

THE CRASH COURSE

ON DOG BITE CLAIMS IN CONNECTICUT

HASTINGS, COHAN & WALSH, LLP
Attorneys at Law



1.888.842.8466
www.hcwlaw.com

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**440 Main Street
Ridgefield, Connecticut 06877
Telephone: 203-438-7450
Facsimile: 203-438-0263**

www.hcwlaw.com

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DEAR POTENTIAL CLIENT:

Thank you for considering our firm to represent you in your personal injury case. We have prepared the following materials to give you a better understanding of your dog bite injury case and to allow you to enable us to potentially help maximize the value of your case.

We have decades of experience in representing injured clients and their families who have received millions of dollars from negligent parties and their insurance companies in cases involving:

Motor Vehicle Accidents	Dog Bites
Wrongful Death Cases	Defective Products
Medical Malpractice	Premises Liability
Fall Down Cases	Sports Accidents

As a further testament of our abilities, we serve as referral counsel for a variety of cases both from local and out-of-state firms. We also have contacts with some of the best lawyers throughout the country and can assist you or others with your out-of-state cases.

Our greatest source of business comes from our clients. You can be confident that if a relative or friend requires our services, we will provide the same professional hands-on attention that you will receive.

We understand that you could chose from any number of other firms to represent you in your important legal matter. We appreciate the confidence you have placed in us and we will work hard to gain and keep your trust.

Please carefully review and follow the information which is set forth in these pages. We are accessible and encourage you to contact us whenever you have a question.

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CHAPTER 1

FREQUENTLY ASKED QUESTIONS

People who are considering bringing a personal injury claim usually come to us seeking answers to certain basic questions. In an easy question-and-answer format, this chapter addresses the concerns most commonly voiced by current, new, or prospective clients.

Q: HOW DO I KNOW IF I NEED YOUR SERVICES?

A: You probably will need our services if you have been seriously injured or wronged in some way, as a result of an accident, medical malpractice, a defective product, a slip and fall, a dog bite, a sports injury, or other cause. We provide a free consultation to explore the facts of your case and to advise you of your legal rights.

***Q: WHY SHOULD I HIRE AN ATTORNEY TO ASSIST ME IN
RESOLVING MY ACCIDENT OR INJURY CLAIM?***

A: More money for you is the primary reason! An insurance-industry research institution studied personal injury claims conducted by the injured person alone versus those that were handled by attorneys. The study determined that those represented by attorneys had a higher net recovery for themselves (more money in their pocket after attorney's fees and costs) than those without attorneys.

Our attorneys provide you with the advantage of representation by skilled professionals whose experience and insight enable you to equal the playing field when dealing with insurance companies and major corporations to help maximize the amount of money you can recover. Having our firm involved in your case allows you to focus on recovering from your injuries while we focus on holding the responsible party accountable for your injuries and damages.

Q: WHY SHOULD I HIRE HASTINGS, COHAN & WALSH, LLP, AS MY ATTORNEYS?

A: We are passionate about what we do and what we do makes a difference in the lives of our clients.

We are concerned for our clients' well being. We want our clients to receive the excellent medical care they deserve and to recover physically from their injuries, as well recovering emotionally and economically. We care enough to devote ourselves fully to each client's case.

We know the law and know how to use it for our clients' interests.

Our lawyers have received numerous awards for their work and are nationally recognized for their accomplishments.

We obtain meaningful—and sometimes hardly imaginable—monetary recoveries for our clients with a minimum of wasted time, effort, stress and worry on our clients' part.

Q: *I HAVE BEEN INJURED. WHAT WILL IT COST TO HIRE YOU?*

A: We represent personal injury clients on a contingency-fee basis. In other words, you pay attorneys' fees only if we win—and you pay no fees if we lose. You are responsible for costs incurred, but these costs do not include attorneys' fees, and the costs are paid from any settlement or judgment entered against the person responsible for your damage or injury. We advance costs so that the case can be properly prepared and presented for settlement or trial. If there is no recovery, you pay no costs as well. There are no out of pocket expenses for you which you have to pay on an ongoing basis. We take all of the financial risk in representing you so you can concentrate on getting better.

Q: *HOW DO YOU CHARGE FOR OTHER LEGAL SERVICES?*

A: For most matters, Hastings, Cohan & Walsh, LLP, bills for its services at standard hourly rates based on the amount of time spent by professionals on the matter. Our hourly rates are reviewed on a periodic basis. In other matters, such as the drafting of simple leases, real estate transactions, certain criminal and motor vehicle matters, preparation of simple wills and powers of attorney and the formation of business entities, a flat-fee bill, with the cost of services established in advance, will be presented.

Q: *DO YOU OFFER A FREE CONSULTATION?*

A: Yes, we offer an initial consultation for which we do not charge. The purpose of this initial consultation is to review the facts of your case, give you an indication of whether the case is one that

we might be interested in handling and discuss with you the financial arrangements for our representation.

Q: *HOW SOON AFTER I AM INJURED MUST I FILE MY LAWSUIT?*

A: Every state has certain time limits, called statutes of limitations or statutes of repose, that govern the amount of time you have to file a personal injury lawsuit. In Connecticut, you may have as little as two years to file a lawsuit arising out of an accident. There are also a number of notice requirements that must be met within a much shorter period of time. *If you miss the deadline for a notice requirement or for filing your case, your claim can be dismissed.* Consequently, it is important to talk with us as soon as possible after you receive or discover an injury.

Q: *WHAT IS “NEGLIGENCE”?*

A: The critical issue in many personal injury cases is just how a “reasonable person” would be expected to act in the situation that caused the injury. A person is negligent when he or she fails to act like a “reasonable person.” Whether a given person has met the “reasonable person” standard is often a matter that is decided by a jury after the presentation of evidence and argument at trial.

Q: *WHAT IF I CAN’T PROVE THAT SOMEONE’S NEGLIGENCE CAUSED MY INJURY? IS THERE ANY OTHER BASIS FOR LIABILITY BESIDES NEGLIGENCE?*

A: Negligence is not the only grounds for liability. Certain individuals or companies may be held “strictly liable” for certain activities that harm others, even if they have not acted negligently or with wrongful intent. On the grounds of strict liability, a person

injured by a defective or unexpectedly dangerous product, or by a dog bite, for instance, may recover compensation for the injury without showing that the responsible party was actually negligent.

Q: WHAT COMPENSATION MIGHT I RECEIVE IF MY PERSONAL INJURY LAWSUIT IS SUCCESSFUL?

A: Usually, a person who is liable for an injury—which generally means his or her liability insurance company—must pay an injured person for:

- Past and future medical care and related expenses
- Past and future income lost because of the accident
- Permanent physical disability or disfigurement
- Loss of family, social and educational experiences
- Emotional damages, such as stress, embarrassment, depression, or strains on family relationships
- Damaged property

You will be awarded “damages,” or compensation, which is money intended to restore you to the position you were in before your injury. This money is not considered income (excluding monies paid for loss of income) and is not taxable as income by the federal government or state.

CHAPTER 2

TORT LAW: AN OVERVIEW

A tort claim is a cause of action (a case) that results from a civil wrong that does not involve a contract claim. *Tort* is derived from the French word for “wrong.” Tort law is a highly specialized and complex area of the law.

Generally speaking, there are three types of torts:

1. Intentional Torts

An intentional tort involves an action or activity calculated to harm or offend the victim. Examples of intentional torts include assault, battery, false imprisonment, intentional infliction of emotional distress, defamation, trespass to land, and trespass to chattels (taking personal property). In certain situations, the conduct involves not only tort law but also criminal law.

