

Checklist -- Depositions In a Slip and Fall Case

5-8-402. Depositions -- Checklist

(a) In Automobile Accident Case

5-8-402(a)

The following checklist contains many questions which would ordinarily be asked by the plaintiff's counsel, and others only by defense counsel. All witnesses should be prepared for all questions, however. It is suggested that this be followed to avoid overlooking an important point.

General Deposition

Automobile Accident

I. Personal Background

1. Name
 - __a. Correctly stated in petition
 - __b. All names ever known by
 - __c. Where, when, why
2. Address
 - __a. Present
 - __b. Past (ten years)
3. Birth
 - __a. Date
 - __b. Place
 - __c. Physician
4. Physical appearance
(if not asked, make notes so you will recognize at trial)
 - __a. Height
 - __b. Weight
 - __c. Color of eyes
 - __d. Color of hair
 - __e. Scars
 - __f. Obvious defects (ask how occurred)
5. Education
 - __a. All for education
__names, addresses
__when
 - __b. Colleges
__names, addresses
__years

- __c. Vocational schools
 - __names, addresses
 - __when
 - __d. Student at time of collision
 - __part-, full- time
 - __school(s) attending
 - __grade(s) in which studying
 - __names, addresses of teachers
 - __time missed as result of accident
6. Marital Status
- __a. Present
 - __living with spouse
 - __if no, where is spouse living
 - __wife's maiden name
 - __spouse's occupation
 - __date of marriage
 - __place of marriage
 - __who performed ceremony
 - __b. Ever married before
 - __how many times
 - __name of each spouse
 - __when
 - __where
 - __terminated
 - __divorce suit files
 - __who filed
 - __grounds
 - __where filed
 - __disposition
 - __present name, address
 - __each spouse

(Same information on each marriage)
7. Children
- __a. By which spouse
 - __natural
 - __foster
 - __adopted
 - __names
 - __ages
 - __dependency
 - __address if not in your home

- __ever escape
 - __b. Other convictions
 - (Ask same questions)
 - __c. Ever plead guilty to felony
 - __nature
 - __sentence
 - __when
 - __where
 - __court
 - __parole
 - __other charges dropped, etc.
 - __attorney involved in all
 - __d. Ever plead guilty to misdemeanor as a reduced charge from a felony
12. Civil Suit Record
- __a. Previous personal injury lawsuits
 - __date
 - __place of accident
 - __court
 - __place filing, date
 - __status of suit
 - __injuries
 - __final results
 - __money received
 - __attorneys involved
 - (Same questions for each lawsuit)
 - __b. Any claims, no suit filed
 - __workers' compensation
 - __injury
 - __illness
 - __when
 - __where
 - __attorney
 - __recovery
 - __all claims filed
13. Accidents Since this claim
(Use Questions above)
14. Military Status
- __a. Examination for
 - __when
 - __where
 - __accepted, rejected, why

- __exemption, reason
 - __b. Member of armed forces now
 - __age
 - __rank
 - __serial number
 - __branch or unit
 - __where stationed
 - __c. Recently discharged
 - __length of service
 - __place(s) served
 - __all ranks held
 - __date
 - __place of discharge
 - __type
 - __d. Ever disciplined for anything while in service
 - __time of occurrence
 - __place of occurrence
 - __circumstances
 - __e. Military medical history
- 15. Citizenship
 - __a. U.S.
 - __when granted
 - __country from
 - __registered to vote, where
- 16. Other Accidents
 - __a. Prior accidents
 - __date, time, location
 - __names, addresses of people involved
 - __legal proceedings
 - __result of any settlement
 - __nature of vehicles involved
 - __nature and extent of injuries
 - __attorneys involved

(Same questions for each accident)
- 17. Other Claims Because of This Accident
 - __a. names, parties involved, addresses
 - __b. suit filed
 - __c. title and docket number
 - __d. place filing
 - __e. attorneys involved
 - __f. lien letters received

