

Harding Law Office

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Medical Malpractice Questionnaire

By coming to talk with us about your possible case, you claim that you have been injured. We need the following information from you. Please be as thorough and complete as possible. Please answer all questions and think carefully before answering because part of our decision of whether or not our firm can take your case will be based on your answers. If you don't understand a question, please ask us about it. If you need more space to answer any of these questions, you may write on the back or attach additional sheets of paper.

Date: _____

Seen by: _____

I. Provide the following information about PATIENT who was the victim of MALPRACTICE:

1. Name: _____
Date of birth: _____
2. Address: _____
City: _____ State: _____ Zip: _____
3. Telephone: HOME: _____ WORK: _____
Area Code Area Code
4. Marital Status: _____
5. Social Security Number: _____
6. Employer: _____
7. Occupation: _____

7. Nature of treatment: _____

8. What did the doctor do wrong? _____

9. Date(s) malpractice committed: _____

10. When and how did you discover malpractice: _____

III. Provide the following information about EACH HOSPITAL or CLINIC which committed malpractice:

1. Name: _____
2. Address: _____
 City: _____ State: ____ Zip: _____
3. Admission Date Reason for Admission

4. Dates of other treatment: _____

5. Condition for which treatment was sought: _____

6. Nature of treatment: _____

7. What did hospital or clinic do wrong: _____

8. Date(s) of malpractice: _____

9. When and how did you discover malpractice: _____

IV. Provide the following information about DAMAGES resulting from MALPRACTICE:

1. Describe the pain, disability, disfigurement that you complain of today: _____

2. Amount of lost income: _____

Explain how loss was computed: _____

3. Have you ever been injured? _____

If so, how and when were you injured and what were the injuries sustained: _____

4. Have you ever had any medical treatment to the same areas of your body that was injured by the negligence you believe occurred? _____

If so, please list what, when and why _____

4. Have you ever filed any claims or lawsuits? _____

If so, against who and what was the nature of your claim?