The problem with intentional torts is that, in many cases, there is no insurance coverage available to compensate the injured party for his or her injuries. For example, if a person assaults you and causes you to receive serious injuries, you could not successfully submit a claim to that person’s homeowners or automobile insurance company, as coverage would be denied. You would then have to look

for compensation to the assets or property owned by the person who committed the tort. In many instances, the offending party will have few, if any, assets. Therefore, you would have little chance of collecting any money for your injuries.

You might have a strong case in which the liability or fault of the offending party is clear, and you also may have sustained significant damages that would make your case worth a lot of money. Nevertheless, if an attorney is not able to collect any of these funds, there is no economic incentive for an attorney to take the case, because no one is likely to see any money even if the case is successful.

It is important to consult with us to review the facts of your case and the *various potential theories* of liability that might provide for insurance coverage, perhaps from a third party. For example, if a bar serves alcohol to an intoxicated person who later starts a fight with another patron and causes an injury to that patron, then the bar might be liable for serving too much alcohol to the party who started the fight.

2. Negligence

Negligence is a very broad area of tort law that deals with a great many types and causes of action. Basically, negligence involves the failure to exercise the level of care that a reasonably prudent person would have exercised under the same circumstances. If a person causes a motor vehicle accident, for example, an issue that would have to be determined is whether or not the person who caused the accident was negligent, that is, whether that person did something that a

reasonably prudent person would not have done, such as speed or go through a red light.

Negligence involves a breach of that duty that one person owes to another person and the damage that results from that breach.

Because the laws vary greatly from state to state, it is important to consult with us to determine how the specific laws of a state impact on your case. In Connecticut, for example, we follow a comparative negligence standard. If you are injured in Connecticut and your case has a value of \$100,000, if a jury finds you to be 40% at fault, you would be awarded \$60,000 (40% less than the total value of the case).

The great number of issues involved in these kinds of cases could include differing standards of care, a preexisting condition, statutory duties, age, the use of alcohol or drugs, duties, attractive nuisances, Good Samaritan laws, insurance issues, proximate cause, and foreseeability. These and many other nuances make this a very complicated area of the law.

Typical examples of negligence cases include:

- Accident cases, all types
- Slips and falls
- Medical malpractice
- Birth injuries
- Traumatic brain injuries
- Spinal-cord injuries
- Wrongful death
- Premises liability

- Lead poisoning
- Defective products
- Burns
- Explosions
- Toxic torts
- Class actions

A separate kind of negligence case involves medical malpractice. Medical malpractice generally involves a standard of care expected of a medical professional that is not met, resulting in damages to the injured party.

Medical malpractice cases may result from failure to properly diagnose a condition, surgical error, failure to treat properly, failure to properly monitor a condition or situation, failure to get a patient's informed consent, and a number of other causes.

Generally speaking, we will consult with a third-party specialist in the same area of medicine to determine whether or not there was a departure from the standard of care (that is, whether malpractice was committed).

3. Strict Liability

Certain states have specific statutory provisions that make a person or entity strictly liable for a person's injury. For example, certain states recognize some or all of the following strict liability torts: parents being held strictly liable for an act of their child; worker's compensation making an employer liable for an employee's injuries;

owners of pets that bite people being held strictly liable for the pet's actions; and certain cases involving toxic torts.

If a party causes you to be injured through his or her negligence, you are entitled to compensation for your injuries, which will entitle you to money damages.

Damages are supposed to compensate the injured party for a number of losses, which could include:

- Medical bills (past and future)
- Out-of-pocket expenses
- Past Lost wages
- Future Lost Wages
- Pain and suffering
- Permanent injuries
- Punitive damages (in extraordinary cases)

The methods of calculating these damages and a great number of other issues involved make strict liability cases an extremely complicated and difficult area of the law.

The importance of contacting us at the earliest possible opportunity cannot be overstressed. Do so at the earliest possible moment.

CHAPTER 3

THE FIVE THINGS YOU MUST DO AFTER YOU HAVE BEEN BITTEN BY A DOG IN CONNECTICUT

If you have been bitten by a dog in Connecticut and have been injured then there are number of things that you should do right from the start of your case. If you do not do these things, then you run the very real risk of harming your case and exposing yourself to additional damages and injuries. Therefore, in an effort to protect yourself and your Connecticut dog bite injury case you should do the following:

1. You should immediately contact the police, dog warden and emergency medical personnel because you will want to make sure that the police and or dog warden comes to the scene where you were bitten, and determines who the owner of the dog is. The police and/or dog warden will want to make an incident report and determine whether or not the dog has had its rabies shots. The investigation will be conducted by the police and or dog warden and all of the needed information should be obtained by them.

You will also want to make sure that you get the appropriate medical care for the injuries that you sustained in the dog attack.

It is highly recommended, that if the dog's teeth or nails have broken through your skin, that you be transported to the hospital and checked out as soon as possible. If the dog's saliva or other bacteria has penetrated your skin then you run the very real risk of getting some type of infection as a result of the dog attack. The hospital will also want to determine if you should get a rabies shot and will certainly want to check into whether or not you would need a rabies shot. Generally speaking, a person who has been attacked by a dog will really feel the effects of the injuries the very next day and may later feel much worse than they did on the day of the attack.

2. You should immediately begin to take pictures of all of the affected areas of your body that have been injured as a result of the dog attack. If you are able, take pictures of the accident scene, including the attacking dog, the area where the attack occurred, and get the names and telephone numbers of any witnesses who were present at the time of the attack or who came upon the scene shortly after the attack. You should make sure that this information is given to the police officer and or dog warden who appears at the scene of the dog attack.

You should immediately contact an experienced Connecticut dog bite lawyer. It is very important that you get the advice and counsel of an experienced Connecticut dog bite lawyer as soon as possible after your dog attack. Under no circumstances whatsoever should you speak with the insurance company of the owner or keeper of the dog. Generally, the insurance adjuster

who represents the person whose dog caused your injury will attempt to contact you and obtain a recorded statement as to what happened. Do not speak with this individual unless you first speak with an experienced Connecticut dog bite lawyer.

3. Chances are that you will need to hire a Connecticut dog bite lawyer if your injuries have resulted in the penetration of your skin, stitches, lacerations, if you have lost time from work, if you expect to incur additional medical bills, if you are going to be left with any type of scars, or any one of a number of other scenarios. Not every Connecticut dog bite injury case requires that you hire a lawyer but every Connecticut dog bite injury case requires you to consult with an experienced Connecticut dog bite injury lawyer. If you proceed without getting the advice of an experienced Connecticut dog bite injury lawyer, then you run the very real risk of doing something that could jeopardize your case.
4. You should also not be speaking with any other individuals about your Connecticut dog bite injury case unless and until you first speak with an experienced Connecticut dog bite injury lawyer. Most Connecticut dog bite injury lawyers will handle these cases on a contingency fee basis which means that they are not paid a fee unless and until they collect money damages for you. Additionally, most Connecticut dog bite injury lawyers will advance the costs to properly develop your case and those costs will only be repaid at the time your Connecticut dog bite injury lawyer recovers money damages for you. If there is no recovery,

then you should owe no legal fees and you should owe no costs. Our firm has been representing Connecticut dog bite injury victims for decades and we handle these cases on a contingency fee basis and advance the cost to properly develop your case.

