PUBLIC SUBMISSION

As of: 11/19/20 2:59 PM
Received: November 16, 2020
Status: Posted
Posted: November 17, 2020
Tracking No. 1k4-9k45-awg1
Comments Due: December 03, 2020
Submission Type: API

Docket: PTO-C-2020-0055
Request for Comments on Discretion to Institute Trials Before the Patent Trial and Appeal Board

Comment On: PTO-C-2020-0055-0001
Discretion to Institute Trials Before the Patent Trial and Appeal Board

Document: PTO-C-2020-0055-0322
Comment from Stephen Dolle.

Submitter Information

Name: Stephen Dolle
Address:
3908 1/2 River Ave.
Newport Beach, California, 92663
Email: Steve@DolleCommunications.com
Phone: 7147490851
Submitter's Representative: Owner/self
Organization: Dolle Communications

General Comment

I became an inventor and petitioner to the USPO in 1997 after undergoing (3) unsuccessful brain surgeries with CNS shunt medical implants for the condition hydrocephalus, that followed an auto accident in 1992. Prior to that, I had provided nuclear medicine imaging of these patients with CNS shunts. After (3) failed surgeries over 4 years, and no answers from some of the best minds in neurosurgery, and began doing my own research and that eventually led me to petition our Food & Drug Administration over failures of a specific model type, termed antisiphon shunts. I spent one year preparing my FDA petition. And once I filed it in Nov. 1996, I embarked on designing an AI dx solution for shunt failure. It took me another year to come of with my design. I initially filed a provisional patent, and within 1 yr convinced my father to pay for much of the full filing fee by a patent law firm.

You see, people like me solve problems, design, and patent their solutions. Corporations largely do not. They "buy" inventors and "designers," or buy finished designs & patents. What this means, is that the USPO rulescand regulations must be written to nurture people like me, not so

much big corporations & banks. To add insult to injury after all my efforts, our FDA acted to protect the large medical mfrs who had designed & sold bad technology, which our NIH agency had strict requirements in 1998-99 in regards to who was ablecto apply for NIH grants. And I was never able to get funding and develop my "DiaCeph Test." It remains today as paper forms & user instructions but is available free around the world. I've had to undergo 9 more brain shunt surgeries in the years since, and knew and spoke to many families who lost loved ones to hydrocephalus, that my finished DiaCeph Test might have saved many of them, or improved their quality of life. I used the paper forms & instructions to co-direct my last 9 brain surgeries. It also took 16 years & 8 brain surgeries to get the swelling on my brain to become normal again, because of the high degree of misinformation and absent diagnosticscwith CNS shunts. I became a neuroscientist out of all these experiences, and have worked an a number of other important brain projects. But no additional patients. I also was financially unable to pay my 10 or 15 yr patent maintenance fee. Lots of lessons here for every person, organization, and and government agency involved. Even after 23 years, my AI healthtech diagnostics design is still the state of the art in mobile apps.

Attachments

20200926_163216

Google play-logo.White border White font

1999 Wash DC FDA Conf0001(1)

4c. EMI Records Tribute Best Red Orange-picsay4