



Oregon Negligence/Malpractice Claim Report Form
Oregon Board of Dentistry
 1600 SW 4th Avenue, Suite 770 • Portland, Oregon 97201
 (971) 673-3200 • www.oregon.gov/Dentistry

ORS 742.400(2) Within 30 days after receiving notice of a claim a reporter listed in ORS 742.400(1)(d)(A)(B)(C) and (D) shall report the disposition of the claim to the appropriate Board. ORS 742.400(1)(a) defines a claim as a written demand for payment for an injury alleged to have been caused by professional negligence that is made in a complaint filed with a court of appropriate jurisdiction. Disposition of a claim means:

- A. A judgment or award against the covered practitioner by a court, jury or an arbitrator.
- B. A withdrawal or dismissal of the claim.
- C. A settlement of the claim.

Covered Practitioner (DMD, DDS, RDH only):

License #: D8328	Name: John T. Tran, DMD	Phone: (503)235-5113
------------------	-------------------------	-----------------------

Injury/Incident Data:

Name of the Person who filed Claim: Lamarr Hardy

Date Claim Filed: Small Claim 7/6/2013

Person filing claim reason or reasons:

Patient alleges that tooth #12 was compromised by the insured during the extraction of tooth #16.

Closure Data:

If Claim is closed, check appropriate box below:

- Judicial Findings.
- Admission of Liability.
- Money Judgement, Award Against Practitioner by Court, Jury, or Arbitration.
- Withdrawal or Dismissal of Claim.
- Settlement of Claim.