5. After you speak with your Connecticut bite injury lawyer, a plan should be developed to determine what you should be doing for the injuries that you sustained in your dog bite attack. Your Connecticut dog bite injury lawyer can also contact the police and dog warden to follow up with them to determine how they are handling the investigation, whether or not the biting dog has had its proper shots, and whether or not the dog has been quarantined. A discussion with the dog bite injury victim can be had so that a determination can be made as to whether or not it is the wish of the dog bite injury victim to have the offending dog put down.

An experienced Connecticut dog bite injury lawyer, such as the lawyers in our office, will be happy to explain all of this information to you, have these discussions with you, and help you to understand your options and help you make decisions regarding how you would like to proceed with your case.

CHAPTER 4

FREQUENTLY ASKED QUESTIONS ABOUT DOG BITES

1. How Many People are Attacked By Dogs Every Year?

A: In the United States, 43,021,000 households, or 37.2% of all households own on average 1.7 dogs. The Center for Disease Control revealed through a survey in 2007, there are 4,700,000 people bitten by a dog annually. About 800,000 of those injured will seek medical attention and about 368,000 victims will require medical treatment at a hospital emergency room.

2. What Should I do if I Am a Victim of a Dog Bite or Animal Attack?

A: Contact our dog bite attorneys as soon as possible. It is critical not to do anything that may negatively affect your dog bite case. Our lawyers may advise you not to give any statements or sign any authorizations that may harm your case. There are potential notice requirements, which can end in the dismissal of your dog bite case if not properly filed on time.

3. How is Liability Determined?

A: CT has a dog bite statute that imposes strict liability on the owner or keeper of a dog with limited exceptions. The statute can be found at C.G.S. section 22-357 and reads as follows:

Damage to person or property. If any dog does any damage to either the body or property of any person, the owner or keeper, or, if the owner or keeper is a minor, the parent or guardian of such minor, shall be liable for such damage, except when such damage has been occasioned to the body or property of a person who, at the time such damage was sustained, was committing a trespass or other tort, or was teasing, tormenting or abusing such dog. If a minor, on whose behalf an action under this section is brought, was under seven years of age at the time the damage was done, it shall be presumed that such minor was not committing a trespass or other tort, or teasing, tormenting or abusing such dog, and the burden of proof thereof shall be upon the defendant in such action.

4. *Does the dog have to bite someone else first or must the owner of the dog know the dog is dangerous before I have a valid claim if I am the first person the dog has bitten?*

A: Connecticut, unlike some states, does not have a one-bite rule. The owner or keeper of the dog is liable, with limited exceptions, the first time their dog bites someone even if they had no reason to know that the dog would bite someone.

5. *What If I Can't Prove That Someone's Negligence Caused My Injury? Is There Any Other Basis For Liability Besides Negligence?*

A: Yes, as discussed above a dog bite case in Connecticut is a strict liability case, with limited exceptions, which does not require you to prove that the owner or keeper of the dog did anything wrong.

6. *What Compensation Might I Receive If My Case is Successful?*

A: The liable party must pay, if applicable, through their liability insurance company to the injured party:

- Past and future medical care and related expenses
- Past and future income lost due to the accident
- Permanent physical disability or disfigurement
- Loss of family, social, and educational experiences
- Pain
- Suffering
- Emotional or psychological damages, such as stress, embarrassment, depression
- Strains on family relationships
- Punitive Damages (In Extraordinary Cases)
- Damaged Property

The injured party will be awarded “damages” or compensation. This is money to return you to the status you were in before the injury occurred. The compensation is not income except for the income lost during the injury. This money is not taxable by the state or federal government.

Besides the actual bite victim, the law recognizes that other people may also suffer as a bystander and may be compensated. A parent who witnesses their child being bitten by a dog could

possibly suffer emotional distress. A spouse of the victim who is harmed may be compensated for loss of consortium. The family of a victim who dies of a dog bite injuries can sue for wrongful death.

Dog bites and attacks occur to children and primarily result in serious injuries because of their size. Other injuries involve serious and permanent scars and nerve damage.

A victim of a dog bite may file a claim varying from trauma suffered, pain, wages loss and their overall leisure and lifestyle activities. If you or a family member has been a victim of a dog bite, contact us now.

7. If I Have A Dog Bite Accident Case What Should I Do?

A: It is important to contact us as soon as possible after your dog bite incident. It is imperative not to do anything that may harm your case. We may advise you not to give any statements or sign any authorizations, which may hurt your case.

8. How Do I Get About Getting Experts To Help Me With My Dog Bite Accident Case?

A: We can hire experts to help further develop your case. Experts may include a doctor, therapist, or a plastic surgeon.

9. Who Will Pay The Expenses of Hiring All Of These Experts?

A: We advance all fees and expenses. If you do not receive a recovery, we will absorb all fees. You only pay us if you collect money for you.

CHAPTER 5

CONNECTICUT DOG BITE ATTORNEY

If you have been injured in a Connecticut dog bite injury case then there are two things that you should be doing immediately following the attack. An experienced Connecticut dog bite injury lawyer will tell you that it is very important that you contact the police or dog warden as soon as you have been bitten so that your case can be investigated, the dog can be quarantined, a determination can be made as to whether or not the biting dog had its shots, the name of the owner or keeper of the dog can be obtained, the names and addresses of any witnesses, and statements of any witnesses, and any and all other information that needs to be investigated by the authorities can be collected.

The other thing that a Connecticut dog bite injury attorney will tell you is that you should seek immediate medical attention. If the biting dog has broken through your skin then it is very important that you go to the emergency room of the nearest hospital so that you can be treated for your injuries. You should also consider going to the hospital if you have any other types of injuries that have resulted from the dog bite attack. These types of injuries could result from being knocked to the ground or thrown up against some type of object which could cause some type of trauma to your body.

You should also contact an experienced Connecticut dog bite injury lawyer at the earliest possible moment so you can find out what you should be doing and what you should not be doing. You should not speak with the insurance company of the owner or keeper of the dog unless and until you first speak with an experienced Connecticut dog bite attack attorney. If you proceed without getting the proper advice from a Connecticut dog bite injury lawyer then you run the risk of doing or saying something that can have a very negative effect upon your dog bite case.

Our Connecticut dog bite accident and injury lawyers are happy to answer your questions at no cost. You can also get free information by calling our toll-free number at 888-842-8466 and speaking with one of our Connecticut dog bite lawyers. If you would like, you can schedule a free office consultation where our Connecticut dog bite attorney will be happy to discuss the facts of your case with you and will advise you as to what you should be doing.

The call is free. The advice is free. Our Connecticut accident and injury book is free. If we take your case, we will handle it on a contingency fee basis, which means that we are not paid a fee unless and until we recover money damages for you. We will also advance the cost to properly develop your case. Again, if there is no recovery then you will owe us no costs. We take all of the financial risk in representing you in your Connecticut dog bite attack case so you can concentrate on what's most important which is getting better as quickly as possible. Don't wait until it's too late. Contact us today.

CHAPTER 6

WRONGFUL DEATH CLAIMS

Basically speaking, a wrongful death case results when a person dies and the survivors are entitled to file a claim against the responsible party or entity. The causes and types of wrongful death actions can include: any type of accident case; medical malpractice which includes cases against doctors, hospitals, nursing homes, or other healthcare providers; defective products; workplace accidents; other negligent acts; or criminal or intentional conduct. Depending upon the laws of the jurisdiction that apply to the wrongful death action, obtaining compensation from the at fault party or parties may or may not require proof of negligence.

