Exhibit 5
Part 38
To Third Declaration of
Joseph N. Hosteny

(a) Claim 32 is obvious under 35 U.S.C. § 103(a) over GB 2086732 in view of Wood, Sr. et al. or Berall, in further view of Levin because providing a CMOS camera to acquire an image of the patient's airway and an LED to illuminate the patient's airway would facilitate the intubation process by giving the medical professional an improved view of the airway. Accordingly, providing a CMOS camera and an LED in the laryngoscope of GB 2086732 as shown in Wood, Sr. et al. (col. 3, ll. 53-57) or Berall (col. 5, ll. 46-48) and Levin (col. 3, ll. 44-46; col. 5, ll. 6-12) would have been obvious to a person having ordinary skill in the art of laryngoscope design at the time the alleged invention of the '447 patent was made. In addition, the feature of providing a smooth surface is at least inherently disclosed in GB 2086732 or Berall or obvious in further view of Wood, Sr. et al. as described above in connection with claim 1.

(b) Claim 32 is obvious under 35 U.S.C. § 103(a) over Wood, Sr. et al. or Berall in view of GB 2086732 in further view of Levin as to the LED and for the same reasons as those described above in connection with the obviousness of claim 31.

33. Claim 33

Claim 33 reads:

> 33. The intubation instrument of claim 31, wherein said light is a Light Emitting Diode.

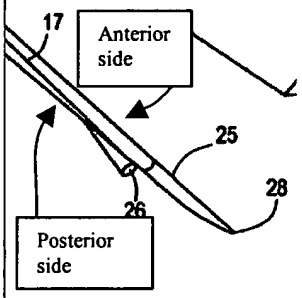
Claim 33 is a duplicate of claim 32 (and therefore improper; *see, e.g.,* 37 C.F.R. § 1.75(b)), so the analysis of claim 32 applies to claim 33 as well.

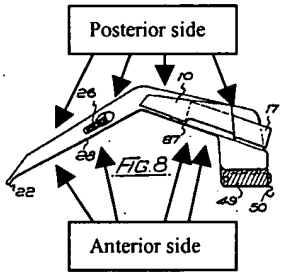
34. Claim 34[6]

(a) Claim 34 is fully anticipated under 35 U.S.C. § 102 by GB 2086732 as described in the following claim chart:

[6] The feature of the elongate lifter portion being about as long as the elongate base portion is not disclosed in the earlier applications 09/060,891; 60/074,355; and 60/067,205 all to which the '447 patent improperly claims priority.

Claim 34	GB 2086732	US 5,800,344	US 5,827,178
34. An intubation instrument, a portion of which is for insertion into a patient through the patient's mouth, comprising:	GB 2086732, p. 1, ll. 5-27, discloses a laryngoscope that is used in intubation procedures. A portion of the laryngoscope is inserted through the patient's mouth as shown in Figs. 9 and 17.	US 5,800,344, col. 1, ll. 1-21 discloses a laryngoscope that is used in intubation procedures. A portion of the laryngoscope is inserted through the patient's mouth.	US 5,827,178, col. 1, ll. 5-10; col. 4, ll. 8-12 disclose a laryngoscope that is used in intubation procedures. A portion of the laryngoscope is inserted through the patient's mouth.
a body having a handle attached thereto;	GB 2086732, Fig. 15 discloses a laryngoscope body. A handle 43 is attached to the body and is shown more clearly in Fig. 10. The handle 43 may be integral or releasably attached to the remainder of the laryngoscope body (p. 3, ll. 100-104).	US 5,800,344, col. 2, ll. 47-54 and Figs. 1 and 4 disclose a laryngoscope body and a handle 20 attached to the body.	US 5,827,178, col. 5, ll. 13-15; Fig. 2 disclose a laryngoscope body and a handle 21 attached to the body.
an elongate arm having an elongate base portion attached to the body and an elongate lifter portion extending from said elongate base portion, said elongate base portion having a first defined length, said elongate lifter portion having a second defined length and a smooth surface for engaging the patient's epiglottis and a distal end for insertion distal-end	GB 2086732, Figs. 7, 8, and 17 disclose an elongate arm (the laryngoscope blade 21). The laryngoscope blade 21 has an elongate base portion (the straight portion 27) that is attached to the remainder of the laryngoscope body using, for example, the notch 46 and clip 50 at the lower depending portion 49 of the lower part 47 (p. 3, ll. 14-16; p. 3, ll. 94-106; Figs. 7, 8, and 10). The laryngoscope blade	US 5,800,344, col. 2, ll. 47-54 and Figs. 1 and 4 disclose an elongate arm (the body 12, known conventionally as a "blade"). The blade has an elongate base portion (the region between the proximal end 16 and a point located distally of the proximal end 16) that has a defined length and is attached to the remainder of the laryngoscope body (col. 1, ll. 52-53; col. 2, ll. 64-67; Fig. 2). The blade has an elongate lifter portion	US 5,827,178, col. 5, ll. 13-18, 43; Fig. 4 disclose an elongate arm (the laryngoscope blade 17). The laryngoscope blade 17 has an elongate base portion (the proximal end 24) that has a defined length and is attached to the remainder of the laryngoscope body. The laryngoscope blade 17 has an elongate lifter portion (the region located proximally of the tip 28 of the distal end 25) that extends from

Claim 34	GB 2086732	US 5,800,344	US 5,827,178
first through a patient's mouth, said elongate arm defining an anterior side positioned toward said handle and an opposite posterior side;	21 has an elongate lifter portion (the straight portion 28) that extends from the elongate base portion (the straight portion 27) (p. 2, ll. 27-31 and Fig. 8). The elongate base portion (the straight portion 27) is comprised of a forming component 24A, which has a defined length of between 40 mm and 120 mm, and preferably between 60 mm and 85 mm (p. 3, ll. 10-16; p. 3, l. 129 – p. 4, l. 2). The elongate lifter portion (the straight portion 28) is comprised of a forming component 24B, which has a defined length of between 50 mm and 90 mm, and preferably between 60 mm and 75 mm (p. 3, ll. 10-16; p. 4, ll. 3-5). The elongate lifter portion (the straight portion 28) has a distal end (tip 22) that is inserted distal-end first through a patient's mouth and, as part of the laryngoscope blade 21, engages the patient's epiglottis to expose the patient's larynx (p. 1, ll. 57-64).	(the region between the distal end 14 and a point located proximally of the distal end 14) that extends from the elongate base portion (col. 2, ll. 47-54 and Fig. 1). The elongate lifter portion (the region between the distal end 14 and a point located proximally of the distal end 14) has a defined length and a smooth surface (smooth tip 18) and is inserted into the patient's mouth and through a patient's pharynx, larynx, and trachea to open the patient's airway passage (col. 1, ll. 10-21, 50-52; col. 2, ll. 49-51; Figs. 1-4). Accordingly, the elongate lifter portion (the region between the distal end 14 and a point located proximally of the distal end 14) opens the airway by engaging the epiglottis of the patient. The elongate arm (blade) has an anterior side (concave surface 32) positioned toward said handle and an opposite posterior side (convex surface	the elongate base portion (the proximal end 24). The elongate lifter portion (the region located proximally of the tip 28 of the distal end 25) has a defined length and a distal end (25) that is inserted, distal-end first, into the patient's mouth during intubation, which involves engaging ("manipulation of") the patient's epiglottis. The elongate arm (the laryngoscope blade 17) has an anterior side positioned toward the handle (21) and an opposite posterior side (Fig. 4, excerpted below). 

Claim 34	GB 2086732	US 5,800,344	US 5,827,178
		30) (col. 3, ll. 1-5; Fig. 1).	
	GB 2086732, Fig. 8 shows that the elongate arm (the laryngoscope blade 21) has an anterior side that is bounded by the straight portions 27 and 28 that meet at an included angle and is positioned toward the handle and an opposite posterior side, as shown:  		
	GB 2086732, Fig. 8 shows that the elongate lifter portion (the straight portion 28) has a smooth surface. Further, since the elongate lifter portion 28 of the laryngoscope blade 21 is inserted between the tongue and tonsil (p. 3, ll. 86-88), it needs to have a smooth surface to avoid injuring the sensitive tissue comprising the patient's airway.		

Claim 34	GB 2086732	US 5,800,344	US 5,827,178
	Accordingly, the smooth portion of the elongate lifter portion (the straight portion 28 shown in Fig. 8) is at least inherently disclosed. Note that GB 2086732, Figs. 9 and 17 show the tip 22 of the elongate lifter portion (the straight portion 28) partially obstructed by the patient's epiglottis, denoted with diagonal marking in the excerpt shown in the analysis of claim 1, above.		
said second defined length being about as long as said first defined length; and,	GB 2086732 discloses that the elongate base portion (the straight portion 27) is comprised of a forming component 24A, which has a length of between 40 mm and 120 mm, and preferably between 60 mm and 85 mm (p. 3, ll. 10-16; p. 3, l. 129 – p. 4, l. 2). Also disclosed is that the elongate lifter portion (the straight portion 28) is comprised of a forming component 24B, which has a length of between 50 mm and 90 mm, and preferably between 60 mm and 75 mm (p. 3, ll. 10-16; p. 4,	(See below with respect to 35 U.S.C. § 103(a))	(See below with respect to 35 U.S.C. § 103(a))

Claim 34	GB 2086732	US 5,800,344	US 5,827,178
	ll. 3-5). Accordingly, at 60 mm, for example, the elongate lifter portion (the straight portion 28) and the elongate base portion (the straight portion 27) are about the same length.		
a viewer operably secured to said posterior side of said arm substantially where said elongate base portion meets said elongate lifter portion, said viewer directed toward the distal end of said elongate lifter portion.	GB 2086732, p. 2, l. 129 – p. 3, l. 9; p.3, ll. 35-53 and Figs. 8 and 9 disclose a viewer (prism 10) operably secured to the posterior side of the elongate arm (the laryngoscope blade 21), substantially near the area where the elongate base portion (the straight portion 27) meets the elongate lifter portion (the straight portion 28). The prism is directed toward the distal end of the straight portion 28 to provide a view of the patient's anatomy.	US 5,800,344, col. 1, ll. 60-62; col. 3, ll. 22-37; Fig. 3 disclose a viewer (image sensor 42) operably secured to the posterior side of the elongate arm (blade), positioned substantially near the area where elongate base portion (the region between the proximal end 16 and a point located distally of the proximal end 16) meets the elongate lifter portion (the region between the distal end 14 and a point located proximally of the distal end 14). The image sensor 42 is directed toward the distal end 14 to provide a view of the patient's anatomy.	US 5,827,178, col. 1, ll. 58-60; col. 5, ll. 19-20, 28-31; Fig. 4 disclose a viewer (camera 26) operably secured to the posterior side of the elongate arm (the laryngoscope blade 17) and located substantially near the area where the elongate base portion (the proximal end 24) meets the elongate lifter portion (the region located proximally of the tip 28 of the distal end 25). The camera 26 is directed toward the distal end 25 to provide a view of the patient's anatomy.

(b) Claim 34 is obvious under 35 U.S.C. § 103(a) over Wood, Sr. et al. or Berall in view of GB 2086732 because providing an elongate lifter portion about as long as the elongate base portion would improve the shape of the laryngoscope and facilitate the intubation process. (The remaining

features of claim 34 are disclosed in Wood, Sr. et al. and Berall as shown in the preceding claim chart.) Accordingly, providing the length in the laryngoscopes of Wood, Sr. et al. or Berall as shown in GB 2086732 would have been obvious to a person having ordinary skill in the art of laryngoscope design at the time the alleged invention of the '447 patent was made. In addition, the feature of providing a smooth surface is at least inherently disclosed in GB 2086732 or Berall or obvious in further view of Wood, Sr. et al. as described above in connection with claim 1.

35. Claim 35

Claim 35 reads:

> 35. The intubation instrument of claim 34, wherein the portion of the intubation instrument for insertion into a patient through the patient's mouth is elongate and has a longitudinal center, and said base portion meets said lifter portion substantially near said longitudinal center.

(a) Claim 35 is fully anticipated under 35 U.S.C. § 102 by GB 2086732 because GB 2086732, p. 2, ll. 27-31 and Fig. 8, shows that the elongate base portion (the straight portion 27) and elongate lifter portion (the straight portion 28) meet substantially near the center of the elongate arm (the laryngoscope blade 21). The elongate base portion (the straight portion 27) is comprised of a forming component 24A, which has a length of between 40 mm and 120 mm, and preferably between 60 mm and 85 mm (p. 3, ll. 10-16; p. 3, l. 129 – p. 4, l. 2). The elongate lifter portion (the straight portion 28) is comprised of a forming component 24B, which has a length of between 50 mm and 90 mm, and preferably between 60 mm and 75 mm (p. 3, ll. 10-16; p. 4, ll. 3-5). Accordingly, for example, when both the elongate lifter portion (the straight portion 28) and the elongate base portion (the straight portion 27) are each 60 mm long and joined together to create a 120 mm long elongate arm (the laryngoscope blade 21), these portions meet at the longitudinal center (i.e., at the center

along a longitudinal axis) of the elongate arm (the laryngoscope blade 21), i.e., at the 60 mm point. The longitudinal axis of the laryngoscope blade 21 is shown in, for example, Fig. 15:

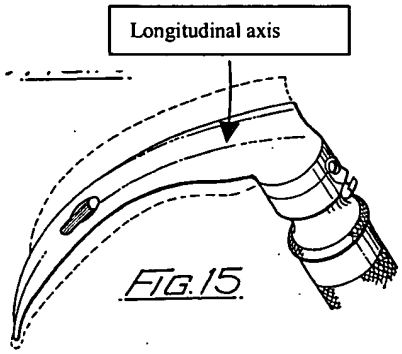


FIG. 15

(b) Claim 35 is obvious under 35 U.S.C. § 103(a) over Wood, Sr. et al. or Berall in view of GB 2086732 because providing an elongate lifter portion about as long as the elongate base portion and that meet substantially near the center of the elongate arm would improve the shape of the laryngoscope and facilitate the intubation process. (The remaining features of claim 35 are disclosed in Wood, Sr. et al. and Berall as shown in the chart for claim 34.) Accordingly, providing this configuration for the elongate base and lifter portions in the laryngoscopes of Wood, Sr. et al. or Berall as shown in GB 2086732 would have been obvious to a person having ordinary skill in the art of laryngoscope design at the time the alleged invention of the '447 patent was made. In addition, the feature of providing a smooth surface is at least inherently disclosed in GB 2086732 or Berall or obvious in further view of Wood, Sr. et al. as described above in connection with claim 1.

