

**Exhibit B**  
**November 4, 2002 Deficiency Notice**

***Claims Administrator***

**Sulzer Settlement Trust**  
P.O. Box 94558  
Cleveland, Ohio 44101-4558  
Telephone: (800) 683-1861

November 4, 2002

Mrs. Jane M. Livingston  
C/o Donald K. Greer, Jr., Esquire  
2405 HWY 71  
Spring Lakes Hts., WI 07762

**Re: Sulzer Settlement Claim Status Notification**  
**Claimant Name: Jane M. Livingston**  
**Sulzer Settlement Claim Number:**

Dear Mrs. Livingston:

The Claims Administrator for the Sulzer Settlement Trust has received materials related to your Claim for benefits pursuant to the Settlement in *In re: Sulzer Hip Prosthesis and Knee Prosthesis Product Liability Litigation*. We have determined that additional information is required to complete your Claim.

We have received the following:

- Orange Form submission, claiming Affected Product Revision Surgery Fund benefits.
- Green Form submission, claiming Extraordinary Injury Fund benefits.

To complete your Claim for benefits you must submit the following:

- The information and medical records requested by Question 11 of the Green Form (Matrix Level IV), A copy of Green Form Question 11 is enclosed.
- Proof that you were implanted with an Affected Product as required in Question 7 of the Orange Form. A copy of Orange Form Question 7 is enclosed.

**To complete your Claim for benefits, you must mail the required material to the Claims Administrator at the above address, postmarked on or before Jan. 20, 2002. The Claims Administrator shall issue a Preliminary Determination within 90 days of the receipt of any supplemental information that cures this deficiency. The Preliminary Determination will clarify what benefits, if any, to which the Claimant is entitled.**

Capitalized terms in this letter shall have the meanings given them in the Settlement Agreement. If you have any questions, contact the Claims Administrator's office at (800) 683-1861 or by mail at the above address. When contacting the Claims Administrator, please have your Sulzer Settlement Claim Number available or include it on any written correspondence.

Sincerely,

Claims Administrator

Enclosure(s)