A wrongful death action is unique in that it originally did not exist under the common law principles of jurisprudence that formed the basis of our legal system. Originally, it was held that a claim involving the death of a person “died” with the victim because there was no way to compensate that individual for their damages. The surviving family members were precluded from claiming damages from the party that caused their loved one’s death.

Wrongful Death Statutes

Over the years, states began enacting “wrongful death” statutes or laws that provide for a method or means of obtaining compensation for estates of decedents or family members who have been damaged as a result of the death of the victim. Today, all states have some type of wrongful death law that provides for a means of obtaining compensation for the damages and injuries that result from a decedent’s death.

Although wrongful death laws vary from state to state, generally these statutes consist of four basic elements: (1) The death of the decedent or victim which was caused in whole or in part by, or can be attributed to, the Defendant (or responsible party); (2) The Defendant intentionally caused or was negligent or is strictly liable for the descendant’s death; (3) There is a surviving spouse, children, dependents or beneficiaries of the decedent; and (4) Damages or injuries have resulted from the death of the decedent.

Damages Recoverable

The estate of a decedent, depending upon the laws of the state that apply, could be entitled to recover some or all of the following types of damages:

1. Expenses associated with or related to the victim’s death which could include: ambulance, hospital, doctor, surgical, medical and rehabilitative care bills; and funeral and burial expenses;
2. Loss of the victim’s future earnings until their retirement or death which sum is meant to compensate the

estate for the decedent's inability to earn these sums in the future. This sum is generally determined by having an economic expert perform a number of complicated calculations and provide a report detailing the method and manner in which these future lost earnings were calculated; past loss of income from the date of the accident or incident until the decedent's death; pain, suffering and mental anguish which was experienced by the victim prior to their death and the pain, suffering and mental anguish experienced by the survivors; the loss of consortium on the part of the surviving spouse; and the injuries suffered by the children of the decedent for loss of care, companionship, care, love and affection, comfort, guidance, counsel and associated losses. These damages are awarded to compensate family members for the loss of the decedent's presence in their lives.

Who Can Sue

Generally, in order to commence an action to recover damages in a wrongful death lawsuit the law of the specific state should require that the case be instituted by and in the name of the personal representative of the estate of the deceased person. This representative is usually the Executor named in the decedent's will or if the victim died without a will, the person appointed the Administrator of the decedent's estate who is in most cases the surviving spouse or another person appointed by the Probate or Surrogate's Court.

Most Common Causes of Wrongful Death Cases

Wrongful death cases can occur in a number of different circumstances, which could include:

- 1. Motor Vehicle Accidents:** Drivers have a responsibility to operate their vehicles in a conscientious manner, such that other drivers, passengers and pedestrians are safeguarded against injury or death by negligent driving maneuvers. Unfortunately, for the approximately 38,000 people who died in motor vehicle accidents in 2008, this was not the case. In addition to obeying traffic laws, drivers must take into account road conditions, traffic flow and hazards and adjust their driving accordingly so as to not operate their vehicles in a negligent or reckless manner.
- 2. Medical Malpractice:** Medical malpractice is an increasingly common cause of wrongful death. Medical and healthcare professionals have a duty to provide treatment and care in accordance with acceptable standards of practice. Wrongful death medical malpractice occurs when a medical professional negligently fails to deliver appropriate medical care to a patient who consequently dies. The deceased patient's family members, through the decedent's legal representative, can bring wrongful death claims against doctors, hospitals, nurses, psychologists and other healthcare providers who are responsible for the negligent care and causally related death of the patient.

Because of the complicated nature of a wrongful death action and due to a number of considerations, not the least of which are notice provisions and statute of limitation deadlines, it is extremely important that an experienced wrongful death lawyer be contacted at the earliest possible moment.

CHAPTER 7

UNIQUE ISSUES IN SERIOUS CHILD INJURY CASES

A minor child, meaning someone under the age of 18, is legally incompetent to sue, to be sued, or to enter into legally binding contracts (in most cases). A child or adolescent also faces other concerns as a result of experiencing a serious injury to a body that is still developing and growing. Therefore, a serious child injury case can present a number of other complications which merit a brief review, which include but are not limited to the following:

Growth Plate Fractures

The skeletal structure of both adults and children share many of the same risks of injury. Children however are also subject to a unique injury referred to as a growth plate fracture. The growth plate, also referred to as the epiphyseal plate or physis, is that area of growing tissue located near the end of the long bones in children and adolescents. Each long bone has at least two growth plates with one being located at each end of the bone. The growth plate essentially determines the length and shape of the mature bone when it is fully developed which generally happens during adolescents. After the growth plates close they are replaced by solid bone. Generally growth plates

are the weakest skeletal areas of children and adolescents; they are more vulnerable to injury and could result in a growth plate fracture. Growth plate injuries occur almost twice as often in boys than in girls due in part to the fact that girls bodies mature earlier than boys which means that their bones finish growing sooner so the growth plates are replaced with solid bone. Additionally, one third of all growth plate injuries result from sports injuries while about one fifth result from motor vehicle accidents, falls, chronic stress and overuse. A child who has persistent pain or has a great deal of difficulty in moving the affected limb could be just told to live with the pain rather than be seen by a specialist to determine if a growth plate has been fractured. In certain instances, if left untreated, a growth plate fracture may result in a permanent disability or may interfere with the proper growth of the limb. The care and treatment of a growth plate injury should be commenced as soon as possible. The treatment for a growth plate injury depends upon the nature and severity of the fracture but could include:

- **Immobilization:** The affected limb might be put in a splint, an air cast, a soft cast or a hard cast and the child would be told to limit his or her activity
- **Manipulation or Surgery:** If the fracture is displaced, which means that the ends of the fractured bone do not meet as they should, then the doctor will either have to put the bones back in their correct position either by manipulating the bones manually or by a surgical procedure;

- Physical Therapy: Your child's doctor might prescribe a course of physical therapy which is meant to strengthen the muscles that support the affected area so as to improve the affected limb's ability to move more freely; or
- Long Term Follow Up: Your child's doctor will probably want to follow up on a periodic basis to monitor your child's progress which could include the use of diagnostic imaging including X-rays to make sure the bone is healing properly. The vast majority of growth plate injuries heal without any long-term negative effects. The ability of your child's growth plate fracture to heal without a long term disability would depend upon some or all of the following factors:
 - The location of and severity of the fracture on the bone;
 - The type of fracture;
 - The specific growth plate which is fractured;
 - The timeliness and type of treatment; or
 - The age of the child.

It is very important that this unique child injury be properly examined and treated so that the injured child can get the best result possible and hopefully not be left with any type of permanent disability.

Scar Cases

Dog bites to the face of children are common, especially in younger children, and often times require multiple plastic surgical procedures to deal with the serious scars. Many times, dog bites to children cause a combination of serious injuries including crush, lacerations and shear injuries. Some of these bites result in serious infections, skin grafts and reconstructive and plastic surgery.

Unfortunately, in serious child dog bite cases it is necessary for the young victim to undergo multiple scar revision surgeries in an effort to improve the child's physical appearance. It is strongly recommended that if a person, and especially a child, has a dog bite that will possibly leave a permanent scar have a competent plastic surgeon be consulted and seen at the earliest possible moment.