18. Driving Experience
- a. How long
 - with particular vehicle
 - b. Driver's license
 - state
 - in force
 - ever revoked or suspended
 - when, what for
 - what state
 - ever denied a license
 - date, when, reasons
 - restrictions
 - c. Driving history
 - accidents
 - traffic violations, moving
 - military court for infraction of driving rules
 - d. Driver's education
 - when
 - from whom
19. Medical History
- a. Hospitalized
 - where, when
 - physician
 - nature
 - congenital defects
 - treatment
 - recovery
 - how long
 - b. Accidents
 - childhood
 - home
 - school
 - athletic accidents
 - doctor
 - where, when
 - accident insurance carrier
 - sickness insurance carrier
 - each claim
 - suits
 - family physician
 - treated by osteopaths, chiropractors

- __X-rays
 - __doctor
 - __where, when
 - __parts of body
 - __operations
- 20. Physical Defects and Condition
 - __a. How long worked day of collision
 - __b. Business, social activities prior to collision
 - __c. Visual defects
 - __glasses
 - __doctor prescribed, address
 - __wearing at time of collision
 - __date of prescription
 - __where now
 - __d. Vigilance
 - __last awoke prior to collision
 - __when, when
 - __tired
 - __sleepy
 - __ill
 - __ability to control automobile impaired
 - __describe feeling
 - __try to remedy
 - __e. Alcohol
 - __had any within preceding 12 hours
 - __when, where, and reasons for consumption
 - __name, type, brand
 - __quantity consumed
 - __name, address of each place consumed
 - __who present
 - __who drinking with
 - __after collision, any sobriety test
 - __type given
 - __how soon after collision
 - __name, address of person administering
 - __results
 - __f. Epileptic seizure
 - __suffered such ;on date of collision
 - __sought medical attention
 - __person treating, address
 - __advice received

- afflicted how long
- first seizure date
- disclosed to License Bureau
- g. Drugs
 - used
 - had any within preceding 12 hours
 - tranquilizer
 - narcotic
 - 24 ours preceding collision
 - week preceding collision
 - kind of prescription
 - who prescribed, address
 - amount taken
 - how often taken
 - reason for taking
 - when prescribed
 - condition
 - times renewed
 - prescription number
 - formula if known
 - hallucinating drugs
- h. Hearing
 - hearing aids
 - who fitted
 - when, where
 - treatment
 - doctor
 - when
 - aid on time of collision
- i. Artificial limbs, eyes
 - legs, eyes, arms, etc.
 - difficulty
 - who fitted
 - when, where
 - on at time of collision
- j. Emotional problems
 - on date of collision
 - family problem
 - work problem
- k. Mental illness
 - confined

- __medical attention
- __physician, address
- __first treatment
- __release
- __l. Fainting spells
- __m. Venereal disease
- __n. Nervous breakdowns
- __o. Tuberculosis
- __p. Diabetes
- __q. Difficulty in judging distance

II. Trip

1. At time of collision
 - __a. started when
 - __b. where started
 - __c. route taken
 - __d. destination
 - __e. due to arrive
 - __f. stops prior to collision
 - __g. stops planned to be made
 - __h. reasons for trip
 - __i. miles traveled
 - __j. appointments
2. Other occupants
 - __a. description
 - __name
 - __address
 - __b. related
 - __c. where entered vehicle
 - __d. destination
 - __e. describe when sitting
 - __f. paid passenger, share expense
 - __who paid
 - __how paid
 - __what expenses shared
 - __g. anything carried
 - __h. purpose of trip
 - __i. who directed route
 - __j. other agreements
 - __k. who benefited from trip
 - __l. in a hurry

- __m. late
- __n. complaints about driving
 - __when
 - __where
 - __all complaints
 - __conform to protests
- __o. warnings by passengers
- __p. Passenger touch steering wheel
- __q. passenger cause collision

