

IN THE CIRCUIT COURT OF COUNTY, MISSISSIPPI

PLAINTIFF

VS.

NO.

, M.D. and , M.D. DEFENDANTS

**PLAINTIFF'S RESPONSE TO REQUESTS FOR DISCOVERY
PROPOUNDED BY DEFENDANT, , M.D.**

Plaintiff, , responds to the Interrogatories and Requests for Production of Documents propounded to him/her by Defendant, , M.D., as follows:

RESPONSE TO INTERROGATORIES

INTERROGATORY NO. 1: Pursuant to the provisions of Rule 26(b)(4)(A)(i), M.R.C.P., identify each person whom you expect to call as an expert witness at trial, state the subject matter on which each expert is expected to testify, state the substance of the facts and opinions to which each expert is expected to testify, and state a summary of the grounds for each expert's opinions.

RESPONSE TO INTERROGATORY NO. 1:

INTERROGATORY NO. 2: State the name, address, place of employment and telephone number of each and every person known to you, or to your attorneys, who has knowledge of relevant or discoverable information regarding any of the facts and matters stated in your complaint.

RESPONSE TO INTERROGATORY NO 2:

- (a)
- (b)
- (c)
- (d)
- (e)
- (f)
- (g)
- (h)

(i)

(j)

INTERROGATORY NO. 3: State the name, address, place of employment and telephone number of each and every person from whom a written recorded, transcribed or oral statement has been obtained by you, your attorneys, or by anyone working in your behalf in connection with this case.

RESPONSE TO INTERROGATORY NO. 3: .

INTERROGATORY NO. 4: With regard to each individual identified in response to this interrogatory, state the date upon which a statement was obtained, identify the person who obtained each statement, and identify each person now having possession of the original or a copy of each statement.

RESPONSE TO INTERROGATORY NO. 4: .

INTERROGATORY NO. 5: If you contend that the allegations stated in the complaint against this defendant are supported by any medical text, medical journal, learned treatise, periodical, encyclopedia, or other document of any description, then please describe each item in sufficient detail so as to support a request for production.

RESPONSE TO INTERROGATORY NO. 5:

INTERROGATORY NO. 6: If you learned of this defendant's alleged negligence or malpractice from any medically trained person, then identify that person by stating his or her name, address, place of employment and telephone number.

RESPONSE TO INTERROGATORY NO. 6: .

INTERROGATORY NO. 7: Identify each and every expert consultant or witness who has been retained by you or on your behalf in connection with the facts and matters stated in the complaint, but who is not expected to be called as a witness at trial.

RESPONSE TO INTERROGATORY NO 7: .

INTERROGATORY NO. 8: Describe the educational and employment history of the plaintiff, including in your answer the names of all schools attended, the dates of attendance and a description of any degrees received; and with regard to employment identify all prior employers, state the dates of employment with regard to each, state the nature of the services.

RESPONSE TO INTERROGATORY NO. 8: .

INTERROGATORY NO. 9: Set forth individually and itemize each and every expense which you contend has been incurred as a result of the incident described in your complaint.

RESPONSE TO INTERROGATORY NO. 9: .

INTERROGATORY NO. 10: With regard to each expense, state what if any amount thereof has been paid or will be paid by Medicare, Medicaid or by any private insurance company.

RESPONSE TO INTERROGATORY NO. 10: .

INTERROGATORY NO. 11: Identify each and every person or organization which may have a subrogation claim involving the proceeds of any judgment or settlement which might result from the filing of your complaint herein.

RESPONSE TO INTERROGATORY NO. 11: .

INTERROGATORY NO. 12: were rendered by each of the licensed health care practitioners identified in your response, and briefly describe the nature of the condition or illness which caused the plaintiff to be treated on each occasion.

RESPONSE TO INTERROGATORY NO. 12: .

INTERROGATORY NO. 13: State the name, address and telephone number of each and every hospital, clinic or institution to which the plaintiff was admitted for any reason during the five years preceding the incident described in your complaint. Include in your answer the date or approximate dates of confinement at each institution and briefly describe the nature of the illness or condition which caused the plaintiff to be confined on each occasion.

RESPONSE TO INTERROGATORY NO. 13: .