Structure Settlements

In the 1970s, personal injury claimants began resolving cases through structured settlements. In the early 1980s, Congress enacted legislation that encouraged broader use of structured settlements. The key terms of a party's agreement to be paid in periodic installments must be agreed to by the injured party and the responsible party's insurance company. The new laws enacted by Congress changed the way these funds were treated by the IRS and effectively created a tax shelter for accident victims. As long as the structured settlement, or annuity, was properly set up then all installment payments made would be received tax free (excluding monies paid for loss of income). Therefore, a structured settlement is a method of resolving an injury claim by paying settlement proceeds over time, resulting in

tax free monies received by the injured party. The annuity payments can be paid at agreed upon times which might cover expenses such as college tuition, a down payment on a house, or yearly living expenses. To maximize the amount of money being paid by and through an annuity, it is important to remember the following:

- The more money that is used to fund the annuity, the greater the payment can be;
- The later the payments being made, the greater the payments can be;
- The longer the payment schedule extends, the greater the payment can be; and
- The smaller the payments are at the beginning of the payment schedule, the greater the payment can be.

It would be prudent for you to at least investigate the option of a structured settlement to see if it might be of interest to you. There are a great number of considerations to review, so make sure you go over all of these issues with a tax expert and/or your attorney.

Special Needs Trust

In 1993, Congress authorized the establishment of Self-Settled Special Needs Trusts, which allow, among other things, a disabled person to receive the proceeds of a personal injury or medical malpractice lawsuit in a trust, which will not disqualify that individual from receiving the benefits of certain government establishment programs. A Special Needs Trust, or as it is sometimes called, a Supplement

Needs Trust, when properly set up, makes it possible to appoint a trustee to hold the settlement proceeds of your child's injury settlement for the benefit of your disabled child. A Special Needs Trust can provide for the needs of your disabled child while not disqualifying him or her from such government programs as social security and Medicaid. A trustee for a special needs trust for your disabled child could be any of the following:

- A trusted family member
- A trusted family friend
- A bank or other financial institution
- A financial professional or CPA
- Other qualified individuals or institutions

There are both positive and negative considerations for establishing a Special Needs Trust so those issues should be explored if this is the type of situation which involves your child.

Settlements of Claims Involving Minors

Most, if not all, states require court approval before a case can be settled on behalf of a minor child. Generally the court that handles this procedure is the Surrogates or Probate Court depending upon the jurisdiction in which the minor child lives. Generally, once a settlement is reached in a minor's case a Guardian ad litem will have to be appointed by the Court to act as the representative of the minor child. The Guardian ad litem is generally the parent or guardian of

the minor child. A motion asking that the Probate or Surrogate's Court Judge approve the minor's disputed claim would be filed with the Court by the Guardian ad litem (usually drafted by the Attorney representing the minor child) which will set forth some or all of the following information:

- The facts and circumstances surrounding the minor child's case
- A complete history of the medical history of the minor child as it relates to his/her injuries
- A summary of the medical treatment and all costs and expenses incurred
- A report of future expected treatment and the anticipated cost
- Any and all nonmedical expenses and costs
- A list of all alleged defenses to the action
- A summary of court filings, if any
- The proposed settlement amount and payment terms
- A list of all legal fees and costs
- The reasons why the Guardian ad litem feels that this is a fair and reasonable settlement which should be approved by the Judge
- How much money the minor child will net after the payment of all costs, fees and expenses

Once the settlement is approved, the Judge will typically order that the settlement proceeds be deposited in to some types of trust account on behalf of the minor child, which will be periodically monitored by the Judge who will be provided with an accounting or intern report furnished by the Guardian ad litem. The nature and type of the investment must be reasonably prudent and the process of monitoring and expending those funds will be governed by state law.

CHAPTER 8

DOG OWNER LIABILITY

Many people contact us after they, or someone that they know, has been bitten by a dog. These individuals will want to go into great detail about how the dog owner was not paying attention to the dog, let the dog roam, perhaps will mention that the dog was not on a leash, or any one of a number of other reasons that are specific to their case that led to the dog bite injury for which they are contacting us. We let these people tell us about the facts of their dog bite attack case and then we advise them about the following:

Connecticut has a dog bite statute which is found in Connecticut general statutes section 22 – 357. That statute provides as follows:

“if any dog does any damage to either the body or property of another person, the owner or keeper... Shall be held liable for such damage, except when such damage has been occasioned to the body or property of a person who, at the time such damage was sustained, was committing a trespass or other tort, or was teasing, tormenting or abusing such dog.”

In order to better understand the statute, we should turn our attention to the Connecticut jury instructions, which are standard instructions

which are read by the judge to the jury before the jury is given the case to begin their deliberations. Connecticut jury instructions section 3.9 – 33 provides for the strict liability of one who keeps a dog. That section provides as follows:

“anyone who owns or keeps a dog is held strictly liable under our law for any damage caused by the dog, irrespective of whether the owner or keeper was negligent in controlling the dog.

The statute is general statute section 22 – 357, and the relevant portions of this the statute state: “if any dog does any damage to either the body or property of another person, the owner or keeper... shall be held liable for such damage, except when such damage has been occasioned to the body or property of a person who, at the time such damage was sustained, was committing a trespass or other tort, or was teasing, tormenting or abusing such dog.”

A “keeper” of a dog means someone other than the owner who harbors or has possession of any dog.

The statute creates two exceptions to this rule of “strict liability.” The first is that the statute exempts from liability the owner or keeper whose dog does damage to a person who was committing a “trespass or other tort.” The word “tort” means a wrongful act. “Committing a trespass or other tort” means more than merely entering on the property or in the area where the dog was, but rather entering to commit an injury or a wrongful act. This means such wrongful acts committed against the person or property of the owner or keeper or (his/her) family, or similar wrongful acts, against which the dog, with its characteristic loyalty, would take defensive or other protective action, or

those, if committed against the dog, as would likely excite it to use its natural weapons of defense.

The second exception applies if you find that the plaintiff was “teasing, tormenting, or abusing” the dog. Teasing, tormenting or abusing a dog means engaging in actions that would naturally annoyed or irritated dog and provoke it to retaliation. Such actions are those of such a nature as would naturally antagonize the dog and cause it to attack and which are improper in the sense that they are without justification. Playing with the dog in a friendly manner does not fall within the definition of “teasing, tormenting, or abusing” the dog.

So the elements that the plaintiff must prove are:

- That the defendants were the owners or keeper of a dog;
- That the dog did, in the language of the statute, “any damage to... The body or property” of the plaintiff; and
- That neither of the exceptions applies.

So as has been stated, it is not necessary to prove that the owner or keeper of the dog was negligent in any way or that the dog had bitten someone before, in order to hold the owner or keeper of the dog liable for your injuries and damages resulting from their biting dog. This is true provided that the exceptions that are set forth in the dog bite statute do not apply to your given situation. In other words, the owner or the keeper of the dog will be strictly or absolutely liable for the injuries and damages under the aforesaid scenario.

