

Med-Law Summaries, Inc.

568 Coopers Landing Rd., Heathsville, VA 22473
Phone: (804) 453-0241 | Email: solutions@med-laws.com

Order Form

Company:

Address:

Contact Name:

Plaintiff's Name:

Phone:

Estimated # of pages:

Please place an X in the box to the left of the summary package selected

BASIC SOLUTIONS

Chronological Organization
Annotated Index Summary

BASIC PLUS

Chronological Organization
Annotated Index Summary
Chronological Medical History
Identification of Medical Providers

STANDARD SOLUTIONS

Chronological Organization
Narrative Summary

STANDARD PLUS

Chronological Organization
Narrative Summary
Chronological Medical History
Identification of Medical Providers

DELUXE SOLUTIONS

Chronological Organization
Comprehensive Summary

DELUXE PLUS

Chronological Organization
Comprehensive Summary
Chronological History
Identification of Medical Providers

Client Instructions/Comments:

--	--	--

Client Signature:

Title:

Date:

*Please contact our office for confirmation of service before sending medical records. Once confirmation has been obtained, please mail a copy of the medical records, along with this order form to:
Med-Law Summaries, Inc., 568 Coopers Landing Rd., Heathsville, VA 22473*