INTERROGATORY NO. 14: State the name, address and telephone number of each and every licensed health care practitioner by whom the plaintiff has been seen or treated since the occurrence of the incident described in your complaint. Include in your answer the date or approximate dates upon which services were rendered by each of the health care practitioners identified in your response and briefly describe the nature of the condition or illness which caused the plaintiff to be treated on each occasion.

RESPONSE TO INTERROGATORY NO. 14: .

INTERROGATORY NO. 15: State the name, address and telephone number of each and every hospital, clinic or other institution to which the plaintiff has been admitted following the occurrence of .

RESPONSE TO INTERROGATORY NO. 15: .

INTERROGATORY NO. 16: State specifically how you contend that the injury which is mentioned in Paragraphs 2 and 3 of your complaint occurred. State in your answer when you contend this injury occurred.

RESPONSE TO INTERROGATORY NO. 16: .

INTERROGATORY NO. 17: By way of a request for admission pursuant to the provisions of Rule 36, M.R.C.P., and for the purpose of the pending action only, please admit the truth of the following statements:

(a) The injury which is described in your complaint occurred as a result of the administration of anesthesia through a procedure known as an auxiliary block.

(b) Dr. was not present, nor did he/she participate in administering the anesthetic procedure known as an auxiliary block to the plaintiff.

(c) The injury which is described in your complaint occurred prior to the surgical procedure which performed.

(d) The surgical procedure which Dr. performed is not a proximate cause or proximate contributing cause of the injury described in the complaint.

RESPONSE TO INTERROGATORY NO. 17:

(a)

(b)

(c)

(d)

INTERROGATORY NO. 18: If you denied any of the above stated requests for admissions, then for each request which you denied please state a concise factual and/or legal reason for your denial.

RESPONSE TO INTERROGATORY NO. 18:

RESPONSE TO REQUESTS FOR PRODUCTION OF DOCUMENTS

REQUEST NO. 1: The defendant requests production of each statement identified in response to Interrogatory No. 3 above.

RESPONSE TO REQUEST NO. 1:

REQUEST NO. 2: The defendant requests production of each medical journal, medical treatise, periodical, encyclopedia, text or other item identified in response to Interrogatory No. 5 above.

RESPONSE TO REQUEST NO 2: objection to Interrogatory No. 5.

REQUEST NO 3: The defendant requests production of each and every bill or other document reflecting expenses incurred and/or paid as a result of the incident in question and as referred to in response to Interrogatory No. 9 above.

RESPONSE TO REQUEST NO. 3: .

REQUEST NO. 4: The defendant requests production of each and every photograph, videotape, model, diagram or other item identified in response to Interrogatory No. 4 above.

RESPONSE TO REQUEST NO. 4: .

REQUEST NO. 5: The defendant requests production of the records of all health care professionals and health care provided identified in responses to Interrogatories Nos. 12, 13, 14 and Plaintiff incorporates the witnesses, and/or consultants identified in response to Interrogatories No. 1 and 7 above.

RESPONSE TO REQUEST NO. 6: .

REQUEST NO 7: The defendant requests production of income tax returns and W-2 forms providing information regarding the earnings of the plaintiff during the past five years.

RESPONSE TO REQUEST NO. 7: .

Respectfully submitted,

Attorney for

Of Counsel:

Telephone:
MSB #
Attorney for

STATE OF MISSISSIPPI
COUNTY OF

PERSONALLY CAME AND APPEARED BEFORE ME, the undersigned authority in and for the jurisdiction aforesaid, the within named _____, who after being by me first duly sworn states on his/her oath that all of the things, matters and facts contained in the above and foregoing Plaintiff's Response to Requests for Discovery Propounded by Defendant, _____, M.D., are true and correct as therein stated.

SWORN TO AND SUBSCRIBED BEFORE ME, this the _____ day of _____, 20____.

NOTARY PUBLIC

My Commission Expires:

CERTIFICATE OF SERVICE

I, _____, do hereby certify that I have this day mailed, via United States mail, postage fully prepaid, a true and correct copy of the above and forgoing Plaintiff's Response to Requests for Discovery Propounded by Defendant, _____, M.D., to:

Dated this the _____ day of _____, 20____.