36. Claim 36

Claim 36 reads:

36. The intubation instrument of claim 34, wherein said viewer is a Complementary Metal Oxide Semiconductor camera.

(a) Claim 36 is obvious under 35 U.S.C. § 103(a) over GB 2086732 in view of Wood, Sr. et al. or Berall because providing a CMOS camera to acquire an image of the patient's airway would facilitate the intubation process by giving the medical professional an improved view of the airway. Accordingly, providing a CMOS camera in the laryngoscope of GB 2086732 as shown in Wood, Sr. et al. (col. 3, ll. 53-57) or Berall (col. 5, ll. 46-48) would have been obvious to a person having ordinary skill in the art of laryngoscope design at the time the alleged invention of the '447 patent was made. In addition, the feature of providing a smooth surface is at least inherently disclosed in GB 2086732 or Berall or obvious in further view of Wood, Sr. et al. as described above in connection with claim 1.

(b) Claim 36 is obvious under 35 U.S.C. § 103(a) over Wood, Sr. et al. or Berall in view of GB 2086732 for the reasons as described above in connection with the obviousness of claim 34. (The remaining features of claim 36 are disclosed in Wood, Sr. et al. (col. 3, ll. 53-57) and Berall (col. 5, ll. 46-48).)

37. Claim 37

Claim 37 reads:

37. The intubation instrument of claim 36, further including a display operably secured to said camera.

(a) Claim 37 is obvious under 35 U.S.C. § 103(a) over GB 2086732 in view of Wood, Sr. et al. or Berall or Kantor because providing a display to view an image of the patient's airway would facilitate the intubation process by giving the medical professional an improved observation of the airway. Accordingly, providing a display operably secured to the camera in the laryngoscope of GB 2086732 as shown in Wood, Sr. et al. (col. 3, ll. 57-

61) or Berall (col. 5, ll. 34-36; Fig. 4) or Kantor (p. 7, ll. 6-15; p. 10, ll. 12-23) would have been obvious to a person having ordinary skill in the art of laryngoscope design at the time the alleged invention of the '447 patent was made. In addition, the feature of providing a smooth surface is at least inherently disclosed in GB 2086732 or Berall or obvious in further view of Wood, Sr. et al. as described above in connection with claim 1.

(b) Claim 37 is obvious under 35 U.S.C. § 103(a) over Wood, Sr. et al. or Berall in view of GB 2086732 for the reasons as described above in connection with the obviousness of claim 36. (The remaining features of claim 37 are disclosed in Wood, Sr. et al. (col. 3, ll. 57-61) and Berall (col. 5, ll. 34-36; Fig. 4).)

38. Claim 38

Claim 38 reads:

> 38. The intubation instrument of claim 34, wherein said lifter portion is pivotally secured to said base portion.

(a) Claim 38 is obvious under 35 U.S.C. § 103(a) over GB 2086732 in view of Bauman or Mentzelopoulous (prior art as described above in connection with claim 17). Bauman, col. 3, ll. 13-24, 54-57; Figs. 5, 6, discloses a laryngoscope having a lifter portion (flexible tip 35) pivotally secured to the base portion (12) of the laryngoscope blade at a pivot point (near blade section 42). Mentzelopoulous, p. 13, ll. 16-17; p. 16, ll. 16-19; p. 18, l. 26 – p. 19, l. 1; p. 21, ll. 19-23; Figs. I-III, discloses a laryngoscope having a lifter portion ("distal two thirds") pivotally secured to the base portion (length "L/3") at a pivot point (joint 1 (Figs. II and III); joint 6 (Fig. II); joint 12 (Fig. I)). Accordingly, providing a lifter portion pivotally secured to the base portion in the laryngoscope of GB 2086732 to increase flexibility of the laryngoscope and facilitate the intubation process as shown in Bauman (col. 3, ll. 13-24, 54-57; Figs. 5, 6) or Mentzelopoulous (p. 13, ll. 16-17; p. 16, ll. 16-19; p. 18, l. 26 – p. 19, l. 1; p. 21, ll. 19-23;

Figs. I-III) would have been obvious to a person having ordinary skill in the art of laryngoscope design at the time the alleged invention of the '447 patent was made. In addition, the feature of providing a smooth surface is at least inherently disclosed in GB 2086732 or Berall or obvious in further view of Wood, Sr. et al. as described above in connection with claim 1.

(b) Claim 38 is obvious under 35 U.S.C. § 103(a) over Wood, Sr. et al. or Berall in view of GB 2086732, in further view of Bauman or Mentzelopoulous as to the pivot feature, and for the reasons as described above in connection with the obviousness of claim 34.

39. Claim 39

Claim 39 reads:

> 39. The intubation instrument of claim 38, further including a Light Emitting Diode operably secured to said lifter portion.

(a) Claim 39 is obvious under 35 U.S.C. § 103(a) over GB 2086732 in view of Bauman or Mentzelopoulous (prior art as described above in connection with claim 17), in further view of Levin for the reasons as described above in connection with claim 38 and because providing an LED to illuminate the patient's airway would facilitate the intubation process. Accordingly, providing an LED and pivot feature in the laryngoscope of GB 2086732 to illuminate the patient's airway during intubation and to increase flexibility of the laryngoscope and facilitate the intubation process as shown in Levin (col. 3, ll. 44-46; col. 5, ll. 6-12) and in Bauman (col. 3, ll. 13-24, 54-57; Figs. 5, 6) or Mentzelopoulous (p. 13, ll. 16-17; p. 16, ll. 16-19; p. 18, l. 26 – p. 19, l. 1; p. 21, ll. 19-23; Figs. I-III) would have been obvious to a person having ordinary skill in the art of laryngoscope design at the time the alleged invention of the '447 patent was made. In addition, the feature of providing a smooth surface is at least inherently disclosed in GB 2086732 or Berall or obvious in further view of Wood, Sr. et al. as described above in connection with claim 1.

(b) Claim 39 is obvious under 35 U.S.C. § 103(a) over Wood, Sr. et al. or Berall in view of GB 2086732 in further view of Bauman or Mentzelopoulous as to the pivot feature for the reasons as described above in connection with the obviousness of claim 38 and Levin as to the LED as described in the preceding paragraph.

40. Claim 40[7]

(a) Claim 40 is fully anticipated under 35 U.S.C. § 102 by GB 2086732 as described in the following claim chart:

Claim 40	GB 2086732	US 5,800,344	US 5,827,178
40. An intubation instrument a portion of which is for insertion into a patient through the patient's mouth, comprising;	GB 2086732, p. 1, ll. 5-27, discloses a laryngoscope that is used in intubation procedures. A portion of the laryngoscope is inserted through the patient's mouth as shown in Figs. 9 and 17.	US 5,800,344, col. 1, ll. 1-21 discloses a laryngoscope that is used in intubation procedures. A portion of the laryngoscope is inserted through the patient's mouth.	US 5,827,178, col. 1, ll. 5-10; col. 4, ll. 8-12 discloses a laryngoscope that is used in intubation procedures. A portion of the laryngoscope is inserted through the patient's mouth.
a body having a handle attached thereto;	GB 2086732, Fig. 15 discloses a laryngoscope body. A handle 43 is attached to the body and is shown more clearly in Fig. 10. The handle 43 may be integral or releasably attached to the remainder of the laryngoscope body (p. 3, ll. 100-104).	US 5,800,344, col. 2, ll. 47-54 and Figs. 1 and 4 disclose a laryngoscope body and a handle 20 attached to the body.	US 5,827,178, col. 5, ll. 13-15; Fig. 2 disclose a laryngoscope body and a handle 21 attached to the body.
an elongate arm having an elongate base portion attached to the body	GB 2086732, Figs. 7, 8, and 17 disclose an elongate arm (the laryngoscope blade	US 5,800,344, col. 2, ll. 47-54 and Figs. 1 and 4 disclose an elongate arm (the	US 5,827,178, col. 5, ll. 13-18, 43; Fig. 4 disclose an elongate arm (the

[7] The feature of the elongate lifter portion and the elongate base portion meeting substantially near the center is not disclosed in the earlier applications 09/060,891; 60/074,355; and 60/067,205 all to which the '447 patent improperly claims priority.

Claim 40	GB 2086732	US 5,800,344	US 5,827,178
and an elongate lifter portion having a smooth surface for engaging the patient's epiglottis, said elongate lifter portion having a distal end portion for insertion distal end portion first through a patient's mouth, said elongate arm defining an anterior side positioned toward said handle and an opposite posterior side;	21). The laryngoscope blade 21 has an elongate base portion (the straight portion 27) that is attached to the remainder of the laryngoscope body using, for example, the notch 46 and clip 50 at the lower depending portion 49 of the lower part 47 (p. 3, ll. 14-16; p. 3, ll. 94-106; Figs. 7, 8, and 10). The laryngoscope blade 21 has an elongate lifter portion (the straight portion 28) that has a distal end (tip 22) that is inserted distal-end first through a patient's mouth and, as part of the laryngoscope blade 21, engages the patient's epiglottis to expose the patient's larynx (p. 1, ll. 57-64). Fig. 8 shows that the elongate arm (the laryngoscope blade 21) has an anterior side that is bounded by the straight portions 27 and 28 that meet at an included angle and is positioned toward the handle and an opposite posterior side.	body 12, known conventionally as a "blade"). The blade has an elongate base portion (the region between the proximal end 16 and a point located distally of the proximal end 16) that is attached to the remainder of the laryngoscope body (col. 1, ll. 52-53; col. 2, ll. 64-67; Fig. 2). The blade has an elongate lifter portion (the region between the distal end 14 and a point located proximally of the distal end 14) that has a smooth surface (smooth tip 18) and is inserted into the patient's mouth and through a patient's pharynx, larynx, and trachea to open the patient's airway passage (col. 1, ll. 10-21, 50-52; col. 2, ll. 49-51; Figs. 1-4). Accordingly, the elongate lifter portion (the region between the distal end 14 and a point located proximally of the distal end 14) opens the airway by engaging the epiglottis of the patient. The elongate arm (blade) has an anterior side (concave	laryngoscope blade 17). The laryngoscope blade 17 has an elongate base portion (the proximal end 24) that is attached to the remainder of the laryngoscope body. The laryngoscope blade 17 has an elongate lifter portion (the region located proximally of the tip 28 of the distal end 25) that has a distal end (25) that is inserted, distal-end first, into the patient's mouth during intubation, which involves engaging ("manipulation of") the patient's epiglottis. The elongate arm (the laryngoscope blade 17) has an anterior side positioned toward the handle (21) and an opposite posterior side (Fig. 4, excerpted above regarding claim 34).

Claim 40	GB 2086732	US 5,800,344	US 5,827,178
	GB 2086732, Fig. 8 shows that the elongate lifter portion (the straight portion 28) has a smooth surface. Further, since the elongate lifter portion 28 of the laryngoscope blade 21 is inserted between the tongue and tonsil (p. 3, ll. 86-88), it needs to have a smooth surface to avoid injuring the sensitive tissue comprising the patient's airway. Accordingly, the smooth portion of the elongate lifter portion (the straight portion 28 shown in Fig. 8) is at least inherently disclosed. Note that GB 2086732, Figs. 9 and 17 show the tip 22 of the elongate lifter portion (the straight portion 28) partially obstructed by the patient's epiglottis, denoted with diagonal marking in the excerpt shown in the analysis of claim 1, above.	surface 32) positioned toward said handle and an opposite posterior side (convex surface 30) (col. 3, ll. 1-5; Fig. 1).	
a viewer operably secured to said posterior side of said elongate arm substantially near where said elongate	GB 2086732, p. 2, l. 129 – p. 3, l. 9; p.3, ll. 35-53 and Figs. 8 and 9 disclose a viewer (prism 10) positioned on the	US 5,800,344, col. 1, ll. 60-62; col. 3, ll. 22-37; Fig. 3 disclose a viewer (image sensor 42) operably secured to the	US 5,827,178, col. 1, ll. 58-60; col. 5, ll. 19-20, 28-31; Fig. 4 disclose a viewer (camera 26) operably secured to the

Claim 40	GB 2086732	US 5,800,344	US 5,827,178
base portion meets said elongate lifter portion, said viewer directed toward the distal end portion of said elongate lifter portion; and,	posterior side of the elongate arm (the laryngoscope blade 21), substantially near the area where the elongate base portion (the straight portion 27) meets the elongate lifter portion (the straight portion 28). The prism is directed toward the distal end of the straight portion 28 to provide a view of the patient's anatomy.	posterior side of the elongate arm (blade), positioned substantially near the area where elongate base portion (the region between the proximal end 16 and a point located distally of the proximal end 16) meets the elongate lifter portion (the region between the distal end 14 and a point located proximally of the distal end 14). The image sensor 42 is directed toward the distal end 14 to provide a view of the patient's anatomy.	posterior side of the elongate arm (the laryngoscope blade 17) and located substantially near the area where the elongate base portion (the proximal end 24) meets the elongate lifter portion (the region located proximally of the tip 28 of the distal end 25). The camera 26 is directed toward the distal end 25 to provide a view of the patient's anatomy.
said elongate arm having a center, and said elongate base portion meets said elongate lifter portion substantially near said center.	GB 2086732, p. 2, ll. 27-31 and Fig. 8, which show that the elongate base portion (the straight portion 27) and elongate lifter portion (the straight portion 28) meet substantially near the center of the elongate arm (the laryngoscope blade 21). The elongate base portion (the straight portion 27) is comprised of a forming component 24A, which has a length of between 40 mm and 120 mm, and preferably between 60 mm and 85 mm	(See below with respect to 35 U.S.C. § 103(a))	(See below with respect to 35 U.S.C. § 103(a))

Claim 40	GB 2086732	US 5,800,344	US 5,827,178
	(p. 3, ll. 10-16; p. 3, l. 129 – p. 4, l. 2). The elongate lifter portion (the straight portion 28) is comprised of a forming component 24B, which has a length of between 50 mm and 90 mm, and preferably between 60 mm and 75 mm (p. 3, ll. 10-16; p. 4, ll. 3-5). Accordingly, for example, when both the elongate lifter portion (the straight portion 28) and the elongate base portion (the straight portion 27) are each 60 mm long and joined together to create a 120 mm long elongate arm (the laryngoscope blade 21), these portions meet at the center of the elongate arm (the laryngoscope blade 21), i.e., at the 60 mm point.		

