

AMERICAN ARBITRATION ASSOCIATION

MOTION TO COMPEL INDEPENDENT MEDICAL EXAMINATION

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In the Matter of the Arbitration between

[Claimant Name],

[SAMPLE]

Claimant,

**ORDER**

and

[Respondent Name],

Respondent.

Case Number: 56 600 [insert case number]

Case Administrator: [Insert Name]

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After reviewing the Respondent's motion to compel an independent medical examination and all responses in relation to such motion,

**IT IS HEREBY ORDERED:**

Pursuant to Rule 12, the Respondent has shown "good cause" and is therefore entitled to an independent medical examination. The Claimant is hereby ordered to appear for an independent medical examination *before the scheduled arbitration hearing /within [number] days of the issuance of this order/completed no later than [DATE].*

*The written report shall be provided to the Claimant within [Number] of days after the examination.*

*Respondent shall bear any incident expenses (mileage, parking, etc) incurred by Claimant in attending the examination.*

*\*\*Please address whether the hearing will need to be postponed and if so, please include who is responsible for paying the rescheduling/postponement fee.*

OR

I find that a showing of "good cause" has not be met by Respondent, pursuant to Rule 12, and therefore Respondent is not entitled to an independent medical examination. Respondent's motion is hereby denied.

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Arbitrator [Name]

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Date

**AMERICAN ARBITRATION ASSOCIATION**  
**MOTION TO COMPEL EXAMINATION UNDER OATH**

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In the Matter of the Arbitration between

[Claimant Name],

[SAMPLE]

Claimant,

**ORDER**

and

[Respondent Name],

Respondent.

Case Number: 56 600 [insert case number]

Case Administrator: [Insert Name]

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After reviewing the Respondent's motion to compel an examination under oath and all responses in relation to such motion,

**IT IS HEREBY ORDERED:**

That the Claimant appear for an examination under oath *before the arbitration hearing in this matter/within [number] days of the issuance of this order/no later than [date]*. The examination may *include, but is not limited to/is limited to, [provide the scope of the examination]*.

*\*\*Please address whether the hearing will need to be postponed and if so, please include who is responsible for paying the rescheduling/postponement fee.*

*OR*

The Respondent has not shown "good cause" pursuant to Rule 12 and is therefore not entitled to an examination under oath. Respondent's motion is hereby denied.

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Arbitrator [Name]

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Date

**AMERICAN ARBITRATION ASSOCIATION**  
**MOTION TO COMPEL AUTHORIZATIONS**

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In the Matter of the Arbitration between

[Claimant Name],

[SAMPLE]

Claimant,

**ORDER**

and

[Respondent Name],

Respondent.

Case Number: 56 600 [insert case number]

Case Administrator: [Insert Name]

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After reviewing the Respondent's motion to compel and all responses in relation to such motion,

**IT IS HEREBY ORDERED:**

That Claimant shall execute the authorizations submitted by to the Respondent and deliver them to the Respondent's counsel *within [number] days from the issuance of this award/no later than [Date]*.

*\*\*Please address whether the hearing will need to be postponed and if so, please include who is responsible for paying the rescheduling/postponement fee.*

*OR*

That Respondent's motion to compel is hereby denied.

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Arbitrator [Name]

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Date

AMERICAN ARBITRATION ASSOCIATION

MOTION TO DISMISS

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In the Matter of the Arbitration between

[Claimant Name],

[SAMPLE]

Claimant,

**ORDER**

and

[Respondent Name],

Respondent.

Case Number: 56 600 [insert case number]

Case Administrator: [Insert Name]

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TO: Claimant above named and his/her attorney(s) and Respondent above and its attorneys.

Based upon the submissions [and arguments of counsel], **IT IS ORDERED:**

That this matter be dismissed *with/without prejudice*.

*\*\*Please address who is responsible for arbitrator compensation.*

OR

That [Party]'s motion for dismissal is hereby denied.

\_\_\_\_\_  
Arbitrator [Name]

\_\_\_\_\_  
Date

**AMERICAN ARBITRATION ASSOCIATION**  
**MOTION TO POSTPONE HEARING**

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In the Matter of the Arbitration between

[Claimant Name],

[SAMPLE]

Claimant,

**ORDER**

and

[Respondent Name],

Respondent.

Case Number: 56 600 [insert case number]

Case Administrator: [Insert Name]

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Based upon the submissions, IT IS ORDERED:

That the hearing *for this matter/scheduled for [Date]* will be postponed at the expense of [Party].

OR

The [Party]'s motion to postpone the *scheduled hearing/hearing scheduled for [Date]* is denied.

Date: \_\_\_\_\_

\_\_\_\_\_  
[Arbitrator's Name]  
Arbitrator