CHAPTER 9

CLASSIFICATIONS AND TYPES OF DOG BITE INJURIES

There are basically four types of dog bites that are used for purposes of classifying dog bite statistics:

1. Unreported Dog Bites- Although impossible to quantify with any degree of certainty, experts generally agree that a significant number of dog bites occur each year that are never reported to authorities. The main reason for this fact can generally be attributed to a dog bite injury that is not deemed serious enough to warrant medical attention;
2. Minor Dog Bites- The vast majority of dog bites can be classified as minor, which generally means that they have no permanent effect on the victim. These injuries generally involve bruising or a break in the skin from a dog's tooth or nail that requires a minimal amount of medical attention;
3. Serious and/or Severe Dog Bites- These types of dog bite injuries usually result in a permanent injury which can range from puncture wounds to lacerations to tissue loss and avulsion wounds to

crush injuries to broken bones to ugly, permanent and disfiguring scars to amputation. Approximately less than 10% of all dog bite injuries fall into this category; and

4. Fatal Dog Bite Injuries- Unfortunately, although rare, fatal dog bite injuries do occur. The size, age and physical shape of the attack victim can sometimes dictate how a person responds to a dog attack. Children and the elderly are more prone to dying from a dog attack due to their smaller size or reduced strength. A fatal dog bite usually forms the basis for a wrongful death claim. Approximately 20 people each year die as a result of a dog attack.

Types of Dog Bite Injuries

The severity and types of dog bite injuries can vary greatly but may include any one or more of the following injuries:

- Abrasions- a wound consisting of minor damage to skin;
- Incisions- puncture wounds caused by a sharp-edged object;
- Lacerations- irregular, tear-like wounds cause by blunt force trauma;
- Strains and Sprains- overstretching of muscles and tendons;
- Soft Tissue Injuries- damage to muscles, ligaments and tendons;

- Crushing Injuries- high degree of force or pressure from two points, such as the top and bottom jaws of a dog;
- Nerve Damage- nerves are essential to everything you do; nerve damage can seriously affect your quality of life;
- Broken Bones- usually the result from blunt force or crushing, which can be difficult to repair;
- Scars- can be ugly, painful and limit range of motion;
- Infections- bacteria and debris from the dog's mouth as well as exposure of the open wound can cause infection, which complicates recovery and can do serious damage throughout your body;
- Amputations- serious tissue damage, bone damage or infection can lead to removal of limbs to secure the health of the body as a whole;
- Disfigurement- can be as a cause of scarring, amputation or nerve damage;
- Fatal Injuries- incisions and lacerations in vulnerable abilities may not be repairable, especially on the young, elderly or infirmed;
- Partial or Total Blindness- can result from an attack to the eyes and can also be due to a bacterial infection;
- Psychological Injuries- fear of dogs and animals as well as general anxiety is common; and

- Post Traumatic Stress Disorder- a severe form of psychological anxiety that can be completely debilitating and last a long time, sometimes for life.

These injuries might require the services of any one or more of the following types of medical or health care specialists:

- Emergency Room Doctor- the first line of defense against emergencies, often residents, and sometimes not the most experienced practitioners;
- Trauma Specialist- coordinator of surgery, anesthesiology and radiology in incidents where the whole of the body is compromised;
- Orthopedic Surgeon- surgery focused on muscles, tendons and bones;
- Plastic and Reconstructive Surgeon- surgery to minimize the impacts of stitches and healing wounds and in extreme cases perform reconstruction surgery;
- Neurologist- specialists on nerves and the nervous system;
- Ophthalmologist- eye care and optical nerve specialist;
- Infectious Disease Specialist- may be necessary if the dog has rabies or if the dog bite becomes infected;
- Psychologist- therapist to help relieve some of the psychological issues that may arise;

- Occupational Therapist- helps recovering patients perform physical task in the home and work environments after a serious injury;
- Physical Therapist- helps regain strength and agility in injured body parts
- Rehabilitative Care Specialist- help regain use of limbs and muscles over which control was lost; and
- Hematologist- blood and organ specialist necessary if there is heavy blood loss or a blood infection.

CHAPTER 10

REASONS FOR AND CAUSES OF DOG ATTACKS

There are a number of factors that can be related to dog attacks and incidents of dog bites. The factors can include both human behavior and animal behavior. These factors could include:

Human Behaviors

- *Challenging or Removing a Dog's Food or Water-* Removing food or water from a dog or interfering with a dog while it is eating may trigger aggressive behavior;
- *Attacking a Dog or it's Companion, or Encroaching Upon the Dog's Territory or Space or Aggressive Behavior-* Dogs instinctively protect themselves and their handlers, and can act unpredictably and aggressively;
- *Not Realizing a Dog is Injured or Sick-* Sick or injured dogs may snap or bite at people who annoy or disturb the animal;
- *Not Recognizing Perceived Threat from Fear-* If a dog feels threatened or is fearful then that dog may try and defend itself and bite the person perceived as a threat;

- *Intervening or Trying to Separate Dogs in a Fight-* People who get involved in a dogfight are at a greatly increased risk of being bitten;
- *Engaging in Threatening Behavior or Making Sudden Movements-* A person engaging in this type of perceived behavior by a dog might trigger an attack from a dog trying to protect itself; and
- *Ignoring Warning Signs Exhibited by a Dog-* Growling or showing teeth are indicators that a dog feels threatened or is about to bite or attack and should be seen as such by any who are around the dog.

Dog Behavior

- *Territoriality and Control of Possessions-* Much like human beings, dogs threatened or frightened may feel driven to attack those who are causing them to feel this way;
- *Aggressive Behavior or Predatory Instinct-* Aggressive dogs who have predatory instincts are more apt to attack or bite those around them;
- *Self Defense or Fear-* The instinct to protect itself at all costs may result in a dog biting or attacking those it feels threatened by; and
- *Redirected Aggression-* An already excited or agitated dog is more likely to bite or attack given its heightened level of aggression.

Although their information should have no bearing on the liability of the owner or keeper of the biting dog it is important to understand how these behavior and circumstances might cause a dog to attack. By knowing and understanding these warnings future dog bites and attacks might be avoided.

CHAPTER 11

BREEDS AND FATAL ATTACKS

Although there is a considerable amount of debate about whether certain breeds of dogs are more likely than others to attack people, causing serious injuries, certain breeds of dogs have been involved in more fatal attacks than others. It should be noted that fatal attacks represent a small proportion of dog bite injuries and should not be a controlling factor in driving public opinion.

One study showed that from 1979 to 1996, dog attacks resulted in more than 300 human dog bite related deaths in the United States. Most victims, unfortunately, were children. The data that follows have caused some individuals to infer that certain breeds of dogs are more likely to bite than others and therefore should be more closely regulated.

These fatalities involved unrestrained dogs off the owners property, unrestrained dogs on the owners property, restrained dogs off the owners property, restrained dogs on the owners property, and attacks involving: one dog; two dogs; three dogs; four dogs; five dogs; six dogs; ten dogs; eleven dogs; and fourteen dogs.

The most common breed involved in these fatal attacks was a Pit Bull-type, followed by the Rottweiler. The other breeds of dogs that comprise the list are:

- German Sheppard
- Husky-type
- Malamute
- Wolf-dog hybrid
- Mixed-breed
- Chow Chow
- Doberman
- Saint Bernard
- Great Dane
- Labrador Retriever
- Akita
- Sled-type
- Bulldog
- Mastiff
- Boxer
- Collie
- Bullmastiff
- Hound-type
- Retriever-type

- Chesapeake Bay Retriever
- West Highland Terrier
- Terrier-type
- Japanese Hunting Dog
- Newfoundland
- Coonhound
- Sheepdog
- Australian Shepherd
- Rhodesian Ridgeback
- Cocker Spaniel

Other factors that could affect a dog's propensity to bite are:

- Male dogs are 6.2 times more likely to bite than female dogs;
- Sexually intact dogs are 2.6 times more likely to bite than neutered dogs; and
- Chained dogs are 2.8 times more likely to bite than unchained dog

These factors might want to be considered by a person before purchasing or getting a dog or might serve as a reason to take precautionary measures by someone who owns or cares for any of the dogs listed above.