III. Car

1. Describe the vehicle you were driving (passenger in)
 - __make
 - __model
 - __license number
 - __engine number
 - __length
 - __height
 - __width
 - __load capacity
 - __age
2. Ownership
 - __a. Owner
 - __name, address, occupation
 - __b. Title in whose name
 - __c. Permission
 - __what period
 - __limited
 - __previous
 - __acting for owner
 - __servant, agent, employee
3. History of Vehicle
 - __a. previous wrecks
 - __repairs
 - __when, where
 - __who repaired
4. Mechanical Condition
 - __a. Illumination
 - __did vehicle have lights
 - __number
 - __location

- color of lens
- voltage requirements
- size of bulb
- dimension of lens
- binding
- up
- down
- distance of illumination
- all burning
- last adjustments
- repairs
- b. Visibility
 - windshield
 - dirty
 - clean
 - broken
 - frost
 - steam
 - opaque
 - scratched
 - discolored
 - wiper working
 - when, where last cleaned
 - how long such condition
 - obstruction
 - by load
 - by nature of load
 - location
 - degree vision obscured
- c. Mileage reading
 - last inspection
 - miles put on in average day
- d. Brakes
 - condition
 - last adjustment
 - recent repairs
 - how often inspected
 - failed at time of collision
 - what caused
 - rear brake assembly
 - any replaced since accident

- __date
 - __light
 - __condition
 - __how turn on
 - __last notice working
- __e. Tires
 - __approximate age
 - __make
 - __condition
 - __where purchased
 - __from whom
 - __mileage on each
- __f. Horn
 - __kind
 - __condition
 - __last used
- __g. Steering gear
 - __condition
- __h. Chains
 - __when put on
 - __condition
- __i. Repairs
 - __year preceding collision
 - __nature
 - __cost
 - __date
 - __name, address person making repairs
 - __after collision
 - __who moved car from scene
 - __to where
 - __was it driven away
 - __removed any other way
 - __time, date of removal
 - __malfunction or nonfunction during removal
 - __anyone have parts of vehicle
 - __name, address, phone number
 - __date of possession
 - __part in possession
 - __tests made on vehicle since collision
 - __nature
 - __part(s) tested

- __Person making rest, address
 - __repairs or alterations made since collision
 - __name, address person involved
 - __place
 - __date
- __j. Inspection
(60 days preceding collision)
 - __name, address of inspector
 - __reports made
 - __work done
- __k. Previous to collision, advise of needed repairs
 - __advising person
 - __time of notice
 - __nature of notice
 - __remedial action
 - __reasons of inaction
- __l. Vehicle location after accident
 - __whose possession
 - __where located
- __m. Replacement of vehicle
 - __why
 - __type acquired
 - __amount of trade-in
 - __salvage, where
 - __whom sold to
 - __amount received for salvage
- __n. Previous vehicle damages
 - __when
 - __where
 - __how
 - __what
- __o. Was accident caused from other's negligence
 - __repair firm
 - __mechanic
 - __how learned
 - __when
 - __written noted made
 - __in whose possession
 - __conversations
 - __persons present
 - __substance of conversation

- __p. Axle
 - __did it break
 - __where
 - __where is axle now
 - __bearing removed from shaft
 - __who removed
 - __where broke
 - __car used after collision
 - __did work out of rear end assembly
 - __was wheel cocked because axle broken
 - __how
 - __break any point inside axle housing
 - __where

IV. Scene

1. Condition of Road Approaching Scene

- __a. Road travelling
 - __posted one way
 - __traveling which direction
 - __level
 - __divided
 - __dead end
 - __crested
 - __inclined
 - __declined
 - __sharply curved
 - __other curves
 - __straight
- __b. Condition of road vicinity
 - __patched
 - __breaks in surface
 - __uneven surface
 - __general evenness
 - __potholes
 - __slope from one side to other
 - __other
- __c. Kind of road surface
 - __dirt
 - __concrete
 - __gravel
 - __asphalt