(b) Claim 40 is obvious under 35 U.S.C. § 103(a) over Wood, Sr. et al. or Berall in view of GB 2086732 because providing elongate base and lifter portions that meet substantially near the center of the elongate arm (the laryngoscope blade) would improve the shape of the laryngoscope and facilitate the intubation process. (The remaining features of claim 40 are disclosed in Wood, Sr. et al. and Berall as shown in the preceding claim chart.) Accordingly, providing this configuration of the elongate base and lifter portions in the laryngoscopes of Wood, Sr. et al. or Berall as shown

in GB 2086732 would have been obvious to a person having ordinary skill in the art of laryngoscope design at the time the alleged invention of the '447 patent was made. In addition, the feature of providing a smooth surface is at least inherently disclosed in GB 2086732 or Berall or obvious in further view of Wood, Sr. et al. as described above in connection with claim 1.

41. Claim 41

Claim 41 reads:

> 41. The intubation instrument of claim 40, wherein said viewer is a Complementary Metal Oxide Semiconductor camera.

(a) Claim 41 is obvious under 35 U.S.C. § 103(a) over GB 2086732 in view of Wood, Sr. et al. or Berall because providing a CMOS camera to acquire an image of the patient's airway would facilitate the intubation process by giving the medical professional an improved view of the airway. Accordingly, providing a CMOS camera in the laryngoscope of GB 2086732 as shown in Wood, Sr. et al. (col. 3, ll. 53-57) or Berall (col. 5, ll. 46-48) would have been obvious to a person having ordinary skill in the art of laryngoscope design at the time the alleged invention of the '447 patent was made. In addition, the feature of providing a smooth surface is at least inherently disclosed in GB 2086732 or Berall or obvious in further view of Wood, Sr. et al. as described above in connection with claim 1.

(b) Claim 41 is obvious under 35 U.S.C. § 103(a) over Wood, Sr. et al. or Berall in view of GB 2086732 for the reasons as described above in connection with the obviousness of claim 40. (The remaining features of claim 41 are disclosed in Wood, Sr. et al. (col. 3, ll. 53-57) and Berall (col. 5, ll. 46-48).)

42. Claim 42

Claim 42 reads:

42. The intubation instrument of claim 41, further including a display operably secured to said Complementary Metal Oxide Semiconductor camera.

(a) Claim 42 is obvious under 35 U.S.C. § 103(a) over GB 2086732 in view of Wood, Sr. et al. or Berall or Kantor because providing a display to view an image of the patient's airway would facilitate the intubation process by giving the medical professional an improved observation of the airway. Accordingly, providing a display operably secured to the camera in the laryngoscope of GB 2086732 as shown in Wood, Sr. et al. (col. 3, ll. 57-61) or Berall (col. 5, ll. 34-36; Fig. 4) or Kantor (p. 7, ll. 6-15; p. 10, ll. 12-23) would have been obvious to a person having ordinary skill in the art of laryngoscope design at the time the alleged invention of the '447 patent was made. In addition, the feature of providing a smooth surface is at least inherently disclosed in GB 2086732 or Berall or obvious in further view of Wood, Sr. et al. as described above in connection with claim 1.

(b) Claim 42 is obvious under 35 U.S.C. § 103(a) over Wood, Sr. et al. or Berall in view of GB 2086732 for the reasons as described above in connection with the obviousness of claim 41. (The remaining features of claim 42 are disclosed in Wood, Sr. et al. (col. 3, ll. 57-61) and Berall (col. 5, ll. 34-36; Fig. 4).)

43. Claim 43

Claim 43 reads:

43. The intubation instrument of claim 40, wherein said elongate lifter portion is pivotally secured to said elongate base portion.

(a) Claim 43 is obvious under 35 U.S.C. § 103(a) over GB 2086732 in view of Bauman or Mentzelopoulous (prior art as described above in connection with claim 17). Bauman, col. 3, ll. 13-24, 54-57; Figs. 5, 6, discloses a laryngoscope having a lifter portion (flexible tip 35) pivotally secured to

the base portion (12) of the laryngoscope blade at a pivot point (near blade section 42). Mentzelopoulous, p. 13, ll. 16-17; p. 16, ll. 16-19; p. 18, l. 26 – p. 19, l. 1; p. 21, ll. 19-23; Figs. I-III, discloses a laryngoscope having a lifter portion ("distal two thirds") pivotally secured to the base portion (length "L/3") at a pivot point (joint 1 (Figs. II and III); joint 6 (Fig. II); joint 12 (Fig. I)). Accordingly, providing a pivot point in the laryngoscope of GB 2086732 to increase flexibility of the laryngoscope and facilitate the intubation process as shown in Bauman (col. 3, ll. 13-24, 54-57; Figs. 5, 6) or Mentzelopoulous (p. 13, ll. 16-17; p. 16, ll. 16-19; p. 18, l. 26 – p. 19, l. 1; p. 21, ll. 19-23; Figs. I-III) would have been obvious to a person having ordinary skill in the art of laryngoscope design at the time the alleged invention of the '447 patent was made. In addition, the feature of providing a smooth surface is at least inherently disclosed in GB 2086732 or Berall or obvious in further view of Wood, Sr. et al. as described above in connection with claim 1.

(b) Claim 43 is obvious under 35 U.S.C. § 103(a) over Wood, Sr. et al. or Berall in view of GB 2086732, in further view of Bauman or Mentzelopoulous as to the pivot feature, and for the reasons described above in connection with claim 40.

44. Claim 44

Claim 44 reads:

> 44. The intubation instrument of claim 43, further including a Light Emitting Diode operably secured to said elongate lifter portion.

(a) Claim 44 is obvious under 35 U.S.C. § 103(a) over GB 2086732 in view of Bauman or Mentzelopoulous (prior art as described above in connection with claim 17), in further view of Levin for the reasons as described above in connection with claim 43 and because providing an LED to illuminate the patient's airway would facilitate the intubation process. Accordingly,

providing an LED operably secured to the elongate lifter portion and pivot feature in the laryngoscope of GB 2086732 to illuminate the patient's airway during intubation and to increase flexibility of the laryngoscope and facilitate the intubation process as shown in Levin (col. 3, ll. 44-46; col. 5, ll. 6-12) and in Bauman (col. 3, ll. 13-24, 54-57; Figs. 5, 6) or Mentzelopoulous (p. 13, ll. 16-17; p. 16, ll. 16-19; p. 18, l. 26 – p. 19, l. 1; p. 21, ll. 19-23; Figs. I-III) would have been obvious to a person having ordinary skill in the art of laryngoscope design at the time the alleged invention of the '447 patent was made. In addition, the feature of providing a smooth surface is at least inherently disclosed in GB 2086732 or Berall or obvious in further view of Wood, Sr. et al. as described above in connection with claim 1.

(b) Claim 44 is obvious under 35 U.S.C. § 103(a) over Wood, Sr. et al. or Berall in view of GB 2086732 in further view of Bauman or Mentzelopoulous as to the pivot feature for the reasons as described above in connection with the obviousness of claim 43 and Levin as to the LED as described in the preceding paragraph.

C. Statement pointing out substantial new question of patentability.

The GB 2086732, Mentzelopoulous, and Kantor prior art documents referred to above were not of record during prosecution of the '447 patent. Since claims 1-44 of the '447 patent are not patentable over these prior art documents alone or in combination with other prior art documents as described above, and because the defective priority claim described above was not raised during prosecution of the '447 patent, a substantial new question of patentability is raised.

Respectfully submitted,

Date: July 28, 2006

Ralph A. Loren (Reg. No. 29,325)

Brian M. Gaff, Esq. (Reg. No. 44,691)

Attorneys for Requester
Edwards Angell Palmer & Dodge LLP
101 Federal Street
P.O. Box 55874
Boston, Massachusetts 02205-5874
www.eapdlaw.com

Tel. No.: (617) 439-4444
Fax No.: (888) 439-4170

BOS2_553453.1

US006988138B1

(12) **United States Patent**
Alcorn et al.

(10) **Patent No.: US 6,988,138 B1**
(45) **Date of Patent: Jan. 17, 2006**

(54) **INTERNET-BASED EDUCATION SUPPORT SYSTEM AND METHODS**

(75) Inventors: **Robert L. Alcorn**, Arlington, VA (US); **Daniel E. Cane**, Washington, DC (US); **Michael L. Chasen**, Washington, DC (US); **Timothy R. Chi**, Fairfax, VA (US); **Stephen R. Gilfus**, Woodbridge, VA (US); **Scott Perian**, Washington, DC (US); **Matthew L. Pittinsky**, Washington, DC (US)

(73) Assignee: **Blackboard Inc.**, Washington, DC (US)

(*) Notice: Subject to any disclaimer, the term of this patent is extended or adjusted under 35 U.S.C. 154(b) by 754 days.

(21) Appl. No.: **09/608,208**

(22) Filed: **Jun. 30, 2000**

Related U.S. Application Data

(60) Provisional application No. 60/141,283, filed on Jun. 30, 1999, provisional application No. 60/141,864, filed on Jul. 1, 1999, provisional application No. 60/187,890, filed on Mar. 8, 2000.

(51) **Int. Cl.**
G06F 15/173 (2006.01)

(52) **U.S. Cl.** **709/225**; 709/203; 709/218; 709/217; 709/204; 343/350; 343/204

(58) **Field of Classification Search** 709/225, 709/203, 218, 217, 204, 205; 343/350, 204, 343/336
See application file for complete search history.

(56) **References Cited**

U.S. PATENT DOCUMENTS

5,263,869	A *	11/1993	Ziv-El	709/204
5,437,555	A *	8/1995	Ziv-El	434/336
5,537,141	A *	7/1996	Harper et al.	725/116
5,918,010	A *	6/1999	Appleman et al.	709/203
5,973,683	A *	10/1999	Cragun et al.	345/719
6,301,462	B1 *	10/2001	Freeman et al.	434/350
6,334,141	B1 *	12/2001	Varma et al.	709/205
6,338,086	B1 *	1/2002	Curtis et al.	709/218
6,347,333	B2 *	2/2002	Eisendrath et al.	709/217
6,463,460	B1 *	10/2002	Simonoff	709/203
6,505,031	B1 *	1/2003	Slider et al.	434/350
6,546,230	B1 *	4/2003	Allison	434/350

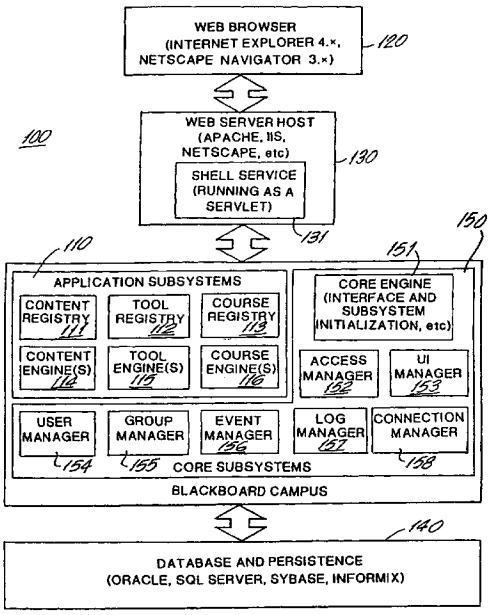
* cited by examiner

Primary Examiner—Bunjob Jaroenchonwanit
Assistant Examiner—Thanh T Nguyen
(74) *Attorney, Agent, or Firm*—Wilmer Cutler Pickering Hale and Dorr LLP

(57) **ABSTRACT**

A system and methods for implementing education online by providing institutions with the means for allowing the creation of courses to be taken by students online, the courses including assignments, announcements, course materials, chat and whiteboard facilities, and the like, all of which are available to the students over a network such as the Internet. Various levels of functionality are provided through a three-tiered licensing program that suits the needs of the institution offering the program. In addition, an open platform system is provided such that anyone with access to the Internet can create, manage, and offer a course to anyone else with access to the Internet without the need for an affiliation with an institution, thus enabling the virtual classroom to extend worldwide.

