

Discovery Questions

Basic Information

- What were your height, weight and age on the day in question? Are you right or left handed?

Seat and Head Restraint

- Where were you seated? Describe your seat adjustment (forward/middle/backward), seatback angle (normal/reclined) and any damage to your seat. Describe your head restraint adjustment (up/down) and the distance between the back of your head and the head restraint.

Body Position

- How were you sitting and what were you doing at impact? Where were you looking at impact? Were you leaning forward or twisted? Describe the position and orientation of your head, trunk, pelvis, arms and legs at impact. Focus on injured areas.

Awareness and Bracing

- Were you aware of the impact before it occurred? Did you brace for the impact? How did you brace?

Seatbelts and Airbags

- Were you wearing a seatbelt? What kind of seatbelt? Was the seatbelt snug or loose? Describe how the lap and torso belts were positioned across your body. Did the airbag(s) deploy? Which airbags deployed?

Motion and Contact

- Did you move during the impact? What direction did you move? Did you hit anything? Consider the dash, steering wheel, windows, door panels, other occupants and cargo. What body parts struck each area of the car? Where did you come to rest?

Clothing and Distractions

- What clothes were you wearing (bulky clothes may interfere with seatbelt performance)? Were you wearing a hat, glasses or earphones? Were you distracted by anything (traffic, road signs, radio, food, phone, texting, email, navigation)?

Injuries

- For each injury, describe the onset, severity and duration of the related symptoms. Did you observe cuts, bruises, bumps, abrasions or any swelling on your body? Do you have photographs of your injuries? Did you seek any treatments not covered in the medical documents?

Medical History

- Describe prior complaints, injuries, surgeries and medical conditions (focus on currently injured areas). What caused the prior injuries? Describe the intensity and duration of their symptoms. Were they active or resolved at the time of the current collision? Describe previous collisions or other accidents.

Other Exposures

- Describe your occupation. Explore work related tasks (e.g., lifting) relevant to the injuries. Describe your hobbies/ sports and the level/frequency of involvement.

Key Sources of Evidence

- Hospital records, including operative notes, doctor and nurse's notes and the ambulance report.
- Radiology reports – all imaging (X-ray, MR, CT, etc.) from 5 years before the incident to the present.
- Medicolegal reports, IME reports, and family physician notes pre and post incident.
- Photographs of injuries.
- Detailed body diagram showing location of all injuries, especially lacerations, abrasions and bruises.