- oiled
- other
- d. Shoulder
 - approximate width
 - composition
 - slant relation to road
 - ditch each side
 - depth
- e. Neighborhood of collision
 - open country
 - residential
 - part
 - industrial
 - commercial
 - school, hospital, fire station, etc.
- f. Before collision
 - distraction
 - distance away when distracted
 - speed at time
 - talking
 - radio on
 - animal
 - pedestrian
 - smoking
 - air conditioner on
 - hands on wheel
 - why attention diverted
 - distance from impact attention returned
 - exclamations
- g. Scene of collision
 - street traveling
 - direction traveling
 - number of traffic lanes
 - location other cars
 - lane markers
 - dividers
 - curbs
 - width
 - parking areas
 - parked cars

2. Visibility

- __a. Impaired
 - __hill
 - __curve
 - __embankment
 - __building
 - __vegetation
 - __hump
 - __machinery
 - __smoke
 - __terraces
 - __walls
 - __depression
 - __signboards
 - __incline
 - __downgrade
 - __dust
 - __materials in air
 - __boulevard
 - __vehicles
 - __light conditions
 - __rain, other precipitation
 - __other
- __b. Time of day
 - __date
 - __light or dare
 - __dawn
 - __dusk
 - __full day
 - __moon shining, phase
- __c. Obstruction
 - __nature
 - __location
- __d. Weather
 - __precipitation
 - __how much
 - __when
 - __clear
 - __dry
 - __cloudy
 - __position of sun
 - __foggy

- __other
 - __effects
 - __on windshield
 - __on windows
 - __traction
 - __road
 - __other cars
- 3. Traffic Controls
 - __a. Signal lights
 - __sequence
 - __how many
 - __functioning
 - __facing
 - __color
 - __b. Public officers
 - __where
 - __c. Signs
 - __stop
 - __location
 - __when seen
 - __speed when seen
 - __time stopped
 - __other
 - __location
 - __description
- 4. Turn Signals
 - __a. manual
 - __b. electric
 - __c. how long on
 - __d. turning what direction
 - __e. other cars
 - __first noticed
 - __f. other
- 5. Light Illumination
 - __a. Street lights
 - __location
 - __kind of illumination
 - __describe lighted area
 - __size
 - __effect on viability
- 6. Familiar with Collision Locale

- __a. How often by
 - __weekly
 - __monthly

V. Collision

1. Speed

- __a. Gear travelling
 - __ever shift
- __b. Your speed
- __c. Other vehicle

2. First Saw Other Vehicle

- __a. Where
 - __distance from curb line
 - __distance from each other
 - __distance from impact
 - __speed of each
- __b. Your position
 - __following
 - __how long
 - __distance
 - __when noticed slowing
- __c. Other vehicles
 - __when observed
 - __if not observed, why

3. Next Saw Other Vehicle

(Same questions as in 1 and 2 above)

4. Changes

- __a. Course
 - __where
 - __when
 - __describe change
- __b. Speed
 - __where, when
 - __why noticed
 - __time of collision

5. Brakes Applied

- __a. Location
 - __distance from other car
- __b. Hand brake
- __c. Foot brake
- __d. Distance traveled after braking

- __e. Brakes take hold
 - __f. Speed decrease
 - __feel decrease
6. Realize Danger of Collision
- __a. Location
 - __your vehicle
 - __other vehicles
 - __b. Action taken to avoid
 - __when
 - __where
 - __what
7. Signals Given
- __a. Horn
 - __times sounded
 - __b. Arm signals
 - __c. Location of vehicles
 - __d. Distance from impact
8. Point of Impact
- __a. Describe points of collision
 - __b. parts vehicle first touched
 - __c. Direction each vehicle
 - __front end position
 - __side positions
 - __describe each forward and laterally
9. Debris
- __a. Broken glass
 - __b. Vehicle parts
 - __c. Where
 - __d. Pictures
10. After Collision
- __a. Vehicles stopped
 - __location
 - __distance each moved
 - __direction each facing
 - __b. Location all persons
 - __c. Describe injuries to persons
 - __d. Necessary to remove vehicles
 - __e. ambulances
 - __whose
 - __f. Conversations with each other
 - __nature

- __ who said what
 - __g. Police
 - __ how many cars
 - __ number of officers
 - __ descriptions of officers
 - __ what each said to officers
 - __ arrests
-

COMMENT: Read any admissions from the Police Report and ask if that is, in fact what they told the officer. If they deny it, ask if the officer is lying.