44 Claims, 41 Drawing Sheets



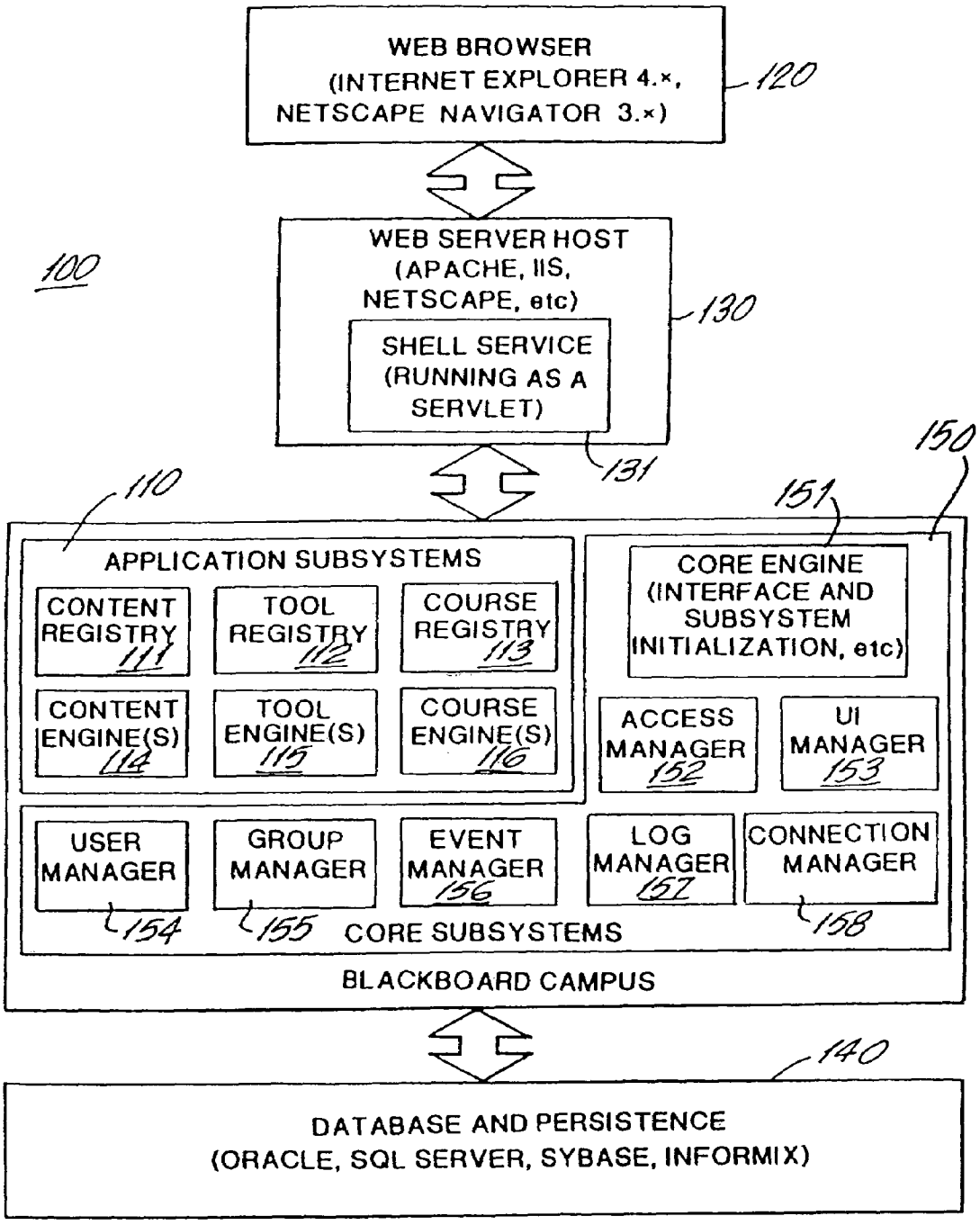

WEB BROWSER
(INTERNET EXPLORER 4.×,
NETSCAPE NAVIGATOR 3.×)
120
WEB SERVER HOST
(APACHE, IIS,
NETSCAPE, etc)
SHELL SERVICE
(RUNNING AS A
SERVLET)
130
131
100
150
151
110
APPLICATION SUBSYSTEMS
CONTENT REGISTRY 111
TOOL REGISTRY 112
COURSE REGISTRY 113
CONTENT ENGINE(S) 114
TOOL ENGINE(S) 115
COURSE ENGINE(S) 116
CORE ENGINE
(INTERFACE AND
SUBSYSTEM
INITIALIZATION, etc)
ACCESS MANAGER 152
UI MANAGER 153
USER MANAGER 154
GROUP MANAGER 155
EVENT MANAGER 156
LOG MANAGER 157
CONNECTION MANAGER 158
CORE SUBSYSTEMS
BLACKBOARD CAMPUS
140
DATABASE AND PERSISTENCE
(ORACLE, SQL SERVER, SYBASE, INFORMIX)

FIG.1

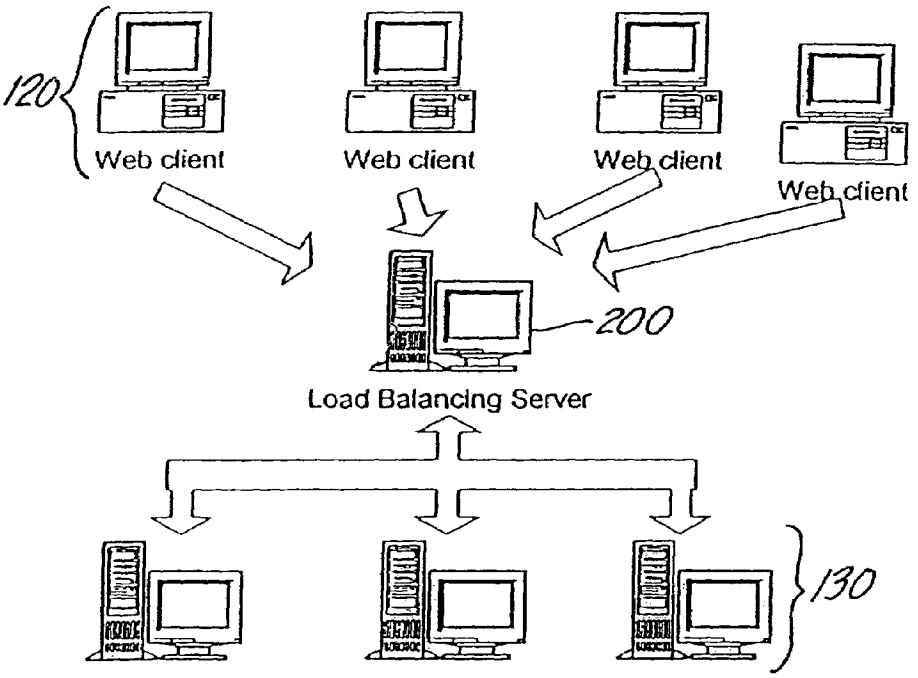

120
Web client
Web client
Web client
Web client
200
Load Balancing Server
130

FIG.2

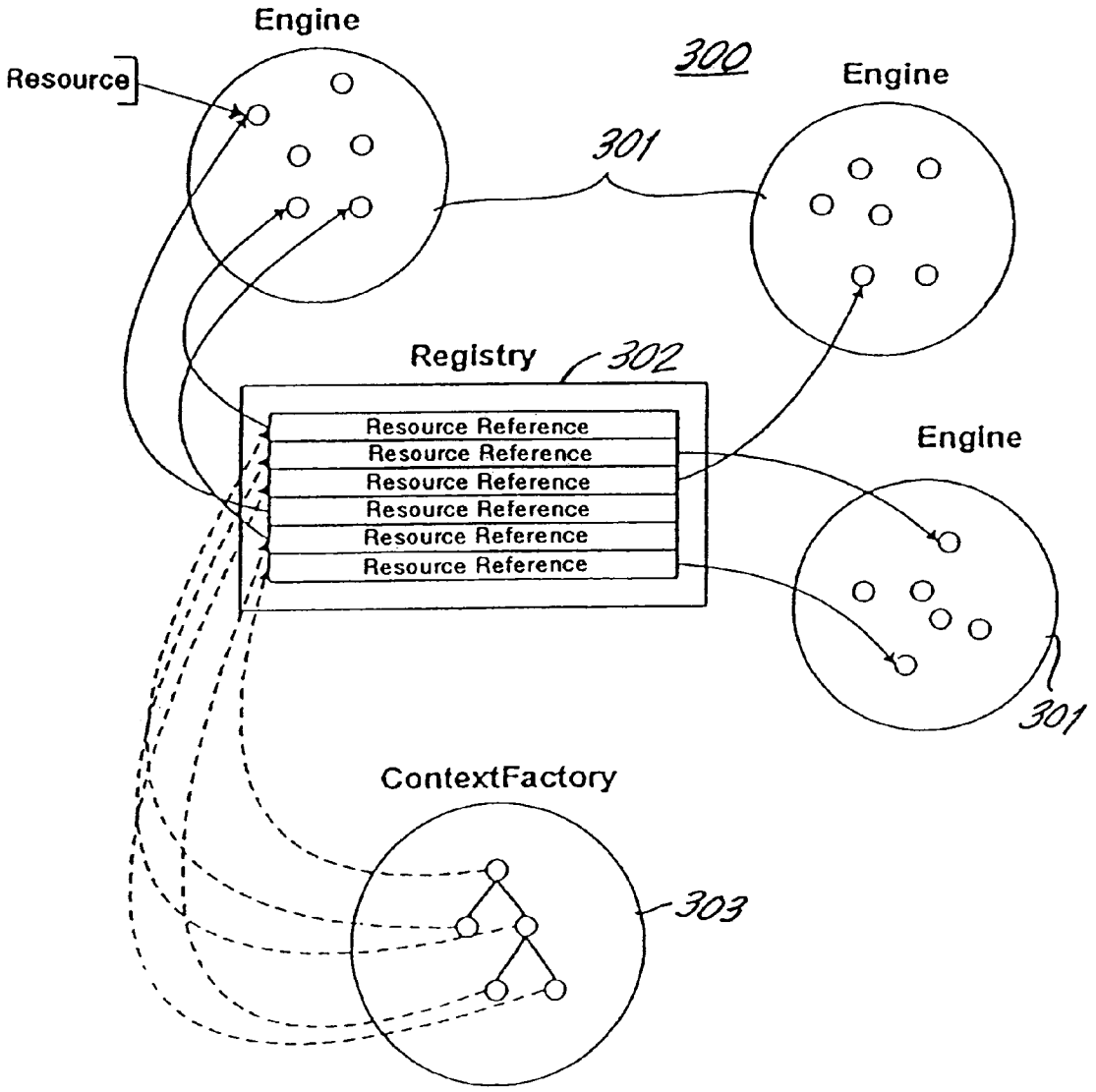

Engine
Resource
300
Engine
301
Registry
302
Resource Reference
Resource Reference
Resource Reference
Resource Reference
Resource Reference
Resource Reference
Engine
301
ContextFactory
303

