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Attorneys for Defendants
DEPUY ORTHOPAEDICS, INC., DEPUY, INC.,
DEPUY INTERNATIONAL LIMITED,
JOHNSON & JOHNSON INTERNATIONAL,
JOHNSON & JOHNSON SERVICES, INC., AND
JOHNSON & JOHNSON

IN RE DEPUY ASR™ HIP IMPLANTS LITIGATION	SUPERIOR COURT OF NEW JERSEY LAW DIVISION: BERGEN COUNTY CASE CODE 293 CIVIL ACTION
This Document Relates to All Actions	**CASE MANAGEMENT ORDER NO. 9**

THIS MATTER having been opened to the Court by lead counsel for the parties, and the parties consenting to the form, substance and entry of the Order, and for good cause shown,

IT IS on this 28 day of September 2011;

ORDERED as follows:

I. SCOPE OF THE ORDER

This Order applies to all DePuy ASR™ Hip Implant Products Litigation actions centralized for coordinated management in the Bergen County Vicinage and all those hereinafter filed or transferred to the Bergen County Vicinage pursuant to the Supreme Court Order dated April 12, 2011.

II. DEFENSE FACT SHEETS

1. The Defense Fact Sheet ("DFS") in the form attached as Exhibit A is hereby approved by the Court with the consent of counsel.

2. The DePuy Defendants in each action currently pending before the Court shall complete and serve upon Plaintiff's Liaison Counsel a completed DFS within 120 days from the date the Plaintiffs' Fact Sheet ("PFS") is served on Defendants' Counsel as prescribed in Case Management Order No. 8. The individual DFS shall also be served on the counsel identified in Section I of the PFS by regular or electronic mail. The DFSs shall be completed and served on a rolling basis.

3. An alleged deficiency in the PFS will not delay service of the DFS unless the deficiency materially and substantially impacts the DePuy Defendants' ability to complete the DFS.

4. For all cases transferred to this Court after the date of this Order, the DePuy Defendants shall complete a DFS and serve upon each individual Plaintiff's counsel identified in Section 1 of the PFS and upon Plaintiff's Liaison Counsel a completed DFS by regular or electronic mail within 120 days from service of the PFS.

5. Nothing in the DFS shall be deemed to limit the scope of inquiry at depositions and admissibility of evidence at trial. The scope of inquiry at depositions shall remain governed by the New Jersey Rules of Court. The admissibility of information in the DFS shall be governed by the Rules of Court, and no objections are waived by virtue of any fact sheet response.

6. The parties and their counsel are reminded as to the applicability of the Stipulated Protective Order (Case Management Order No. 6).

7. The parties may agree to an extension of the above time limits for service of the DFS. Consideration should be given to requests for extensions to stagger DFS deadlines where the DePuy Defendants have a large number due on or near the same dates. If the parties cannot agree on reasonable extensions of time, such party may apply to the Court for such relief upon a showing of good cause.

IT IS SO ORDERED.

BRIAN R. MARTINOTTI, J.S.C.

EXHIBIT A

IN RE DEPUY ASR™ HIP IMPLANTS LITIGATION	SUPERIOR COURT OF NEW JERSEY LAW DIVISION: BERGEN COUNTY CASE CODE 293 CIVIL ACTION **DEFENDANTS' FACT SHEET**

Defendants DEPUY ORTHOPAEDICS, INC., DEPUY, INC., DEPUY INTERNATIONAL LIMITED, JOHNSON & JOHNSON INTERNATIONAL, JOHNSON & JOHNSON SERVICES, INC. and JOHNSON & JOHNSON (collectively "Defendants," "You" or "Your") hereby submit the following Defendants' Fact Sheet responses and related Documents for the above referenced case.

INSTRUCTIONS

Please provide the following information for plaintiff (or plaintiff's decedent) (hereinafter "Plaintiff") who was implanted with an ASR Hip System or any components thereof (hereinafter "Device") that is the subject of Plaintiff's complaint in the above referenced action, and who subsequently had a revision of said implantation. In filling out any section or sub-section of this form, please submit additional sheets as necessary to provide complete information.

In filling out this form, please respond on the basis of information and/or documents that are reasonably available to each of the Defendants, the Sales Representative Company that supplied the implant, and the Sales Representative who was present at the implantation and explantation. Please use the definition of "ASR Hip Systems," "Documents," and "Communication," set forth in Plaintiffs' First Request for the Production of Documents to Defendants served on March 29, 2011 in the MDL 2197. Also, please use the following definition for "Healthcare Providers": All Persons identified in Section II of the Plaintiff Fact Sheet submitted by Plaintiff who performed implantation or revision surgery to implant or explant Plaintiff's Device.

"Produce" shall be defined as to identify where in the general document production the documents requested may be located, either by Bates Number or by some other identifier (e.g., Complaint file number or keywords which may yield the documents).

In completing this Defendants' Fact Sheet, You are under oath and must provide information that is true and correct to the best of Your knowledge, information and belief. If the response to any question is that You do not know the information requested, that response should be entered in the appropriate location(s).

