PLAINTIFF

VS.

NO.

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

FIRST SET OF INTERROGATORIES AND REQUEST FOR PRODUCTION OF DOCUMENTS PROPOUNDED BY DEFENDANT, , M.D., TO PLAINTIFF AND NOTICE OF DEPOSITION OF PLAINTIFF

Now comes , M.D., one of the Defendants in the above-styled and numbered cause, by and through his/her attorneys and pursuant to Rules 33 and 34 of the Rules of Civil Procedure, propounds to the Plaintiff the following Interrogatories and Request for Production of Documents.

INSTRUCTIONS

The Interrogatories and Request for Production of Documents shall be deemed continuing so as to require supplemental answers at a reasonable time prior to trial if additional information with respect to this discovery is obtained by Plaintiff or his/her counsel.

In answering these Interrogatories and responding to the Request for Production of Documents you are required to furnish all information that is available to you or subject to reasonable inquiry by you, including information in the possession of you, your attorneys, advisors, experts or other persons directly or indirectly employed by, or connected with you or your attorneys, and also anyone else otherwise subject to you or your attorney's control.

If any information called for by any Interrogatory and/or

- (a) its author;
- (b) to whom addressed;
- (c) all copy addresses;

(d) all other persons who have received, copied or otherwise permitted to see all or part of the original or any copy

(e)

- (f) a description of each subject matter discussed, described or referred to therein;
- (g) the specific reason why you claim it is privileged; and

(h) the name of its present custodian.

DEFINITIONS

As used herein, (both in the Interrogatories and Request for Production) the following terms should have the meanings indicated:

(a) "All facts" shall include identification (as defined below) of persons and documents as well as specifications of places, dates, acts, events and exact words used in conversations (or substance of conversations if exact words are not remembered).

(b) "Defendant" shall mean the person(s) named in this lawsuit and agents, representatives, or attorneys, or any other person acting or purporting to act on your behalf.

(c) "Describe" means to specify completely and accurately the subject matter upon which inquiry is made, using the most factual statements of which you are capable.

(d) "Document" means any printed, typewritten, handwritten or otherwise recorded matter of whatever character, included but not limited to, letters or other correspondence, memoranda, notes, telegrams, bulletins, agreements, calendars, diaries, telephone call records and slips, handwritten notes, financial records, contracts, plans and specifications, inspections or peculiar knowledge with respect to the issues involved in this suit and shall also mean medical physicians.

- (f) "Family member" means any member of your immediate family.
- (g) "Identify" or "identity" means:
 - (1) When used in reference to a natural person, to state:
 - (a) that person's full name and present or last known address, and
 - (b) present or last known position, title and employer or business affiliation;
 - (2) when used in reference to a business entity, to state:
 - (a) the entity's name and address;
 - (b) its principal place of business; and
 - (c) the legal nature of the entity, e.g., corporation;
 - (3) when used in reference to a document, to state:
 - (a) its description (e.g., letter, memorandum, report, etc.);
 - (b) its title and date, and the number of pages thereof;

- (c) its subject matter;
- (d) its author;
- (e) the person or persons to whom it was directed; and
- (f) its present location and the identity of the person presently having possession, custody or control of such document.
- (g) "Specify" means to describe completely and accurately the subject matter about which inquiry is made, using the most factual statements of which you are capable.
- (h) "You" or "your" means "Defendant(s)", as defined above.

INTERROGATORIES

INTERROGATORY NUMBER 1: Please describe in complete detail all injuries, illnesses and disabilities that you suffered from within a () year period preceding , stating in your answer the parts of the body so affected, and the severity of such injuries, ailments or pains.

INTERROGATORY NUMBER 2: If, as a result of any prior existing illness, injury or disability, as defined above, you suffered any permanent injuries, illnesses, disabilities, or pain, please describe the same fully, stating their nature, extent and location.

INTERROGATORY NUMBER 3: Please identify any and all medical or hospital treatment which you received as a result of any prior existing illness, injury or disability, as defined in Interrogatory Number 1, stating in each case the dates thereof, the medical condition for which treatment was sought, and the names and addresses of the physicians, hospitals, or other health care providers involved.

INTERROGATORY NUMBER 4: With respect to any physicians or other health care providers who have treated you for any prior condition as enumerated in Interrogatory Number 1 and which you identified in answer to Interrogatory Number 3, state whether or not you have received any sort of written medical reports, medical malpractice alleged in the complaint from or through any medical person?