FIG.3

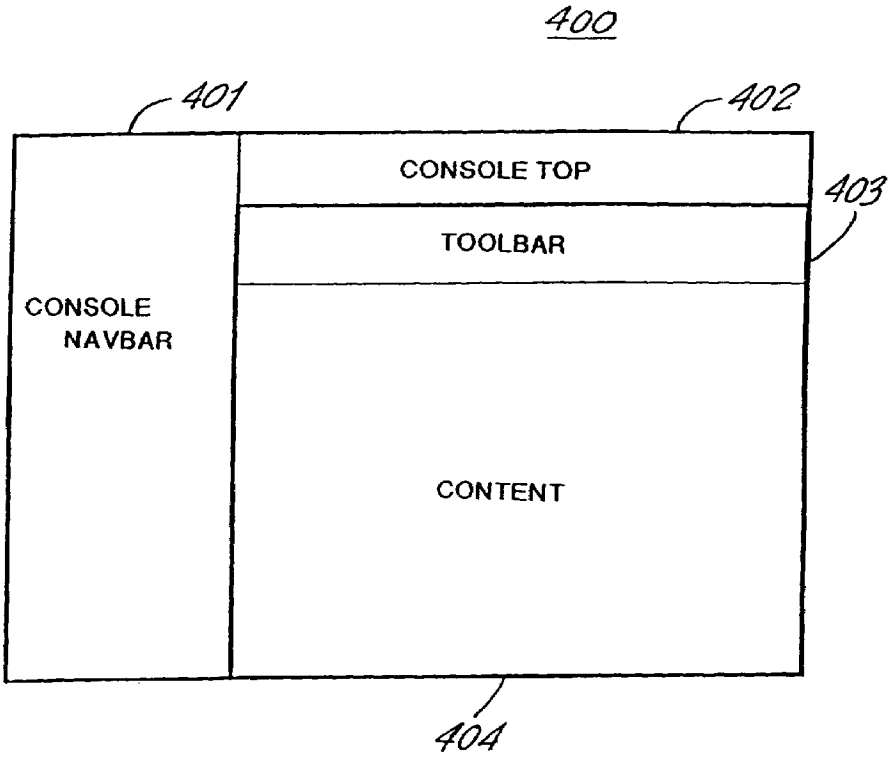

400
401
402
CONSOLE TOP
403
TOOLBAR
CONSOLE
NAVBAR
CONTENT
404

FIG.4

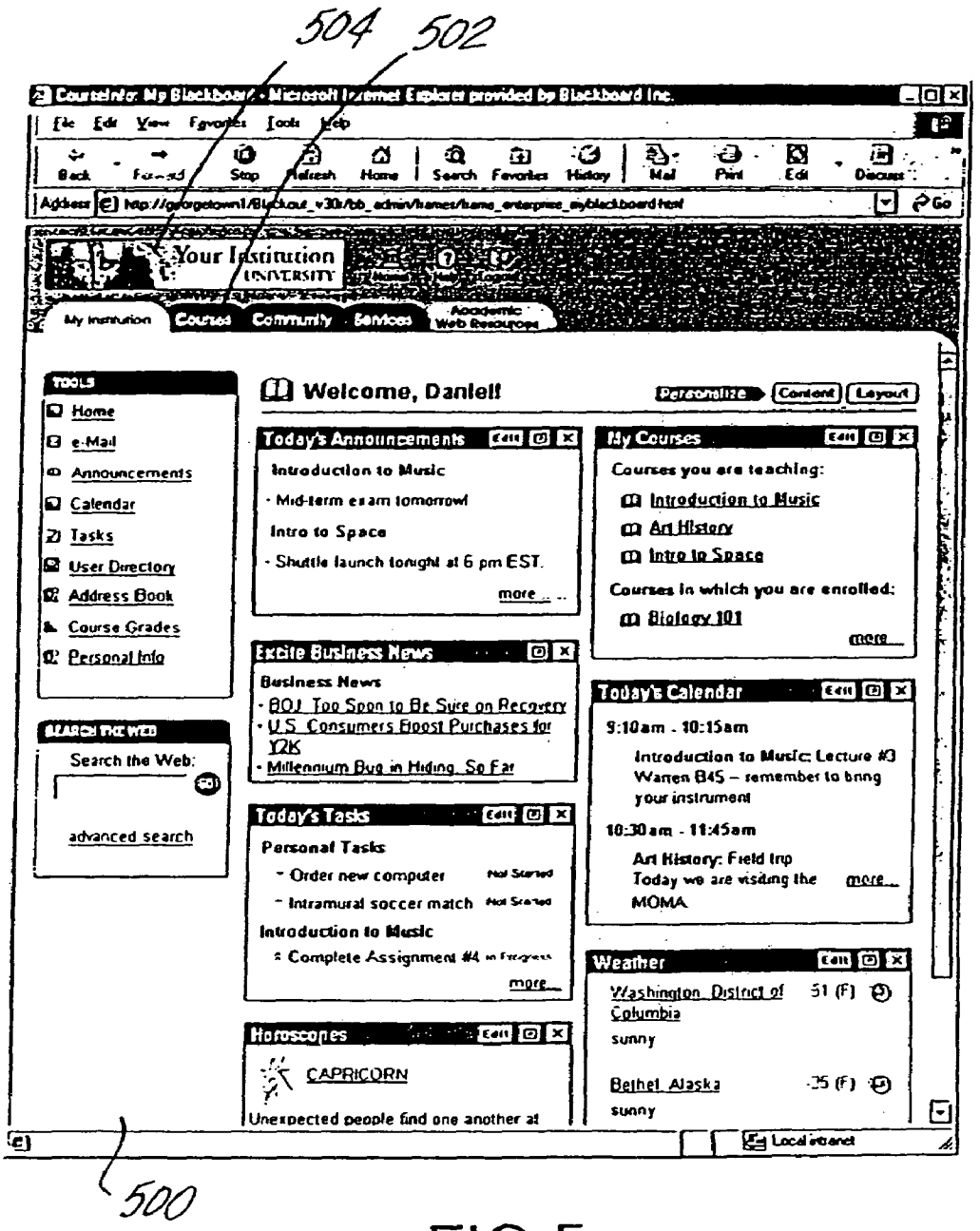

504
502
Your Institution
UNIVERSITY
My Institution
Courses
Community
Services
Academic Web Resources
TOOLS
Home
e-Mail
Announcements
Calendar
Tasks
User Directory
Address Book
Course Grades
Personal Info
SEARCH THE WEB
Search the Web:
advanced search
Welcome, Daniel!
Personalize
Content
Layout
Today's Announcements
Introduction to Music
- Mid-term exam tomorrow!
Intro to Space
- Shuttle launch tonight at 6 pm EST.
more ...
Excite Business News
Business News
- BOJ Too Soon to Be Sure on Recovery
- U.S. Consumers Boost Purchases for Y2K
- Millennium Bug in Hiding, So Far
Today's Tasks
Personal Tasks
- Order new computer Not Started
- Intramural soccer match Not Started
Introduction to Music
- Complete Assignment #4 in Progress
more...
Horoscopes
CAPRICORN
Unexpected people find one another at
My Courses
Courses you are teaching:
Introduction to Music
Art History
Intro to Space
Courses in which you are enrolled:
Biology 101
more...
Today's Calendar
9:10am - 10:15am
Introduction to Music: Lecture #3 Warren B45 – remember to bring your instrument
10:30am - 11:45am
Art History: Field trip Today we are visiting the MOMA
more...
Weather
Washington, District of Columbia 51 (F)
sunny
Bethel, Alaska 25 (F)
sunny
Local intranet
500

FIG.5

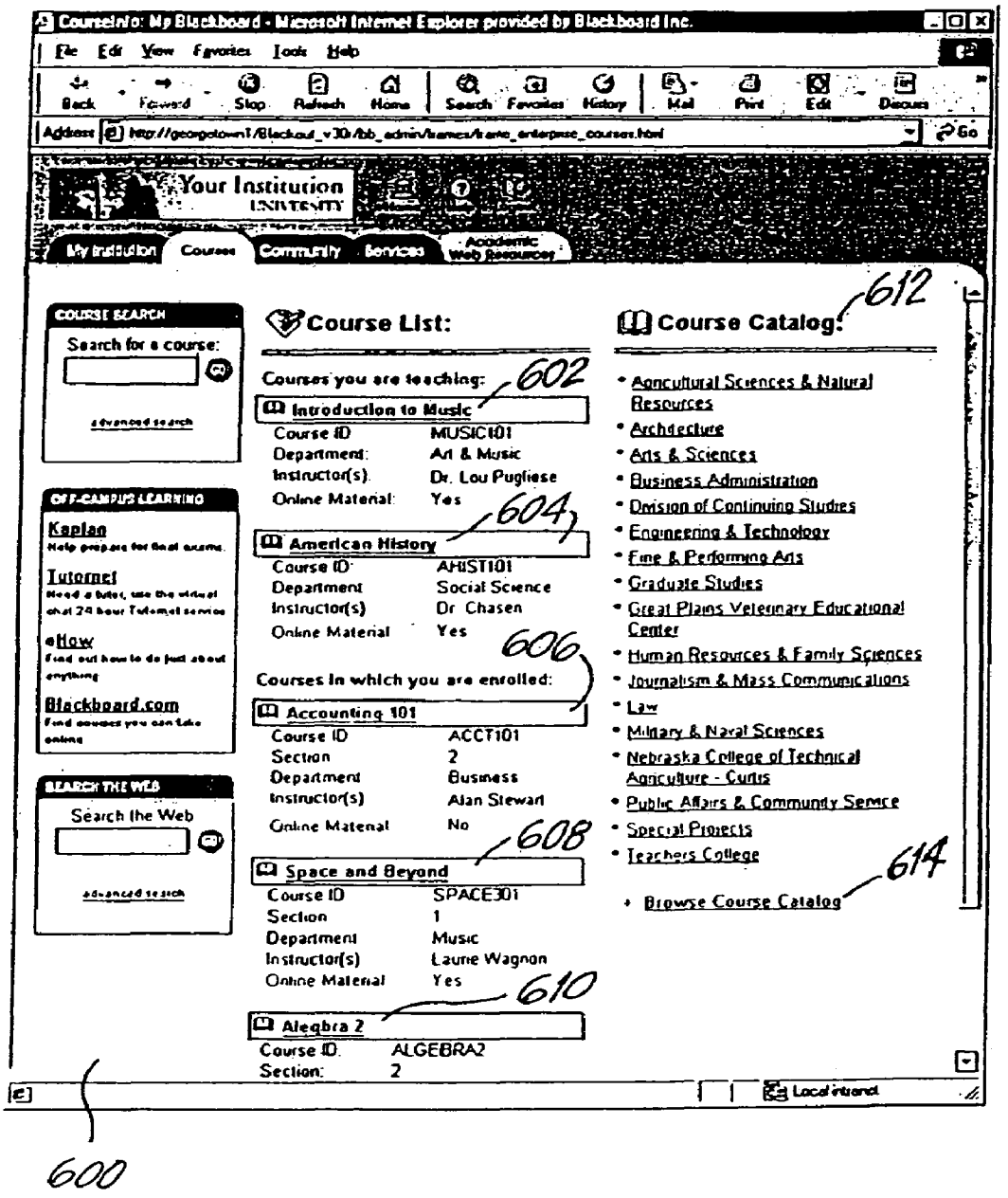

CourseInfo: My Blackboard - Microsoft Internet Explorer provided by Blackboard Inc.
File Edit View Favorites Tools Help
Back Forward Stop Refresh Home Search Favorites History Mail Print Edit Discuss
Address http://georgetown1/Blackboard_v30/bb_admin/frames/frame_enterprise_courses.html
Go
Your Institution
UNIVERSITY
My Institution Courses Community Services Academic Web Resources
COURSE SEARCH
Search for a course:
advanced search
OFF-CAMPUS LEARNING
Kaplan
Help prepare for final exams.
Tutornet
Need a tutor, use the virtual chat 24 hour Tutornet service
eHow
Find out how to do just about anything
Blackboard.com
Find courses you can take online
SEARCH THE WEB
Search the Web
advanced search
Course List:
Courses you are teaching:
602
Introduction to Music
Course ID MUSIC101
Department Art & Music
Instructor(s) Dr. Lou Pugliese
Online Material Yes
604
American History
Course ID AHIST101
Department Social Science
Instructor(s) Dr Chasen
Online Material Yes
606
Courses in which you are enrolled:
Accounting 101
Course ID ACCT101
Section 2
Department Business
Instructor(s) Alan Stewart
Online Material No
608
Space and Beyond
Course ID SPACE301
Section 1
Department Music
Instructor(s) Laurie Wagnon
Online Material Yes
610
Alegbra 2
Course ID ALGEBRA2
Section 2
Course Catalog:
612
Agricultural Sciences & Natural Resources
Architecture
Arts & Sciences
Business Administration
Division of Continuing Studies
Engineering & Technology
Fine & Performing Arts
Graduate Studies
Great Plains Veterinary Educational Center
Human Resources & Family Sciences
Journalism & Mass Communications
Law
Military & Naval Sciences
Nebraska College of Technical Agriculture - Curtis
Public Affairs & Community Service
Special Projects
Teachers College
614
Browse Course Catalog
Local intranet
600

FIG.6

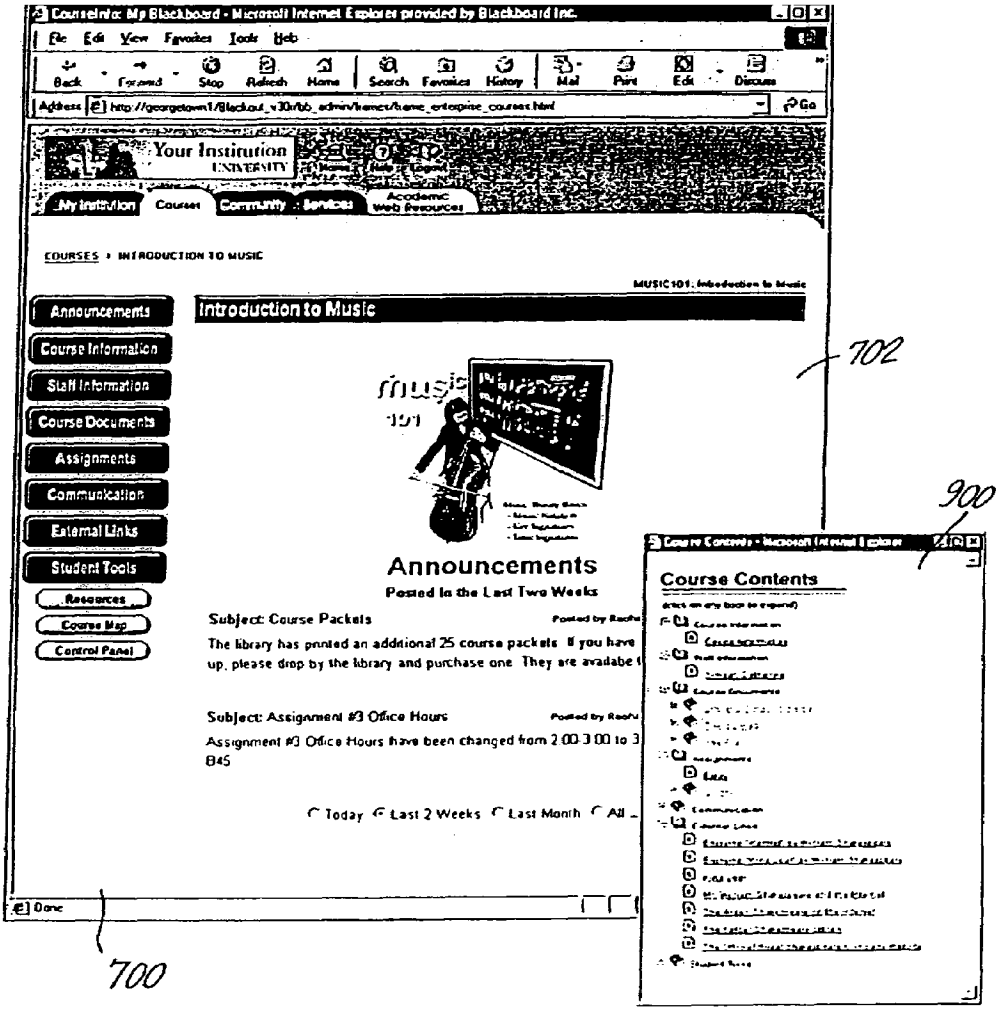

Your Institution
UNIVERSITY
My Institution
Courses
Community
Services
Academic Web Resources
COURSES > INTRODUCTION TO MUSIC
Announcements
Course Information
Staff Information
Course Documents
Assignments
Communication
External Links
Student Tools
Resources
Course Map
Control Panel
Introduction to Music
Announcements
Posted In the Last Two Weeks
Subject: Course Packets
The library has printed an additional 25 course packets If you have
up, please drop by the library and purchase one They are avadabe
Subject: Assignment #3 Office Hours
Assignment #3 Office Hours have been changed from 2 00 3 00 to 3
B45
Today
Last 2 Weeks
Last Month
Course Contents
700
702
900