- __h. Measurements, Photographs
 - __ who made
 - __ how many
 - __ in whose behalf
- __i. Beer, whiskey, etc.
 - __ anyone intoxicated
 - __ bottles or cans about vehicles
- __j. Cars towed away
 - __ by whom
 - __ when, where to
 - __ how taken
- __k. Skidmarks
 - __ length
 - __ where located
 - __ which wheel
 - __ even, equal
 - __ who measured, when
 - __ which car
 - __ pictures, who, when
- __l. Witnesses
 - __ names, addresses
 - __ anyone recognize
 - __ when seen
 - __ where
 - __ conversations

- __m. Collision reported in newspaper
 - __which paper
 - __photographs included
 - __date published
 - __n. Damages observed at scene
 - __parts of vehicles
 - __describe each
 - __o. Your vehicle
 - __where repaired
 - __cost
 - __condition after
 - __traded to whom
 - __lost on trade
 - __still owned
11. Passengers' Negligence
- __a. awake
 - __b. looking out
 - __c. when aware of danger
 - __where vehicle then
 - __what said
 - __what done
 - __d. protests
 - __e. passenger drinking
 - __f. driver reckless
 - __g. how reckless
 - __h. reckless on previous occasion
 - __i. all previous knowledge
12. Pedestrian Injured
- __a. direction walking
 - __b. running
 - __c. carrying packages, etc.
 - __d. others with him
 - __e. looking what direction
 - __f. describe all movements
 - __g. describe course walked
 - __h. in crosswalk
 - __i. kind of clothing, color
 - __j. crippled
 - __k. aided, by what
13. Injuries Result Collision
- __a. Parts of body

- __b. Parts contact with car
- __pain at scent
 - __where
 - __all
 - __first noticed
 - __describe
- __c. What noticed externally
 - __marks
 - __cuts
 - __bruises
 - __blood
 - __describe
 - __see or feel outside body
 - __first notice
 - __how long present
 - __describe healing
 - __scars
- __d. Hospital
 - __first entered
 - __all complaints
 - __name roommates
 - __names nurses
 - __operations
 - __describe hospital treatment
 - __shots
 - __medication
 - __other
 - __discharge date
 - __with doctor's permission
 - __without permission
 - __number of X-rays
 - __braces
 - __special beds
 - __appliances, shoes
 - __equipment required
 - __phone in hospital room
 - __other hospitalization
 - __outpatient hospital treatments
 - __trips
 - __hospital
 - __who recommended

future hospital treatment recommended

future specialists recommended

e. First doctor

all treatment

visits and calls

times seen in hospital

date first examination

date first treatment

number of treatments

complaints to doctor

still seeing

disability rating discussed

lawyer suggest doctor

doctor suggest lawyer

(Same questions all doctors)

family doctor

if not, why

any chiropractic treatments

osteopaths

other practitioners

f. Neck injuries

describe pain

direction it runs

dull, sharp

at present

how often

pain in arms

describe

numbness

where

atrophy

g. Back injury

when first had pain

in pain now

pain all the time

pain while sleeping

bending

lifting

stooping

coughing, sneezing

pains down legs, describe

- __which side of legs
- __where ends
- __h. Miscarriage claimed by female
- __previous miscarriages
 - __doctor
 - __hospital
- __times pregnant previously
 - __how ended
 - __this miscarriage
 - __when, date
 - __visit to doctor before collision
 - __approximate date of pregnancy
 - __pain previous to pregnancy
 - __doctor who attended
 - __persons present
 - __place of miscarriage
 - __hospital
 - __all doctors
- __other female troubles
- __number of children
- __signs of change of life
- __i. After this collision
- __hospital outpatient
- __treatment
- __bed at home
 - __how long
- __up and down
- __allowed outside
 - __where
 - __what for
 - __persons present
 - __persons who helped
- __car rides
- __j. Before the collision
- __good health
- __weight
- __nervousness
- __k. Effect of collision
- __sleep
- __weight
- __appetite

