



# Oregon

Kate Brown, Governor

## Oregon State Police Medical Examiner Division

13309 S.E. 84<sup>th</sup> Ave, Suite 100

Clackamas, OR 97015

(971) 673-8200

FAX (971) 673-8321

Forensic Pathologists:

Karen Gunson, M.D.  
State Medical Examiner

Larry V. Lewman, M.D.  
Clifford C. Nelson, M.D.  
Christopher R. Young, M.D.

Daniel W. Davis, M.D.  
Deputy State Medical Examiner

Eugene S. Gray  
Forensic Administrator

### MEDICAL EXAMINER REQUEST GUIDELINES

Oregon State Medical Examiner Laws state: "Any parent, spouse, sibling, child or personal representative of the deceased, or any person who may be criminally or civilly liable for the death, or their authorized representatives respectively, or those within the bounds of the Protection and Advocacy for Individuals with Mental Illness Act, may examine and obtain copies of any medical examiner's report, autopsy report or laboratory test report ordered by a medical examiner under ORS 146.117."

Those who fall under the above categories and would like to receive a copy of the Medical Examiner Report, Autopsy Report or Toxicology Report should follow the guidelines listed below. Any requests that do not include ALL needed documentation will be denied.

#### PARENT, SPOUSE, SIBLING, CHILD or PERSONAL REPRESENTATIVE OF THE DECEASED

- Please complete request form with current address, telephone and signature.
- PERSONAL REPRESENTATIVES: must provide documentation showing their representation.
- There is no fee required for the first copy provided to families.

#### PHYSICIANS, HOSPITALS, CLINICS, MENTAL HEALTH AGENCIES, ETC.

- We do not release records for quality control or completion of files without next-of-kin permission in writing.
- Physicians wanting to review their cases can request records by completing the request form.
- Those needing reports for civil or criminal cases should state that on the request form.
- Mental Health Agencies must clearly state the jurisdiction under which they are investigating.

#### LAW ENFORCEMENT, GOVERNMENT AGENCIES, ETC.

- We do not release records for quality control or completion of files without next-of-kin permission in writing.
- For investigations: Please complete Request Form or provide a letter on your agency letter head that includes the following information: (1) Full name of the deceased (2) Date of Death (3) County of Death (4) Your Name and Title (5) Your affiliation with this case (6) Your mailing address and contact phone number.

#### INSURANCE COMPANIES, ATTORNEYS, ETC. (Fee Required)

- Please complete the Medical Examiner Record Request Form or provide a letter on your agency letterhead that includes the following information: (1) Full name of the deceased (2) Date of Death (3) County of Death.
- For All Oregon Counties (excluding Multnomah County): A processing fee of \$25.00 made payable to the "Oregon State Medical Examiner" must be received before records are released.
- For Multnomah County: A processing fee of \$25.00 made payable to the "Multnomah County Medical Examiner" must be received before records are released.
- There may be additional costs for other items.

#### REQUESTS FOR MEDICAL EXAMINER RECORDS SHOULD BE SENT TO:

##### FOR ALL COUNTY DEATHS (excluding Multnomah)

***Oregon State Medical Examiner***

***13309 SE 84<sup>th</sup> Ave. Suite 100***

***Clackamas, OR 97015***

***FAX: 971-673-8321***

***Email: [Medical.Examiner.Records@state.or.us](mailto:Medical.Examiner.Records@state.or.us)***

##### FOR MULTNOMAH COUNTY DEATHS:

***Multnomah County Medical Examiner***

***13309 SE 84<sup>th</sup> Ave. Suite 100***

***Clackamas, OR 97015***

***FAX: 971-673-8321***

***[Medical.Examiner@multco.us](mailto:Medical.Examiner@multco.us)***

#### For questions regarding records please contact:

Kari Ellis 971-673-8200 for All County Records excluding Multnomah and Clackamas County

Shana Aivaliotis 971-673-8220 for Multnomah County Records

Terri Harris 503-731-3020 for Clackamas County Records



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### MEDICAL EXAMINER RECORDS REQUEST FORM

Please see guidelines for requesting Medical Examiner Records for fee information

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Forensic Administrator

TODAY'S DATE: \_\_\_\_\_

DECEDENT'S FULL NAME: \_\_\_\_\_

DECEDENT'S DATE OF DEATH: \_\_\_\_\_

COUNTY WHERE DEATH OCCURRED: \_\_\_\_\_

**YOUR RELATIONSHIP TO DECEASED:**

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> A Parent (No fee)  | <input type="checkbox"/> Personal Representative         | <input type="checkbox"/> Law Enforcement                        |
| <input type="checkbox"/> A Spouse (No fee)  | <input type="checkbox"/> Attending or Personal Physician | <input type="checkbox"/> Insurance Company (\$25 Fee)           |
| <input type="checkbox"/> A Child (No fee)   | <input type="checkbox"/> Criminal Defendant or Attorney  | <input type="checkbox"/> Civil Defendant or Attorney (\$25 Fee) |
| <input type="checkbox"/> A Sibling (No fee) | <input type="checkbox"/> Mental Health Investigator      | <input type="checkbox"/> Other _____                            |

REQUESTER NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

AGENCY NAME (IF APPLICABLE): \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

TELEPHONE: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

REQUESTER SIGNATURE: \_\_\_\_\_

**NOTE:** Toxicology processing takes several weeks for results to be completed. Reports will be mailed together when ALL reports have been completed.

**PRINT THIS FORM THEN FAX, ATTACH TO EMAIL OR MAIL (WITH FEE IF APPLICABLE) TO:**

**FOR ALL COUNTY DEATHS (Excluding Multnomah):**

**Oregon State Medical Examiner/Clackamas County**  
13309 SE 84<sup>th</sup> Ave. Suite 100  
Clackamas, OR 97015

**FAX: 971-673-8321**

**EMAIL: Medical.Examiner.Records@State.OR.US**

**ALL CHECKS PAYABLE TO:**  
**"Oregon State Medical Examiner"**

Questions: Kari Ellis at 971-673-8200  
Clackamas County questions: Terri Harris at 503-655-8380

**FOR MULTNOMAH COUNTY DEATHS:**

**Multnomah County Medical Examiner**  
13309 SE 84<sup>th</sup> Ave. Suite 100  
Clackamas, OR 97015

**FAX: 971-673-8321**

**EMAIL: Medical.Examiner@Multco.US**

**CHECKS PAYABLE TO:**  
**"Multnomah County Medical Examiner"**

Multnomah County questions: Shana Aivaliotis 971-673-8220