FIG.7

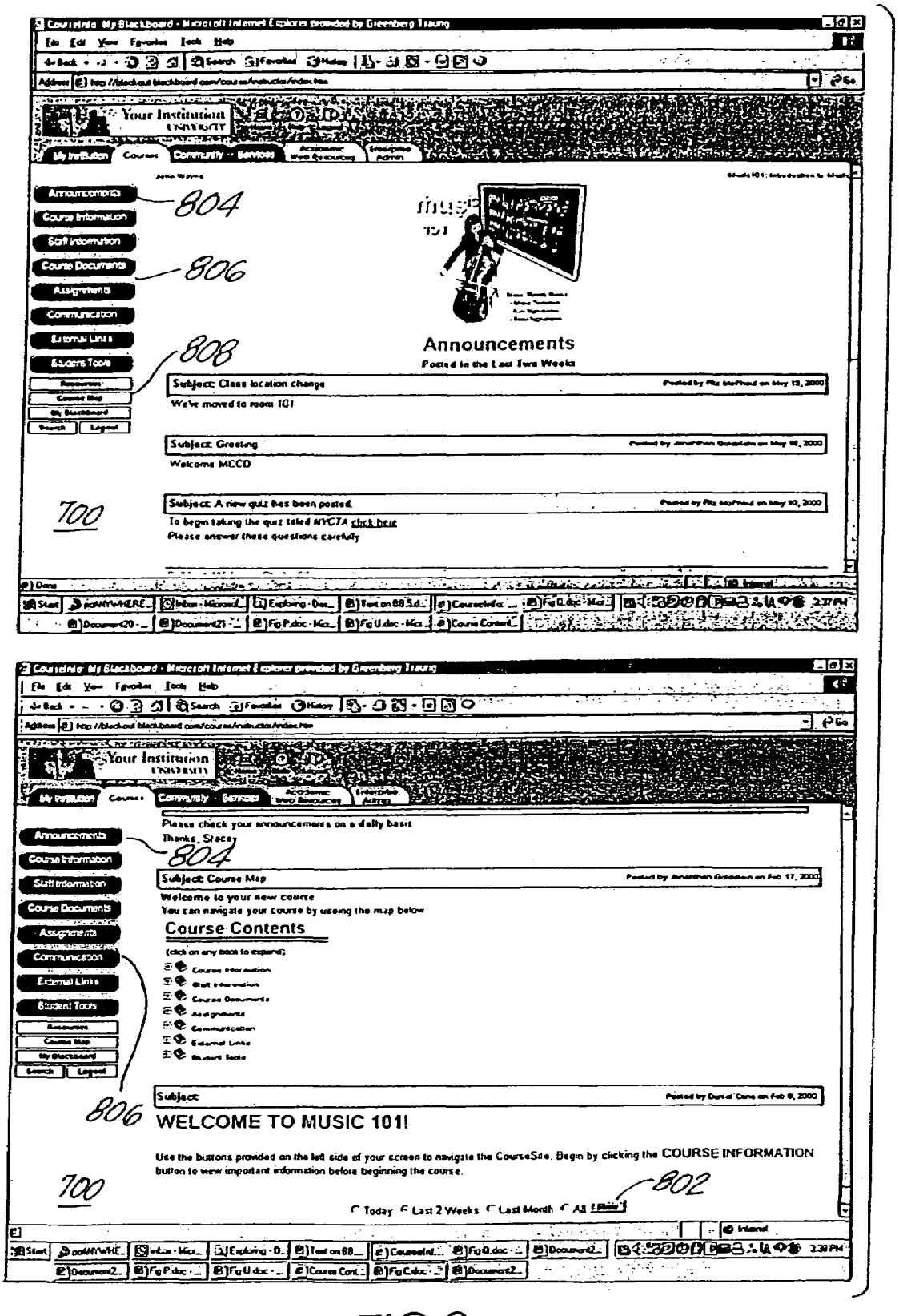

Announcements
804
Course Information
Staff Information
Course Documents
806
Assignments
Communication
External Links
Student Tools
808
Announcements
Posted in the Last Two Weeks
Subject: Class location change
We've moved to room 101
Subject: Greeting
Welcome MCCD
Subject: A new quiz has been posted
To begin taking the quiz titled NYCTA click here
Please answer these questions carefully
700
Please check your announcements on a daily basis
Thanks, Stacey
804
Subject: Course Map
Welcome to your new course
You can navigate your course by using the map below
Course Contents
(click on any book to expand)
806
Subject:
WELCOME TO MUSIC 101!
Use the buttons provided on the left side of your screen to navigate the CourseSite. Begin by clicking the COURSE INFORMATION button to view important information before beginning the course.
700
802
Today
Last 2 Weeks
Last Month
All

FIG.8

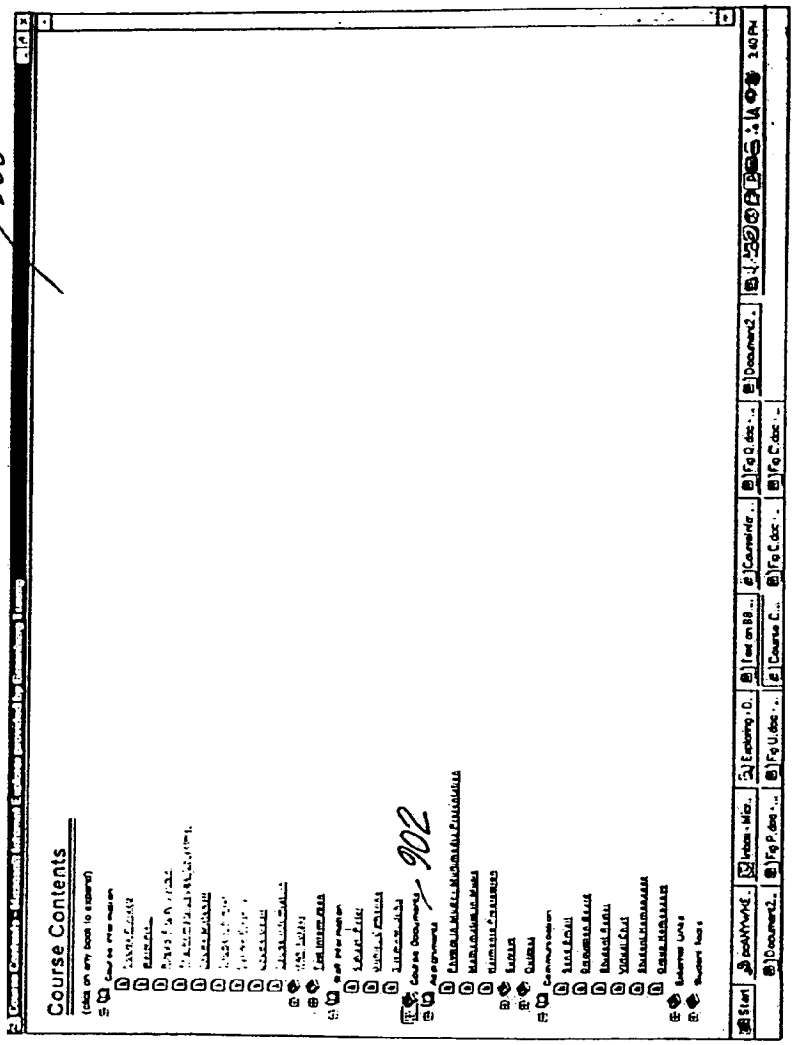


FIG.9

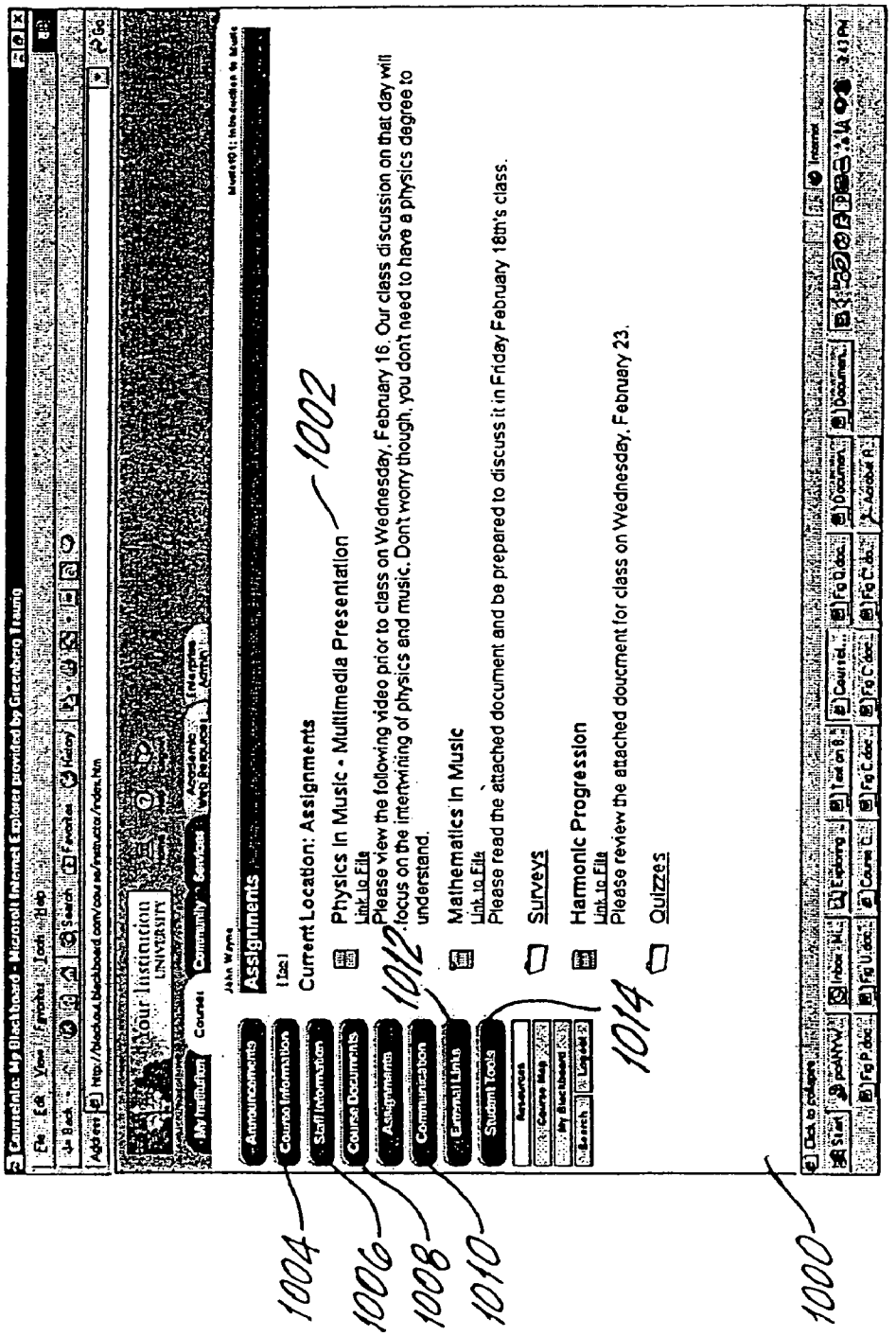
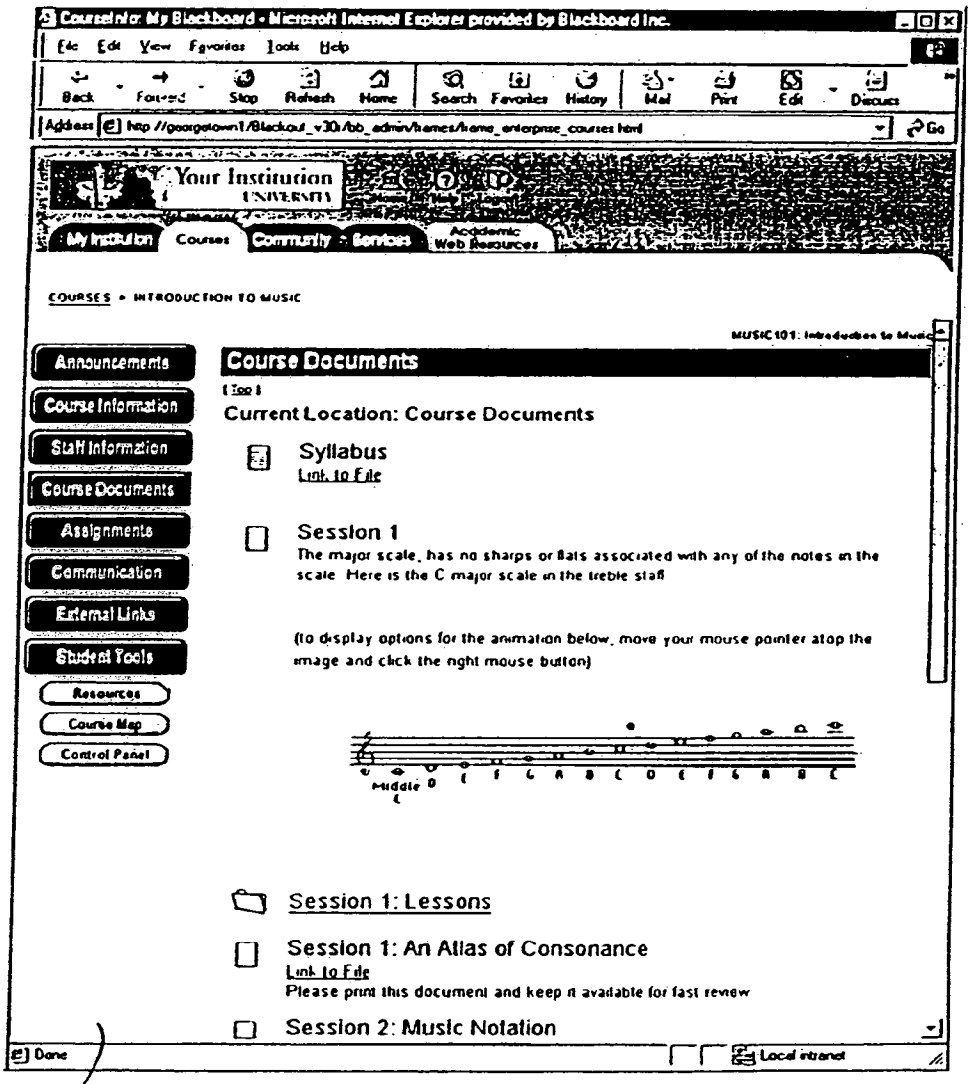

Assignments
Current Location: Assignments
1002
Physics in Music - Multimedia Presentation
Link to File
Please view the following video prior to class on Wednesday, February 16. Our class discussion on that day will focus on the intertwining of physics and music. Don't worry though, you don't need to have a physics degree to understand.
1012
Mathematics in Music
Link to File
Please read the attached document and be prepared to discuss it in Friday February 18th's class.
Surveys
Harmonic Progression
Link to File
Please review the attached document for class on Wednesday, February 23.
1014
Quizzes
1004
1006
1008
1010
1000

FIG.10


Your Institution
UNIVERSITY
My Institution
Courses
Community
Services
Academic Web Resources
COURSES » INTRODUCTION TO MUSIC
Announcements
Course Information
Staff Information
Course Documents
Assignments
Communication
External Links
Student Tools
Resources
Course Map
Control Panel
Course Documents
Current Location: Course Documents
Syllabus
Link to File
Session 1
The major scale, has no sharps or flats associated with any of the notes in the scale. Here is the C major scale in the treble staff.
(to display options for the animation below, move your mouse pointer atop the image and click the right mouse button)
Session 1: Lessons
Session 1: An Atlas of Consonance
Link to File
Please print this document and keep it available for fast review
Session 2: Music Notation
Done
Local intranet