INTERROGATORY NUMBER 6: If your answer to the preceding interrogatory is in the affirmative, please state, for purposes of discovery, the following:

- (a) the name of the person(s) who obtained such information and the name, address, and a complete identification of any such medical person giving said information;
- (b) the date, time and place of your discovery or knowledge;

(c) the substance of any conversation, statement or writing from any such medical person to Plaintiff relating in any way to the said discovery or knowledge about any alleged medical malpractice.

INTERROGATORY NUMBER 7: In Paragraph IV of the complaint you contend that "Defendants were guilty of negligence and deviated from the standard of care in their examination, treatment, and care of Plaintiff." Please describe in detail and with specificity how you contend the Defendant, Dr. , was negligent and with respect to each allegation of negligence against Dr. , state the following:

- (a) the facts upon which the allegation of negligence is based, including a description of what damage you claim was caused by each such act or omission by Dr. ;
- (b) the identification of all persons who support or otherwise have knowledge of the facts upon which that allegation is based;
- (c) the identity and location of any and all documents which support or relate to the facts upon which that allegation is based; and
- (d) the identity of all supporting experts as to each Plaintiff with regard to the procedures to be performed upon him/her. With respect to said allegation, state the following:
 - (a) the facts upon which that allegation is based identifying each Defendant against whom the allegation is made;
 - (b) the name, occupation, residence and business address of all persons having knowledge of the facts on which that allegation is based;
 - (c) the identity and location of any and all documents which support the facts upon which this allegation is based; and
 - (d) the identity of all supporting experts.

INTERROGATORY NUMBER 9: If you contend that your allegations of negligence against any Defendant are supported by any text, article, journal, learned treatise, hospital rule, hospital policy, hospital or governmental regulation or other document of any description, then identify, as that term is describe herein, each document completely by title, author, date of publication, and otherwise so as to allow these Defendants to obtain copies thereof, and state with respect to each document so identified, the Defendant to which it applies.

INTERROGATORY NUMBER 10: Please identify each person whom you expect to call as an expert witness at the trial of this matter, and for any such person so identified:

(a) describe his/her qualifications and identify those documents reflecting his/her most current curriculum vitae;

- (b) identify the defendant(s) against whom the expert is expected to testify;
- (c) identify each such document consulted or reviewed by each expert in connection with his/her employment and performance of duties as an expert;
- (d) identify each person interviewed or consulted by each
- (e) describe the subject matter on which the expert is expected to testify;
- (f) describe the substance of all facts and opinions on which the expert is expected to testify; and
- (g) specify and provide a summary of the grounds for each opinion, including, but not limited to, the articles, books or learned treatises upon which the expert will rely in any manner in reaching his or her opinions and/or in testifying.

INTERROGATORY NUMBER 11: In Paragraph VI of the complaint, you allege that you have suffered various damage and incurred various expenses as a result of the alleged negligence of Defendants. Please identify each and every element of damage and itemize each and every expense you allege you are entitled to recover from the Defendants and with respect to each said individual element of damage and individual expense, set forth the amount you are seeking to recover, identify all persons having knowledge of each element of damage or expense, and identify all documents supporting each element of damage or expense.

INTERROGATORY NUMBER 12: Identify, as that term is defined herein, any and all persons: (a) having knowledge of any discoverable matter or (b) who may or will be called as witnesses at the trial of this matter.

INTERROGATORY NUMBER 13: State whether or not you or your attorneys or anyone acting in your behalf has obtained any statement (whether signed or otherwise adopted by any person making it or a stenographic, mechanical, electrical, or other recording, or a transcription thereof) from any person concerning the occurrence made the basis for this suit, and, if so, state the full name and address of each said person giving the statement, as defined above, physician, hospital, or other health care provider from whom treatment was sought.

INTERROGATORY NUMBER 15: To the extent that you have not done so in the preceding Interrogatory, please identify all other medical or hospital treatment that you have received since , , , stating the identity of the physician, hospital, or other health care provider from whom treatment was sought, the date(s) of the medical/hospital evaluation/treatment, and a brief description of the medical condition for which treatment was sought.

INTERROGATORY NUMBER 16: Inasmuch as no medical privilege exists in this case, will you execute all of the Authorizations for Release of Medical Information located at the end of this document and return to the attorney for this Defendant within the time in which you answer these interrogatories?