CHAPTER 12

DIFFERENT TYPES OF DOG BREEDS

The following is a list of all dog breeds by alphabetical order:

- Affenpinscher
- Afghan Hound
- Airedale Terrier
- Akita
- Alaskan Malamute
- American English Coonhound
- American Eskimo Dog
- American Foxhound
- American Staffordshire Terrier
- American Water Spaniel
- Anatolian Shepherd Dog
- Australian Cattle Dog
- Australian Shepherd
- Australian Terrier

- Basenji
- Basset Hound
- Beagle
- Bearded Collie
- Beauceron
- Bedlington Terrier
- Belgian Malinois
- Belgian Sheepdog
- Belgian Tervuren
- Bernese Mountain Dog
- Bichon Frise
- Black and Tan Coonhound
- Black Russian Terrier
- Bloodhound
- Bluetick Coonhound
- Border Collie
- Border Terrier
- Borzoi
- Boston Terrier
- Bouvier des Flandres
- Boxer
- Boykin Spaniel

- Briard
- Brittany
- Brussels Griffon
- Bull Terrier
- Bulldog
- Bullmastiff
- Cairn Terrier
- Canaan Dog
- Cane Corso
- Cardigan Welsh Corgi
- Cavalier King Charles Spaniel
- Cesky Terrier
- Chesapeake Bay Retriever
- Chihuahua
- Chinese Crested
- Chinese Shar-Pei
- Chow Chow
- Clumber Spaniel
- Cocker Spaniel
- Collie
- Curly-Coated Retriever
- Dachshund

- Dalmatian
- Dandie Dinmont Terrier
- Doberman Pinscher
- Dogue de Bordeaux
- English Cocker Spaniel
- English Foxhound
- English Setter
- English Springer Spaniel
- English Toy Spaniel
- Entlebucher Mountain Dog
- Field Spaniel
- Finnish Lapphund
- Finnish Spitz
- Flat-Coated Retriever
- French Bulldog
- German Pinscher
- German Shepherd Dog
- German Shorthaired Pointer
- German Wirehaired Pointer
- Giant Schnauzer
- Glen of Imaal Terrier
- Golden Retriever

- Gordon Setter
- Great Dane
- Great Pyrenees
- Greater Swiss Mountain Dog
- Greyhound
- Harrier
- Havanese
- Ibizan Hound
- Icelandic Sheepdog
- Irish Red and White Setter
- Irish Setter
- Irish Terrier
- Irish Water Spaniel
- Irish Wolfhound
- Italian Greyhound
- Japanese Chin
- Keeshond
- Kerry Blue Terrier
- Komondor
- Kuvasz
- Labrador Retriever
- Lakeland Terrier

- Leonberger
- Lhasa Apso
- Lowchen
- Maltese
- Manchester Terrier
- Mastiff
- Miniature Bull Terrier
- Miniature Pinscher
- Miniature Schnauzer
- Neapolitan Mastiff
- Newfoundland
- Norfolk Terrier
- Norwegian Buhund
- Norwegian Elkhound
- Norwich Terrier
- Norwegian Lundehund
- Nova Scotia Duck Tolling Retriever
- Old English Sheepdog
- Otterhound
- Papillon
- Parson Russell Terrier
- Pekingese

- Pembroke Welsh Corgi
- Petit Basset Griffon Vendeen
- Pharaoh Hound
- Plott
- Pointer
- Polish Lowland Sheepdog
- Pomeranian
- Poodle
- Portuguese Water Dog
- Pug
- Puli
- Pyrenean Shepherd
- Redbone Coonhound
- Rottweiler
- Saint Bernard
- Saluki
- Samoyed
- Schipperke
- Scottish Deerhound
- Scottish Terrier
- Sealyham Terrier
- Shetland Sheepdog

- Shiba Inu
- Shih Tzu
- Siberian Husky
- Silky Terrier
- Skye Terrier
- Smooth Fox Terrier
- Soft Coated Wheaten Terrier
- Spinone Italiano
- Staffordshire Bull Terrier
- Standard Schnauzer
- Sussex Spaniel
- Swedish Vallhund
- Tibetan Mastiff
- Tibetan Spaniel
- Tibetan Terrier
- Toy Fox Terrier
- Treeing Walker Coonhound
- Vizsla
- Weimaraner
- Welsh Springer Spaniel
- Welsh Terrier
- West Highland White Terrier

- Whippet
- Wire Fox Terrier
- Wirehaired Pointing Griffon
- Xoloitzcuintli
- Yorkshire Terrier

Miscellaneous Class Breeds

- Azawakh
- Belgian Laekenois
- Bergamasco
- Boerboel
- Chinook
- Cirneco dell'Etna
- Dogo Argentino
- Peruvian Inca Orchid
- Portuguese Podengo Pequeno
- Pumi
- Rat Terrier
- Russell Terrier
- Sloughi
- Wirehaired Vizsla

Foundation Stock Service Breeds

- American Hairless Terrier
- Appenzeller Sennenhunde
- Barbet
- Berger Picard
- Bolognese
- Bracco Italiano
- Braque du Bourbonnais
- Catahoula Leopard Dog
- Caucasian Ovcharka
- Central Asian Shepherd Dog
- Coton de Tulear
- Czechoslovakian Vlcak
- Danish-Swedish Farmdog
- Deutscher Wachtelhund
- Drentsche Patrijshond
- Estrela Mountain Dog
- Eurasier
- German Longhaired Pointer
- German Spitz
- Grand Basset Griffon Vendeen
- Hamiltonstovare

- Hovawart
- Jindo
- Kai Ken
- Karelian Bear Dog
- Kishu Ken
- Kooikerhondje
- Lagotto Romagnolo
- Lancashire Heeler
- Miniature American Shepherd
- Mudi
- Norrbottenspets
- Perro de Presa Canario
- Portuguese Podengo
- Portuguese Pointer
- Rafeiro do Alentejo
- Russian Toy
- Schapendoes
- Slovensky Cuvac
- Small Munsterlander Pointer
- Spanish Mastiff
- Spanish Water Dog
- Stabyhoun

- Swedish Lapphund
- Thai Ridgeback
- Tosa
- Treeing Tennessee Brindle

CHAPTER 13

YOUR PERSONAL INJURY CASE

It is important to adhere to the following steps after you have suffered personal injuries.

TALK TO NO ONE ABOUT YOUR ACCIDENT

Do not talk to anyone about your injury case except one of the lawyers or representatives of our office. Do not even talk to your own insurance company, or any lawyers hired by your own insurance company, without notifying us so that we may be present if we wish. Remember, you may unknowingly hurt your case by statements you make without our assistance.

KEEP YOUR DOCTORS INFORMED

You should return to each of your doctors as often as necessary and tell them all of your complaints. You should not minimize your ailments to your doctors; your descriptions of injuries and symptoms help them determine how to treat you, and doctors will keep records of your complaints. It is important that you not cancel scheduled appointments with your doctors, which might later be construed to mean that you really were not in serious pain or in need of medical

care. Be sure we are advised immediately of the names and addresses of all of your treating physicians, including specialists you may be referred to by your family physician or general practitioner. Please keep a detailed list of each and every appointment and the amount of every bill incurred.