- __general health
- __activities impaired
- __nerves
- 14. Expenses Incurred
 - __a. Medicines
 - __drugstores
 - __total amount
 - __describe
 - __b. Nurses and special care
 - __names
 - __hospitals
 - __amount paid
 - __amount due
 - __c. Housekeeping services
 - __why needed
 - __name, address
 - __days
 - __work
 - __rate of pay
 - __related
 - __d. Ironing or washing sent out
 - __amount paid
 - __name, address of company or person
 - __e. Other expenses claimed
 - __describe
- 15. Dental Injuries
 - __a. Nature and extent
 - __describe
 - __dentist
 - __trips
 - __bill
 - __amount paid

COMMENT: For each expense, ask what part has been paid, how it was paid, and the amount still owed. Also ask if any of these bills were paid by an insurance company and, if so, the company's name.

16. Time Lost as Result of Collision
- a. Date started work after collision
 - where
 - how long
 - changes in work
 - supervisor recommending light work
 - names of fellow workers
 - necessary for fellow workers to aid
 - addresses
 - b. Examination required before returning
 - who gave
 - company doctor's name
 - doctors recommendation
17. Report of Income Tax
- a. Filed jointly, separately
 - who prepared
 - have copies
 - filed before collision
 - filed after collision
 - show loss of earning or business
 - show loss of income
18. Sports Before and After Collision
- a. swimming, where
 - diving
 - b. hunting, where
 - c. fishing, where
 - d. golf
 - e. tennis
 - f. bowling, what teams
 - g. waterskiing
 - h. horseback riding
 - i. health clubs
 - j. skiing (snow)
 - k. baseball
 - l. camping
 - m. bicycle riding
 - n. any other
 - o. riding horseback
19. Social Activities
- a. club affairs
 - b. P.T.A..

- c. dinners
 - d. luncheons
 - e. card parties
 - f. church socials
 - g. school activities
 - h. dances
 - new dances
 - i. organization officer
 - j. political affairs
 - k. sports cars
20. Activities at Home
- a. Any restriction
 - flower or vegetable garden
 - laundry
 - cooking
 - sweeping
 - repairs
 - sexual relations
 - ironing
 - scrubbing
 - moving furniture
 - dusting
 - washing windows
 - hanging curtains, drapes
 - carrying children
 - grocery shopping
 - sewing
 - company, how often
 - washing car
21. If Claimant Under 21 (or 18)
- a. Living with whom
 - b. Earnings
 - any money given parents
 - any money paid other
 - c. Who paid expenses of injury
 - d. Bank accounts in own name
 - e. Landlords name
 - f. When left parents
 - g. Changed employment since collision
22. Since Collision
- a. Applied for insurance

- life
- sickness
- accident
- company group
- family group
- if so, name of companies
- examination required
- what doctor
- when
- where
- accepted, rejected, why

23. Settle with any Other Person Involved

- a. Which one
- b. Why
- c. When
- d. Amount
- e. Papers signed
- f. Recommended by attorney
- g. Copies of Settlement

Rear End Cases

When you drive do you keep your car under control at all times?

Do you know that cars make sudden stops?

Were you ready for the car in front of you to make a stop?

Proceed from her with (if not, why not?, etc)

Last Clear Chance or Humanitarian Doctrine

If this or a similar doctrine is applicable, always qualify witness as a good driver by asking:

--consider self a qualified driver

--consider self a experienced driver

--number of years driving

--previous experience

--tests taken

--driver's education

--interest in safe driving

Proceed then by asking again about the condition of the car, brakes, mechanical condition, horn, steering gear, windshield, and location when the peril was discovered.

