primary HIV 1 Infection. This is from the Landset, Volume 344, December 17th, 1994, beginning Page 1671.
And finally, the last article is entitled Clinical Evaluation of Branched DNA Signal Amplification for Quantifying HIV Type 1 in Human Plasma by Cao, et al. published in AIDS Research and Human Retroviruses, Volume 11, No. 3, 1995, beginning on Page 353.
MR. CANNON: Then I do have a follow-up question. And I will note that those articles were on Doctor Lifson's CV and were identified to counsel before this deposition.
EXAMINATION BY COUNSEL FOR DEFENDANT/COUNTERCLAIMANTS
BY MR. CANNON:
Q Doctor Lifson, if you could turn to Exhibit 692, please.
A (Complying), uh-huh.
Q And within that, if you could turn to Document Request No. 12. Is that the last page? You see that?
A Yes.
Q Mr. Damstedt asked you some questions about it earlier, and the Document Request is for, quote, all communications with any of the following

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individuals: Thomas Merigan, Mark Holodniy, David Katzenstein, Michael Kozal, John Sninsky, Alice Wang, Clayton Casipit, David Kellogg, Eric Groves and Shirley Kwok. Do you see that?
A I do.
Q Are you in possession of any communications with the individuals listed here?
A I don't believe I have any documents involving communications with any of those individuals.
MR. CANNON: No further questions.
FURTHER EXAMINATION BY COUNSEL FOR THE PLAINTIFF/COUNTERCLAIM DEFENDANTS
BY MR. DAMSTEDT:
Q I have three questions to follow-up on that.
You stated that you don't believe you have any documents. What's the basis for that belief? Have you searched for any of these documents?
A I don't believe that I, you know, ever had any documents. Some of these people I don't know. Some of them I know and have spoken with verbally but I don't believe I have any documents.
Q Okay. Two more questions. When did you give the articles that counsel for Roche read into the record just a moment ago to counsel?

A The hard copy?
Q Correct.
A Yesterday.
Q When were you asked to collect documents for this case by counsel?
A I don't recall exactly.
Q What is the general time frame?
A I believe in the last week or two.
MR. DAMSTEDT: I'm done.
MR. CANNON: No further questions. Thanks.
Oh, before we go off the record, we reserve the right to have the witness review the transcript consistent with the parties' agreement and the Federal Rules.
(Signature having not been waived, the examination of Jeffrey David Lifson, M.D., was concluded at 12:42 p.m.)

ACKNOWLEDGMENT OF DEPONENT

I, Jeffrey David Lifson, M.D., do hereby acknowledge that I have read and examined the foregoing testimony, and the same is a true, correct and complete transcription of the testimony given by me, and any corrections appear on the attached Errata sheet signed by me.

__________________ __________________

(DATE) (SIGNATURE)

CERTIFICATE OF SHORTHAND REPORTER/NOTARY PUBLIC

I, Dawn M. Hart, Registered Professional Reporter, the officer before whom the foregoing proceedings were taken, do hereby certify that the foregoing transcript is a true and correct record of the proceedings; that said proceedings were taken by me stenographically and thereafter reduced to typewriting under my supervision; and that I am neither counsel for, related to, nor employed by any of the parties to this case and have no interest, financial or otherwise, in its outcome.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my notarial seal this 6th day of September 2007.

My Commission Expires:
January 1, 2009

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NOTARY PUBLIC IN AND FOR THE
STATE OF MARYLAND

ERRATA SHEET

IN RE: Stanford v. Roche

PAGE	LINE	CORRECTION AND REASON

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(Date) (Signature)

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