1100

FIG.11

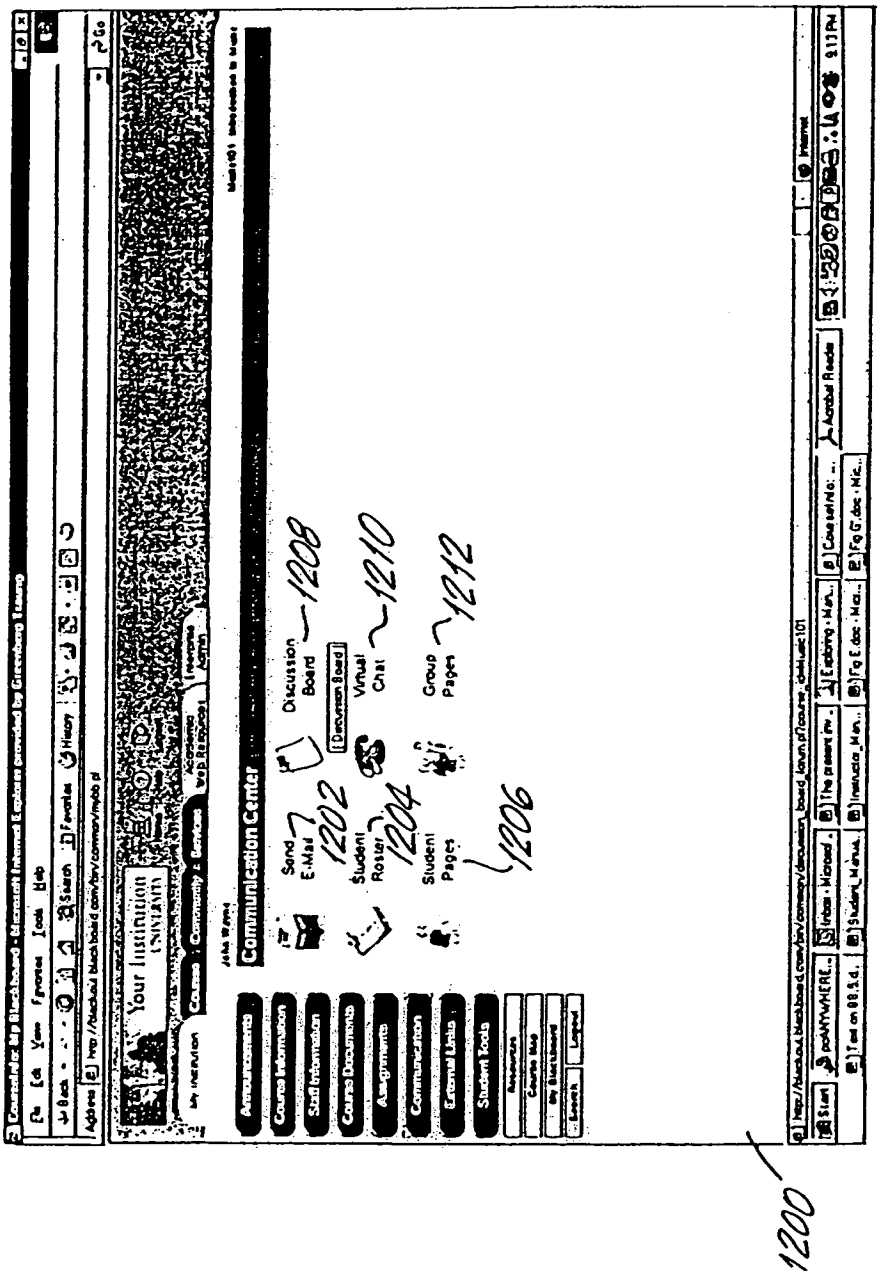

Communication Center
Send E-Mail
Discussion Board
Student Roster
Virtual Chat
Student Pages
Group Pages
1202
1204
1206
1208
1210
1212
1200

FIG. 12

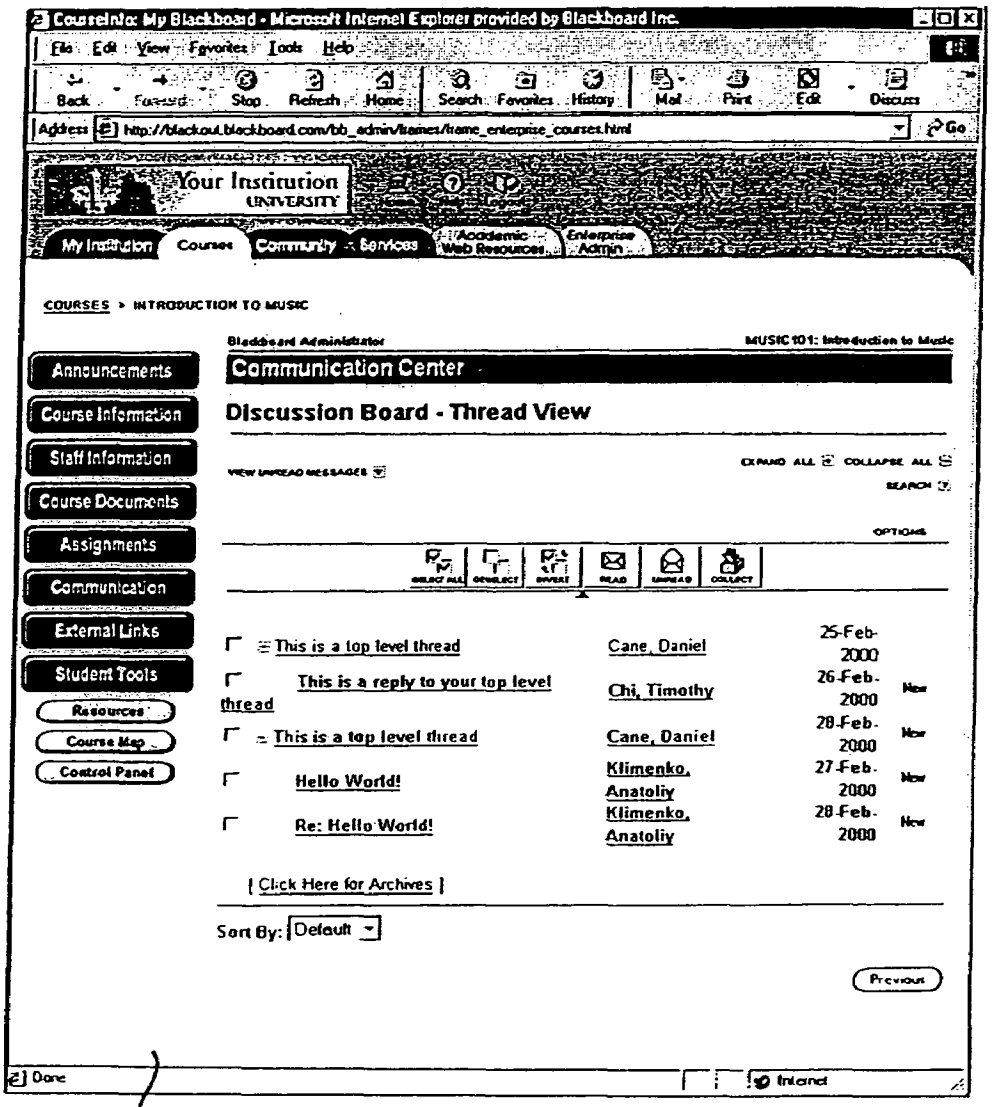

CourseInfo: My Blackboard - Microsoft Internet Explorer provided by Blackboard Inc.
File Edit View Favorites Tools Help
Back Forward Stop Refresh Home Search Favorites History Mail Print Edit Discuss
Address http://blackout.blackboard.com/bb_admin/frames/frame_enterprise_courses.html
Go
Your Institution UNIVERSITY
My Institution Courses Community Services Academic Web Resources Enterprise Admin
COURSES > INTRODUCTION TO MUSIC
Blackboard Administrator
MUSIC 101: Introduction to Music
Announcements
Course Information
Staff Information
Course Documents
Assignments
Communication
External Links
Student Tools
Resources
Course Map
Control Panel
Communication Center
Discussion Board - Thread View
VIEW UNREAD MESSAGES
EXPAND ALL COLLAPSE ALL
SEARCH
OPTIONS
SELECT ALL DESELECT INVERT READ UNREAD COLLECT
This is a top level thread Cane, Daniel 25-Feb-2000
This is a reply to your top level thread Chi, Timothy 26-Feb-2000 New
This is a top level thread Cane, Daniel 28-Feb-2000 New
Hello World! Klimenko, Anatoliy 27-Feb-2000 New
Re: Hello World! Klimenko, Anatoliy 28-Feb-2000 New
[Click Here for Archives]
Sort By: Default
Previous
Done
Internet
1300

FIG.13

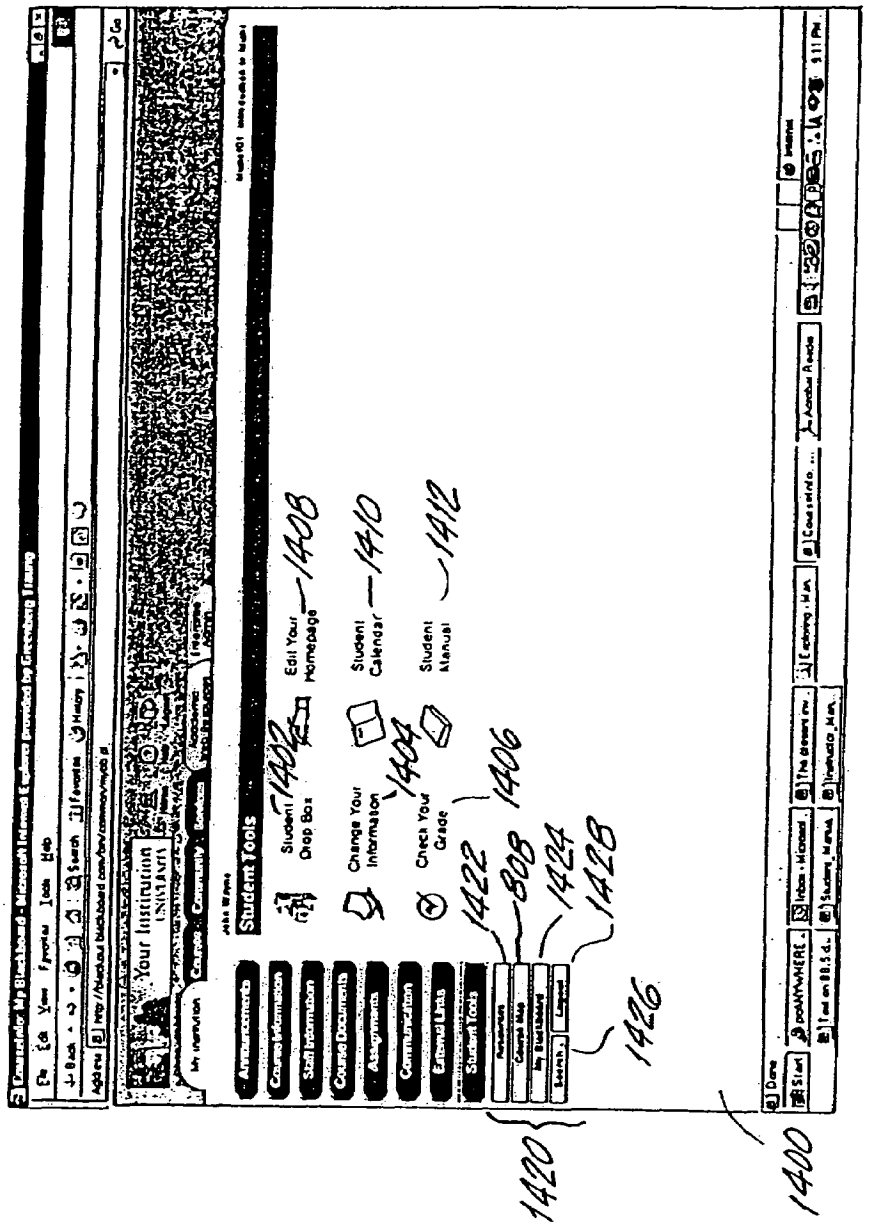

Student Tools
Student Drop Box
Edit Your Homepage
Change Your Information
Student Calendar
Check Your Grade
Student Manual
1402
1404
1406
1408
1410
1412
1420
1422
1424
1426
1428
1400

