

**UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF FLORIDA  
PENSACOLA DIVISION**

IN RE: DEPO-PROVERA (DEPOT  
MEDROXYPROGESTERONE  
ACETATE) PRODUCTS LIABILITY  
LITIGATION

Case No. 3:25-md-3140

This Document Relates to:  
All Cases

Judge M. Casey Rodgers  
Magistrate Judge Hope T. Cannon

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**PRETRIAL ORDER NO. 17  
(Threshold Proof of Use and Injury Requirements)**

Plaintiffs and Defendants (collectively “Parties”) agree that all Plaintiffs with filed cases must provide (a) initial documentary proof of use for each named Defendant’s product, and (b) initial documentary proof of their alleged meningioma injury. The Parties have asked the Court to enter this Order governing the process for obtaining and producing this information. The Court agrees this process is important to the efficient and effective management of the MDL.

This Order governs all actions properly filed in, removed to, or transferred to this MDL. Other than as set forth in this Order, there will be no discovery of any Plaintiff until further order of the Court. All Plaintiffs, however, must preserve all relevant evidence in their possession, custody, or control, as required by law and this Order.

The term “Plaintiff Proof of Use/Injury Questionnaire” refers to the questions and document production requirements as shown on the attached form. *See Exhibit A.* The Parties have agreed to use the online MDL Centrality System, as designed and provided by BrownGreer PLC, to complete and serve the materials subject to this Order. The Plaintiff Proof of Use/Injury Questionnaire will be available for online completion and submission through MDL Centrality in every Plaintiff’s portal.

For all cases filed in or transferred into MDL No. 3140 on or before the date of this Order, the Plaintiff Proof of Use/Injury Questionnaire is due **120 days** from the entry of this Order—that is, by **July 14, 2025**.

For all cases filed in or transferred into MDL No. 3140 after the date of this Order, the Plaintiff Proof of Use/Injury Questionnaire deadline is **120 days** from the date the case was filed in or transferred into MDL No. 3140.

The Court understands that there may be cases in this MDL where Plaintiffs have requested prescription, medical insurance, and pharmacy records but lack definitive product identification. The parties intend to confer and work out a separate proof of use/injury protocol for this situation. The parties’ proposed protocol on this issue is due within **14 days**.

Any Plaintiff’s answers to the Plaintiff Proof of Use/Injury Questionnaire will be made under penalty of perjury, will be treated as interrogatory responses pursuant

to Federal Rule of Civil Procedure 33, and will be subject to Federal Rules of Civil Procedure 26 and 37.

The Plaintiff Proof of Use/Injury Questionnaire deadline may only be extended by: (i) the Court on a showing of good cause, or (ii) agreement of the parties with leave of Court.

A procedure for tracking and addressing deficiencies will be entered separately, after further consultation between the Parties and BrownGreer.

**SO ORDERED** this 14th day of March, 2025.

*M. Casey Rodgers*

**M. CASEY RODGERS  
UNITED STATES DISTRICT JUDGE**

**Plaintiff Proof of Use/Injury Questionnaire**

**1. Case Information**

A. Plaintiff Full Name (if acting in representative capacity, full name of product user):

First: \_\_\_\_\_

Middle: \_\_\_\_\_

Last: \_\_\_\_\_

B. Date of Birth (if acting in representative capacity, Date of Birth of product user):

\_\_\_\_\_

C. Address:

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

D. Attorney(s) of record (if applicable):

Counsel Name:

\_\_\_\_\_  
Firm Name:

E. N.D. Fla. Civil Action Number: \_\_\_\_\_ -cv- \_\_\_\_\_

F. MDL-Centrality Plaintiff ID: \_\_\_\_\_

2. **Product Use**

A. Provide beginning month/year and end month/year for each depot medroxyprogesterone ("DMPA") product used by the product user. If use was not continuous, provide beginning and end date for each period of use.

Start Date	End Date	Medroxyprogesterone product

B. Does Plaintiff/Injured Party currently have records (*i.e.*, prescription, medical, insurance, or pharmacy records) that demonstrate he or she was administered medroxyprogesterone acetate?

Yes     No

C. If no, have the following been requested?

Prescription records     Yes     No    Date of request: \_\_\_\_\_

Medical records     Yes     No    Date of request: \_\_\_\_\_

Insurance records     Yes     No    Date of request: \_\_\_\_\_

Pharmacy records     Yes     No    Date of request: \_\_\_\_\_

**3. Injury**

A. Has Plaintiff/Injured Party been diagnosed with meningioma?

Yes  No

B. Date of meningioma diagnosis (if diagnosed more than once, indicate each date):

Diagnosis 1: \_\_\_\_\_

Diagnosis 2: \_\_\_\_\_

Diagnosis 3: \_\_\_\_\_

Diagnosis 4: \_\_\_\_\_

Diagnosis 5: \_\_\_\_\_

**4. Document Production Requirement**

Upload and produce via MDL-Centrality the following:

A. Documents sufficient to show Plaintiff was administered DMPA.

B. Documents sufficient to show Plaintiff has been diagnosed with meningioma consistent with your response to question 3.B.

**5. Declaration**

I declare under penalty of perjury subject to 28 U.S.C. § 1746 that all the information I have provided in this Questionnaire is true and correct, to the best of my knowledge, and that all documents submitted on my behalf in connection with this Questionnaire are genuine and true and correct copies of their originals. I further acknowledge that the responses contained in this Form will be treated as interrogatory responses pursuant to Federal Rule of Civil Procedure 33 and will be subject to Federal Rules of Civil Procedure 26 and 37.

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

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_