

# DME Submission Form

Building and maintaining OTLA's DME Fileshare requires members to submit new DME documents with a summary description of each new document. The DME Fileshare is the result of hundreds of hours of volunteer time spent summarizing depositions from members just like you.

To submit a document to the DME Fileshare, either go online and click [Upload Document](#) or fill out this form and send it, along with a copy of the document, to [otla@oregontriallawyers.org](mailto:otla@oregontriallawyers.org) or mail to 812 SW Washington Ste 900, Portland, OR 97205. You must fill out separate forms for each document if you are submitting more than one document.

Document date: \_\_\_\_\_

Doctor's name: \_\_\_\_\_

Doctor's specialty: \_\_\_\_\_

Plaintiff attorney: \_\_\_\_\_

Defense attorney: \_\_\_\_\_

Type of injury: \_\_\_\_\_ No. of pages: \_\_\_\_\_

Document type (please mark):

- |   |  |  |
|---|--|--|
| <input type="radio"/> Article               | <input type="radio"/> Malpractice      | <input type="radio"/> Defense medical exam |
| <input type="radio"/> Court transcript      | <input type="radio"/> information      | <input type="radio"/> Other:               |
| <input type="radio"/> Deposition transcript | <input type="radio"/> PIP medical exam | _____                                      |

Summary (REQUIRED for each individual document):

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Submitted to Fileshare by: \_\_\_\_\_ Date: \_\_\_\_\_