FIG.14

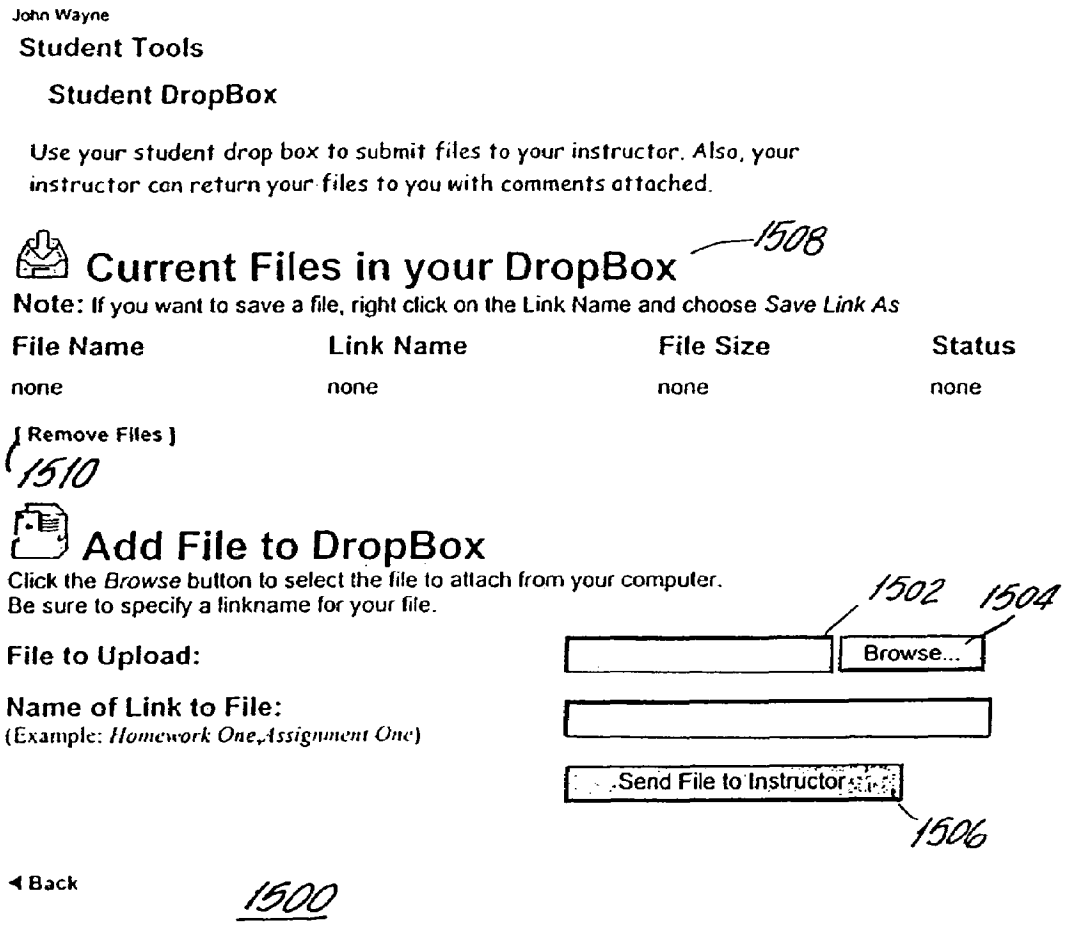

John Wayne
Student Tools
Student DropBox
Use your student drop box to submit files to your instructor. Also, your instructor can return your files to you with comments attached.
Current Files in your DropBox
1508
Note: If you want to save a file, right click on the Link Name and choose Save Link As
File Name
Link Name
File Size
Status
none
none
none
none
[Remove Files]
1510
Add File to DropBox
Click the Browse button to select the file to attach from your computer.
Be sure to specify a linkname for your file.
1502
1504
File to Upload:
Browse...
Name of Link to File:
(Example: Homework One,Assignment One)
Send File to Instructor
1506
Back
1500

FIG.15

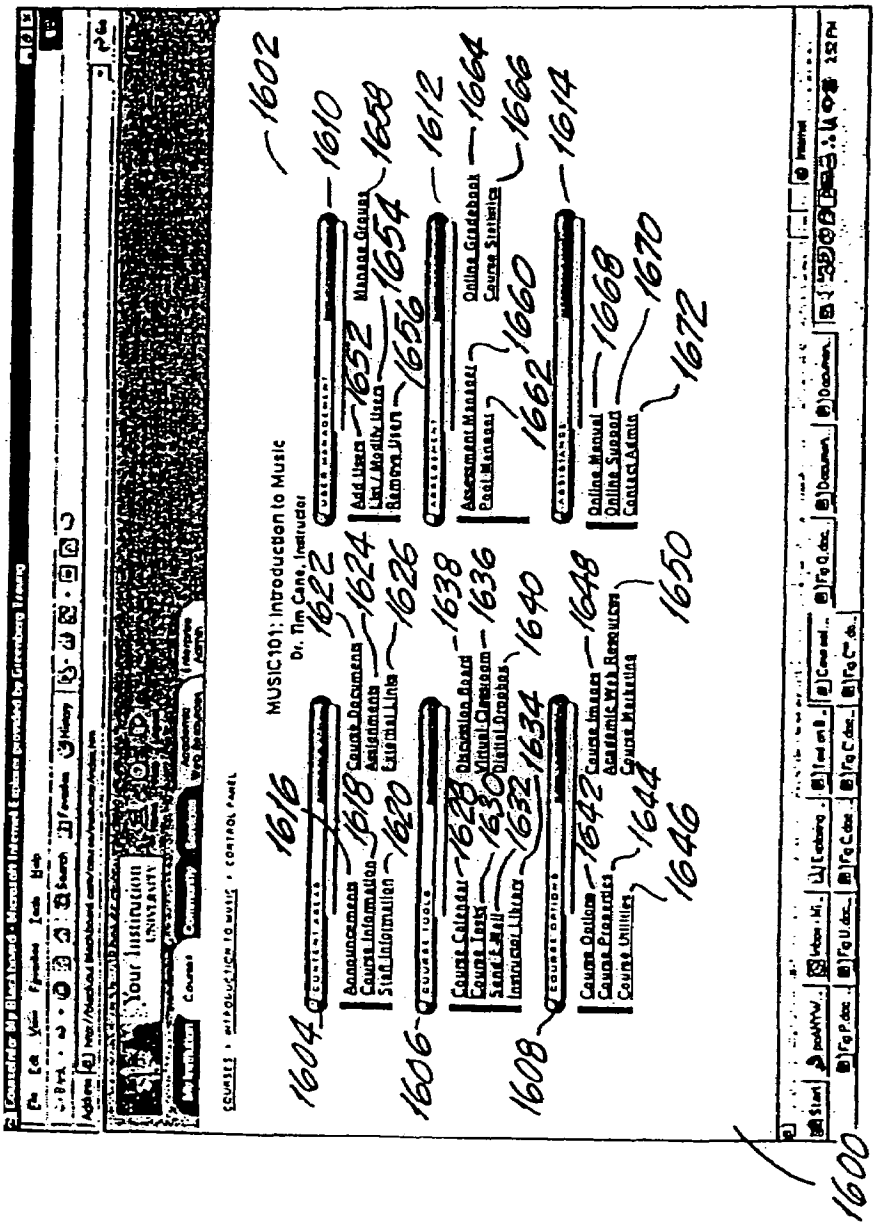

1602
MUSIC101: Introduction to Music
Dr. Tim Cane, Instructor
1604
1606
1608
1610
1612
1614
1616
1618
1620
1622
1624
1626
1628
1630
1632
1634
1636
1638
1640
1642
1644
1646
1648
1650
1652
1654
1656
1658
1660
1662
1664
1666
1668
1670
1672
Announcements
Course Information
Staff Information
External Links
Course Documents
Assignments
Course Calendar
Course Tools
Send Mail
Discussion Board
Virtual Classroom
Digital Dropbox
Instructor Library
Course Images
Course Products
Course Utilities
Academic Web Resources
Course Marketing
Add Users
List / Modify Users
Remove Users
Manage Groups
Assessment Manager
Pool Manager
Online Gradebook
Course Statistics
Course Manual
Online Support
Contact Admin

FIG. 16

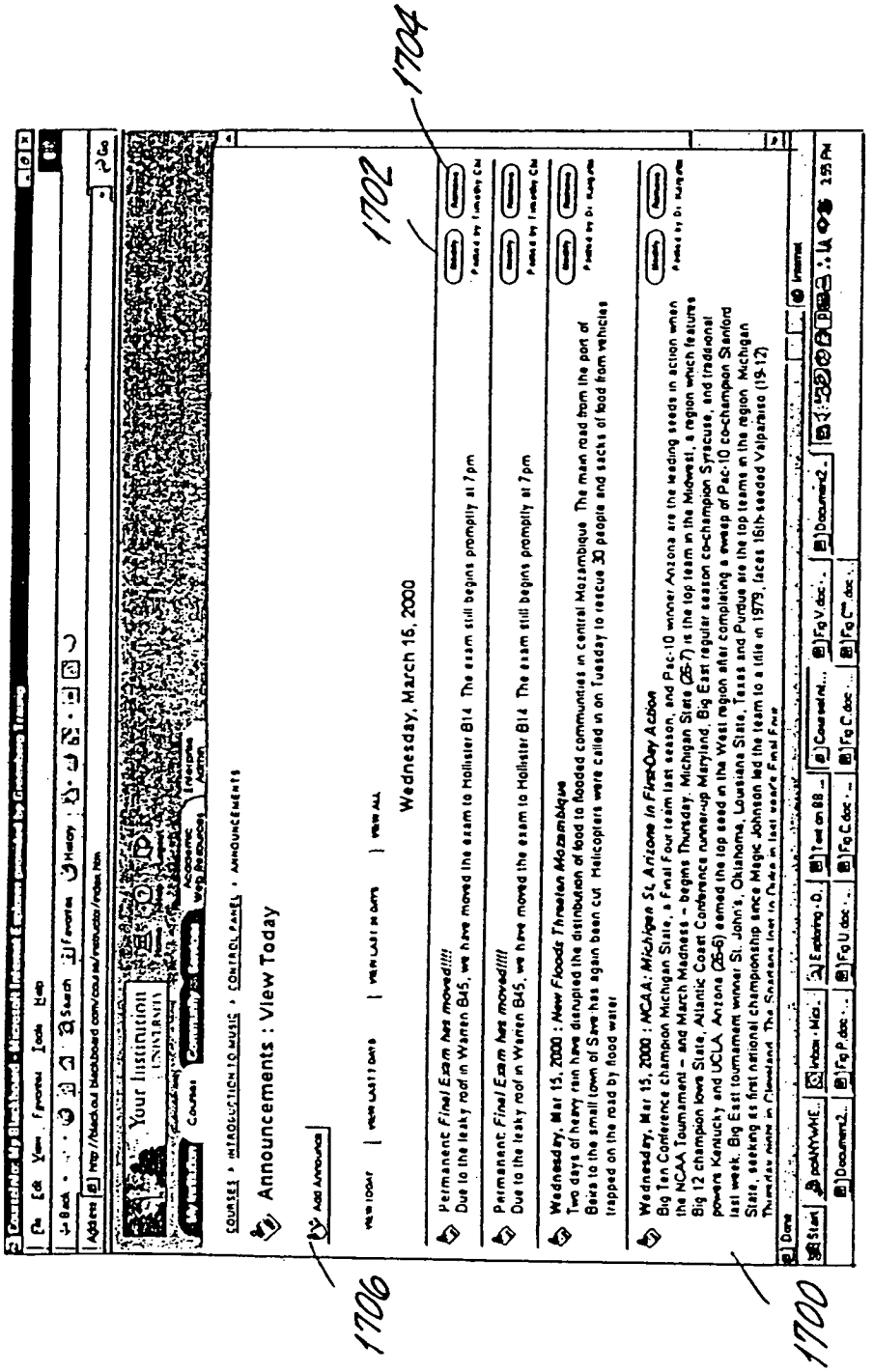

1706
1702
1704
1700
Announcements : View Today
Wednesday, March 15, 2000

FIG.17

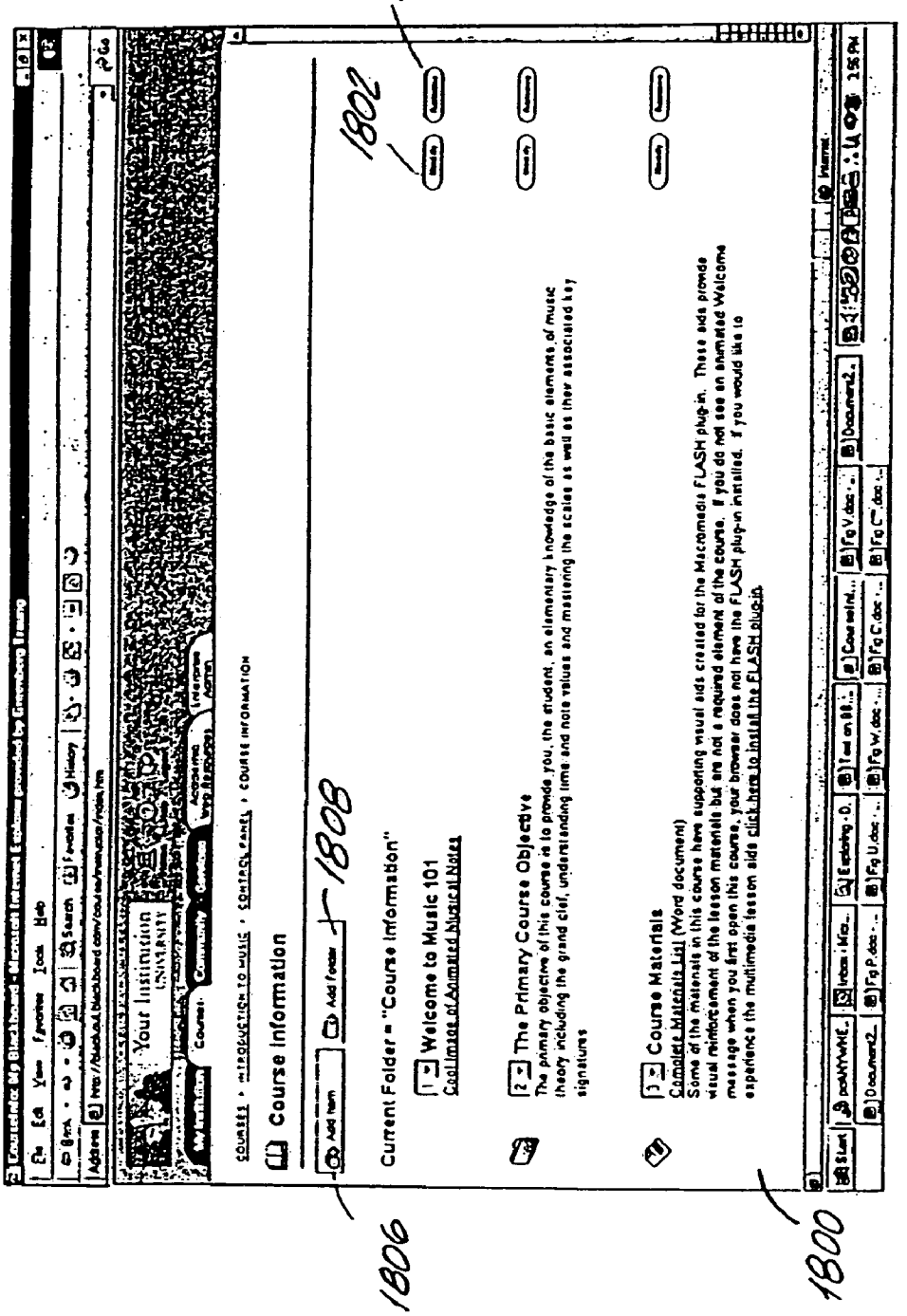

1800
1802
1804
1806
1808
Course Information
Current Folder = "Course Information"
Welcome to Music 101
The Primary Course Objective
Course Materials

FIG. 18