Then ask, if an emergency arose, taking into consideration all the conditions existing then and there at the time of this collision, do you have any judgement of what distance you could have stopped the vehicle you were operating with safety to yourself and to others, at a speed of:

--20 miles per hour

--25 miles per hour

--30 miles per hour

--35 miles per hour

--etc.

Could they have avoided by

--swerving

--slackening speed

--sounding horn

--stopping

--other measures

When was danger obvious?

Could other driver extricate self?

Source: Handling Soft Tissue Injury (Kluwer Law Book Publishers, Inc. 1985), § 5.04, Checklist: Deposition in automobile accident case.

(b) In Slip and Fall Case
5-8-402(b)

(Use the personal background information set forth above.)

1. You contend that the Defendant was negligent in maintaining the premises where you state your slip and fall occurred; Therefore will you advise us whether or not the fall resulted from:

- a. Insufficient lighting
- b. Uneven floor level
- c. Litter on the floor
 describe litter on the floor
- d. Defects in the floor
- e. Defects in floor covering
- f. Slipperiness
 resulting from what substance
- g. Guardrail defective
- h. Handrails defective
- i. Platforms defective
- j. Scaffolds defective
- k. Construction defects
- l. any other defects

2. For each defect, ask

- a. How long there
- b. Fully describe
- c. When first noticed
- d. Who put it there
- e. Any previous complaints
- f. Any previous accidents
- g. Did any other person know about the condition

3. Do you know of anything the Defendant failed to do to make the premises reasonably safe for use?

4. Any other fact you have that would show how long the condition existed prior to your fall.

5. If you knew the condition existed before the fall,

- a. How long were you aware of same
- b. How did you acquire the knowledge
- c. When did you acquire the knowledge
- d. What did you do to avoid the accident after you acquired the knowledge

6. Time of slip and fall

- a. Early morning
- b. Late morning
- c. Midday
- d. Early afternoon

- ___was sun shining
 - ___e. Dusk
 - ___f. Night
 - ___was moon shining
- 7. Condition of visibility
 - ___a. Describe any artificial illumination
- 8. Witnesses
 - ___a. Who was with you
 - ___b. Any you knew on the premises
 - ___c. Did you talk to anyone at the place
 - ___d. Did you obtain the names of any witnesses at the scene after the fall
 - ___names and addresses
- 9. How were you dressed at the time of the fall?
 - ___a. Describe your clothing at the time of the fall
 - Female
 - ___skirt or dress
 - ___shorts, bermudas
 - ___slacks
 - ___sports, outfit, etc.
 - ___if skirt, was it
 - ___flared
 - ___pleated
 - ___slit
 - ___straight
 - ___other
 - Male
 - ___suit
 - ___work clothes
 - ___jeans
 - ___shorts
 - ___sports outfit, etc.
 - ___b. Do you still have possession of the clothing
 - ___c. Describe clothing after the fall
 - ___has clothing been cleaned or repaired
 - ___d. Describe shoes you were wearing at the time of the fall
 - ___walking shoes
 - ___describe heels
 - ___high heels
 - ___medium heels
 - ___walking heels
 - ___spikes

- stiletto
 - loafers
 - boots
 - stocking feet, kind of socks/stockings
 - moccasins
 - sandals
 - thongs
 - flats
 - wedges
 - oxfords
 - pumps
 - toeless
 - heelless
 - straps
 - barefooted
 - e. Were you wearing heel lifts, composition, or metal plates
 - kind of material
 - date put on
 - heel lifts placed on more than once
 - f. Were the shoes you were wearing at the time ever altered or repaired
 - if so, describe the repairs
 - g. Do you have these shoes in your possession
 - if not, where
 - h. Where did you purchase the shoes
 - date of purchase
 - size and width
 - were they your correct size
 - i. if the shoes didn't belong to the claimant, get the name and address of owner
 - reason for wearing
 - size and width
10. Describe the weather conditions in detail at the time and place of the slip and fall
- a. Dry
 - b. Wet
 - c. Snow
 - accumulated
 - d. Effects of the weather
 - on shoes
11. What were you carrying at the time of the slip and fall--describe in detail. Was your vision obstructed by these items?
- a. Purse
 - b. Umbrella