A. CASE AND RESPONSE INFORMATION

1. This Defendant Fact Sheet pertains to the following case:

Case Caption: _____
Case Action No.: _____
Court in which action originally filed: _____

B. DEVICE MANUFACTURE INFORMATION

1. For each Device identified by Plaintiff in response to Section II of the Plaintiff Fact Sheet (hereinafter "PFS") submitted by Plaintiff, please provide the following:

a. The date(s) on which Plaintiff's Device and any components thereto were manufactured (indicating date for each Device or component identified).

_____

_____

_____

b. The facilities at which Plaintiff's Device and any components thereto were manufactured (indicating location/address for each Device or component identified). _____

_____

_____

c. The date of shipment of Plaintiff's Device from DePuy.

d. The Identity of the entity that delivered Plaintiff's Device to the Purchaser.

e. Other than DePuy related entities, and those entities listed in Sections B and C herein, the chain of custody of the device from DePuy to the healthcare provider.

f. The identity by name and address of the person or entity to whom the Device was sold.

g. Produce the Device History Record for the Device.

2. For each Device identified by Plaintiff in response to Section II of the PFS submitted by Plaintiff, please provide the following:

   a. Produce a copy of the complaint file(s), including medical records, if any, for the Plaintiff.

   b. Please provide the complaint file number(s) that would permit Plaintiff to identify his/her complaint file, if any, in the general document production.

_____

_____

C. PRODUCT/ MARKETING/ SALES REPRESENTATIVE AND MANAGER INFORMATION

1. Provide the name and business address of the sales representative company that received the Device that was implanted in Plaintiff.

_____

_____

_____

2. Provide the name and business address of the sales representative(s) present at the surgical facility at the time Plaintiff's Device (or any component) was implanted and/or at the time Plaintiff's Device (or any component) was explanted.

_____

_____

_____

3. Produce documents that relate in a reasonably direct manner to the ASR Hip System from the sales representative company identified in question C.1, above.

D. COMMUNICATIONS AND RELATIONSHIPS WITH PLAINTIFFS' HEALTHCARE PROVIDERS AND PLAINTIFF

1. Produce Communications between the Defendants, the sales representative company and/or sales representative(s) identified in section C above and Plaintiff's Healthcare Provider(s) about any ASR Hip Systems, including but not limited to Dear Healthcare Provider letters, recall letters, telephone or email contacts or meetings.

2. Produce Communications between the Defendants, the sales representative company and/or sales representative(s) identified in section C above and Plaintiff, to the extent not contained in the complaint file, if any, and identify the Bates numbers of such communications.

3. Produce documents that relate in a reasonably direct manner to consulting agreements, if any between Defendants and any of Plaintiff's Healthcare Providers, including but not limited to all consulting relationships to provide advice on the design, study, testing or use of hip replacement systems, or to consult as a thought leader, opinion leader, member of a speaker's bureau or similar arrangement.

4. Produce documents that relate in a reasonably direct manner to relationships, if any, between Defendants and any of Plaintiff's Healthcare Providers to conduct any pre-clinical, clinical, post-marketing surveillance or other study or trial concerning any hip replacement systems including but not limited to any ASR Hip System.

5. Produce documents that reflect financial compensation, things of value and promotional items provided by Defendants to Plaintiff's Healthcare Providers. Please include all fees, expenses, honoraria, royalties, grants, gifts, travel (i.e., airfare, hotel etc.) and any other payments or things of value given.

E. ADVERSE EVENT REPORTS

1. Provide the identification number for any Medical Device Adverse Event Report.

F. BROADSPIRE

1. Identify any claim file that has been opened by Broadspire concerning Plaintiff, including the date the file was opened and any file number assigned.

2. Identify all Communications between Broadspire (and anyone acting on Broadspire's behalf) and any of Plaintiff's Healthcare Providers about Plaintiff. Please provide a description of the Communication, the date the Communication was made and the general subject matter of the Communication.

3. Identify all Communications between Broadspire (and anyone acting on Broadspire's behalf) and Plaintiff. Please provide a description of the Communication, the date the Communication was made and the general subject matter of the Communication.

4. Identify all payments made to Plaintiff directly, or others on Plaintiff's behalf, by Broadspire. For each payment, please Identify the Person who made the payment, the Person paid, the amount paid, the date paid and the reasons for such payment.

5. Produce all documents Broadspire has obtained directly from the Plaintiff.

6. Produce all documents Broadspire has obtained from sources other than Plaintiff (Plaintiff's Healthcare providers, employers, insurers, or others) using an authorization executed by Plaintiff. Identify any and all payments made by Broadspire on behalf of Plaintiff to any medical providers who have asserted or may assert liens against Plaintiffs recovery.

7. Identify and produce all medical or laboratory records relating to plaintiff obtained by DePuy, Johnson and Johnson and/or Broadspire through the use of a written authorization.

VERIFICATION

I am employed by DePuy Orthopaedics, Inc., one of the Defendants in this action. I am authorized by Defendants to make this verification on each corporation's behalf. The foregoing answers were prepared with the assistance of a number of individuals, including counsel for Defendants, upon whose advice and information I relied. I declare under penalty of perjury that all of the information as to the foregoing Defendants provided in this Defendants' Fact Sheet is true and correct to the best of my knowledge upon information and belief.

Date: _____

_____
Signature

Name: _____
Employer: _____
Title: _____

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