REQUEST FOR PRODUCTION OF DOCUMENTS AND THINGS

Defendants serve herewith pursuant to Rule 34 of the Mississippi Rules of Civil Procedure, this Request for the Plaintiff to produce for inspection and photocopying the following documents in her possession or control or in the possession or control of her attorney:

REQUEST FOR PRODUCTION NO. 1: Any and all written medical reports, medical records, or opinions, or any other documents from any physician or other health care provider relied upon by you and/or identified by you in answering Interrogatory Numbers 1-4, inclusive.

REQUEST FOR PRODUCTION NO. 2: Any and all documents relied upon by you and/or identified by you in answering Interrogatory No. 8.

REQUEST FOR PRODUCTION NO. 5: Any and all documents relied upon by you and/or identified by you in answering Interrogatory No. 9.

REQUEST FOR PRODUCTION NO. 6: Any and all documents relied upon by you and/or identified by you in answering Interrogatory No. 10.

REQUEST FOR PRODUCTION NO. 7: Any and all writings, notes, correspondence, or other documents of any sort substantiating the elements of damage and expense identified by you in your answer to Interrogatory No. 11.

REQUEST FOR PRODUCTION NO. 8: Any and all statements (as defined above in the Interrogatories propounded to you) identified by you in answer to Interrogatory Number 13.

REQUEST FOR PRODUCTION NO. 9: Any and all written medical reports, medical records, or opinions, or documents from any physician or other health care provider relied upon by you and/or identified by you in answering Interrogatory Number 14.

REQUEST FOR PRODUCTION NO. 10: Any and all written medical reports, medical records, or opinions, or documents from any physician or other health care provider relied upon by you and/or identified by you in answering Interrogatory Number 15.

REQUEST FOR PRODUCTION NO.11: The Authorizations for Release of Medical Information (found immediately preceding the certificate of Service) referred to in Interrogatory Number 16.

REQUEST FOR PRODUCTION NO. 12: Any and all tax returns filed by Decedent for tax years through , inclusive.

Said documents are to be produced for inspection and photocopying by counsel for Defendant, Dr. , at the time prior to trial if additional information with respect to these Requests is obtained by the Plaintiff or his/her counsel.

Respectfully submitted,

Attorney for

Of Counsel:

Telephone: MSB # Attorney for

NOTICE OF DEPOSITION

Please take notice that commencing at a.m./p.m. on , , , 20 the Defendant, Dr. , will take the discovery deposition, upon oral examination, of Plaintiff, , before an officer authorized by law to administer oaths at the office of , , , Mississippi. This deposition will continue from day to day until completed, and you are invited to attend and to take such part in the examination as you deem appropriate.

AUTHORIZATION FOR RELEASE OF MEDICAL INFORMATION

TO WHOM IT MAY CONCERN:

You are hereby authorized and requested to do any and all of the following things as pertains to my .

1. Disclose all facts of 's physical and/or mental condition and your care and treatment, with your charges therefor, to any member of the law firm of , , , , Mississippi, or its representative.

2. You may permit any member of said law firm to examine and make copies of all such records pertaining to and his/her medical treatment provided by your office and/or furnish such copies of his/her medical records to said law firm at their discretion.

3. You may give said law firm a written report pertaining to 's physical and/or mental condition and your treatment of him/her provided you understand you are to bill said law firm for the report and said law firm is to pay for the report.

4. If this authorization is presented to any hospital, such hospital is authorized to provide said law firm copies of all records on in said hospital, regardless of the date of said records, provided it is at the expense of said law firm, and regardless of the date of this Release.

5. You are authorized to honor a machine copy of this Release as fully as if it were the original.

Dated this the day of , 20 at

WITNESS (signature)

Name:

Address:

Phone #:

CERTIFICATE OF SERVICE

I, , one of the attorneys for Defendant, , M.D., do hereby certify that I have this day served a true and correct copy of the above and foregoing FIRST SET OF INTERROGATORIES AND REQUEST FOR PRODUCTION OF DOCUMENTS PROPOUNDED BY DEFENDANT, , M.D., TO PLAINTIFF AND NOTICE OF DEPOSITION OF PLAINTIFF by placing said copy in the United States Mail, postage prepaid, addressed to the following counsel of record for Plaintiff:

Dated this the day of , 20 .