- __c. Shopping bag
 - __d. Child
 - __e. Sack
 - __f. Books
 - __how each carried
 - __size
 - __shape
 - __weight
 - __depth
 - __g. packages--Describe
12. The Fall
- __a. What distracted your attention
 - __b. Where were you looking
 - __c. Did you see the spot that caused the fall
 - __d. Could you have seen it if you had looked
 - __e. What would you have seen
 - __f. Anyone with you
 - __g. Anyone holding your arm
 - __h. Which foot started, right or left
 - __stumbled
 - __turned
 - __did you overstep
 - __trip
 - __i. Are you guessing as to what caused the fall
 - __j. What part of body hit first
 - __k. Describe landing
13. After the Slip and Fall
- __a. Lying in what position
 - __b. Where
 - __c. Length of time
 - __d. Helped up by anyone
 - __e. Name of helper
 - __f. Condition of your clothes, etc.
 - __g. Where were the things you were carrying
 - __h. If you claim it was a liquid substance, was any on clothes, hands, etc.
 - __i. Tell anyone there the cause of fall
 - __j. Tell anyone about the condition
 - __k. Talk to the employees
 - __l. Warn anyone else
 - __if so,whom
 - __m. Did you reexamine the place where your fell

- __n. Did anyone else examine the place where you fell
 - __if so, by whom
 - __o. Do you receive everything that happened at the scene
 - __if so, by whom
 - __p. Describe everything that happened at the scene
 - __q. How long after you fell did you leave
 - __r. Were you helped in leaving
 - __by whom
 - __s. Were you carried
 - __by whom
 - __t. Did you go back to the scene
 - __when
 - __with whom
 - __reason
 - __u. Ever see any photographs of the place
 - __by whom made
 - __upon whose request
 - __v. Did you have anyone examine the place
 - __who
 - __w. Have you seen any sketches or reports showing or stating cause of fall
14. Did you consume any alcoholic beverage prior to the fall?
- __a. State type of beverage
 - __b. Number of drinks
 - __c. Place where obtained
 - __d. Named and address of person who served
 - __e. Length of time between drinks
 - __f. Length of time between last drink and the slip and fall
15. Do you know of anyone who had inspected the scene where you fell previous to the accident?
- __a. Name
 - __b. Address
 - __c. Occupation
16. Do you wear glasses or need glasses?
- __a. Date first worn
 - __b. Were glasses on at the time of the fall
 - __c. Regular glasses or sunglasses
 - __d. Condition requiring glasses
 - __nearsighted or farsighted, etc.
 - __e. kind of glasses, bifocal, contact lenses, soft, hard, etc.
 - __f. Are glasses worn constantly
 - __g. Otherwise, when
 - __h. Name and address of physician who gave prescription

- i. Date prescribed
 - j. Date prescription last changed
 - k. Date of last examination
- 17. Do you suffer, or have you ever received treatment for
 - a. Blurred vision
 - b. Dizzy spells
 - c. Fainting spells
 - d. Epilepsy, heart disease, paralysis, high blood pressure, diabetes, nervous disorders, muscular disorders, brain disorders, or other vision problems
- 18. If you have suffered from any disorders
 - a. When was the last attack
 - b. When was the last treatment
 - c. Name of physician
 - d. Description of all treatments
 - e. Under treatment at the time of fall
 - f. Were you taking any medicine at that time
 - who prescribed
 - kind (tranquilizers, drugs, etc.)
- 19. Have you sustained any injury from a previous fall?
 - a. If so, date
 - b. Where
 - c. Cause of fall
 - d. Description of injury
- 20. Have you had any previous claims of any kind?
 - a. Where
 - b. When
 - c. Description
 - d. Against whom
 - e. Suit filed
 - if so, where
 - deposition
 - amount received in settlement of otherwise
 - any difference in shoes or dress at time of the previous fall

Handling Soft Tissue Injury (Kluwer Law Book Publishers, Inc. 1985)