GATHER YOUR INSURANCE POLICIES

To ensure that you obtain all coverage and benefits available, we will examine your insurance documentation, including your health insurance policies. It is important that you provide us with complete copies of all insurance policies, including the declaration pages, that were in effect on the date of the accident, as well as the policy and declaration pages of all automobile polices of any relative living with you. Additional benefits may be available to you.

ARRANGE FOR PAYMENT OF BILLS

You should submit all medical bills to your motor vehicle insurance carrier (if your policy includes medical payments coverage) and then to your health insurance carrier. You must also send copies of *all* of your bills, including prescription charges, to our office.

KEEP A RECORD OF COMPLAINTS

Please keep a daily diary recording your complaints and your progress. Your diary should include problems you have encountered, such as sleepless nights, inability to perform certain activities, visits to the doctor, and dates on which you have to hire help. This diary can be very useful: a year later, you will not be able to recall your pain

and difficulties as vividly. This information should be detailed in the Client Quarterly Report form contained in the appendix.

STAY IN REGULAR CONTACT WITH OUR OFFICE

We will write to you at regular intervals to find out how you are progressing. The easiest way for us to do so is via e-mail, so please make sure you provide us with your e-mail address. Please be sure to answer all correspondence promptly.

NOTE WAGES AND EARNINGS LOST

Please keep an accurate record of all days lost from work because of your injuries. This information should be documented on the Lost Wages and Profits form contained in the appendix.

RETAIN COPIES OF MEDICAL BILLS

Obtain and duplicate copies of all medical, hospital, and drug bills. Periodically, send these bills to us for our files. Also keep a record of any other expenses you may incur in connection with your injuries. Be sure to obtain and keep receipts. You should make and keep a list of all of your medical bills and all of the costs incurred in going to each of your doctors.

PHOTOGRAPHIC EVIDENCE OF YOUR CASE

As has been previously discussed, you should take as many pictures as possible to properly document all issues that are relevant to your case.

PRESERVE RECORDS OF MEDICATIONS

Another very effective way of demonstrating the amount of pain you suffered is to keep a very accurate record of all prescribed muscle relaxers, pain medication, or other medicines taken by you to obtain any type of relief.

CONTEST TRAFFIC OFFENSES

Never plead guilty to any traffic offense. If you are arrested in connection with the accident, call our office immediately. We will see that someone represents or advises you.

WITNESSES

Furnish to us immediately the correct names, addresses, and telephone numbers of any and all witnesses to the accident.

SAVE YOUR CAST

If your injury requires a cast, brace, traction, or other appliance, save it for evidence at trial. You should notify us that you are keeping these things. When the case is set for hearing, you should bring these items with you.

SEND PHOTOGRAPHS

Send us prints of and, if possible, e-mail us any photographs pertaining to your case taken by you or any of your family or friends. Be sure to have pictures taken of all of your injuries as close to the time of the accident as possible. If you are required to remain in or report to the hospital and are administered any treatment, such as traction or physical therapy, have pictures taken of that as well.

SUBMIT HOSPITAL AND DOCTORS' BILLS

Have your own automobile insurance carrier pay as many hospital and doctors' bills under the payment provision of your policy as possible. You should also have your medical insurance, such as Blue Cross and Blue Shield, pay as many of your bills as possible. Doctors and hospitals are more cooperative when their bills are paid. You should not expect them to wait to receive payment until your case is tried or settled. You should, therefore, pay any balance as soon as possible.

COPY AND SEND US BILLS AND RECEIPTS

It is very important to provide us with copies of *all* of your bills and receipts for any and all accident-related expenses.

SETTLEMENT OF CLAIMS

This office will attempt to settle any and all claims with the insurance companies prior to commencing suit. We will not be in a position to attempt to settle any claim until such time as your treating physician declares that you have reached "maximum medical improvement" and furnishes us with a final medical report. Naturally, we will discuss the value of your case at that point in time.

CONTACT AND QUESTIONS

We probably will not contact you—except, as already noted, to receive updates on your condition—until we have something definite to report. We will be contacting you for depositions, for answers to interrogatories, and when your case goes to trial, which may be in

excess of several years from the time your suit was filed. If you have any specific questions with regard to these instructions, or any other matters with regard to your case, please feel free to call or write us.

YOUR ADDRESS

Be sure to keep us advised of any change in your address, telephone number, or e-mail address.

CHAPTER 14

WHY IT IS IMPORTANT TO HIRE A LAWYER

You should be aware that studies have shown that experienced lawyers can negotiate settlements and obtain judgments that are many times higher than what the injured parties can negotiate for themselves. In other words, in most cases, you will do better after paying the lawyer than you would if you attempted to negotiate your own settlement with insurance company claims adjusters.

CLAIMS ADJUSTERS

Insurance company claims adjusters are professional negotiators who have extensive experience in dealing with claimants who are not represented by attorneys. These adjusters use an array of psychological techniques, including intimidating you and befriending you. Their methods are designed to get you to accept the least amount of money possible for your claim.

Claims adjusters know that if they can keep the injured party negotiating, there is a very great chance that a settlement favorable to the insurance company will be obtained. Claims adjusters also know that in almost every case, an injured party will not file a lawsuit on his or her own because he or she does not possess the required level of

skill, expertise, or experience, and that injured parties therefore often feel that their only option is to obtain some type of settlement from the insurance company.

In many instances, claims adjusters will discourage or dissuade injured parties from hiring a lawyer by telling them that lawyers' fees will cost a great deal of money, leading claimants to conclude that they shouldn't pay a lawyer to do something they can do for themselves.

Insurance companies utilize a number of different types of computer programs to analyze personal injury cases in an effort to give insurance adjusters little, if any, discretion in negotiated settlements. This strategy will ultimately result in lower settlements for injured parties.

In addition to the above considerations, there are a great number of complicated issues that arise in a personal injury or medical malpractice case. These various legal issues are fraught with potential problems and are so complex that they can even sometimes be the subject of a malpractice action against an attorney who improperly handles a case. A nonprofessional has little chance of navigating these depths successfully without an attorney's assistance.

STATUTES OF LIMITATIONS

The statute of limitations (sometimes called the statute of repose or another similar name) is the time period specified by law within which an action *must* be filed. If you do not file within the applicable statute of limitations period, your claim could be subject to dismissal, preventing you from pursuing the claim regardless of the merits of the case.

Statute of limitations dates vary from state to state. Some states provide that the action be filed within the applicable time period from the date of the injury while other states allow for a tolling, or extension, of the filing period from the date of discovery of the injury.

Under certain circumstances, if the claimant is incompetent or is a minor, some states allow for a tolling of the statute of limitations until the claimant becomes competent or reaches their majority.

NOTICE PROVISIONS

There are also certain notice provisions that have very short limitation periods, especially those that relate to local, state, or federal governmental entities. In certain circumstances, if you do not comply with the statutory notice provisions, you may lose the right to file your lawsuit even if you act within the applicable statute of limitations period.

The statute of limitations in any particular case may be somewhat difficult to calculate, because a claim may involve different causes of action against different defendants. Once you miscalculate when the statute has run or fail to properly provide statutory notice, your claim may be forever barred despite its validity or the extent of your damages.

JOINT AND SEVERAL LIABILITY

The doctrine of joint and several liability holds that a number of defendants who engaged in separate and independent acts of negligence that combined to cause a single injury are held to be jointly and severally liable. In other words, if one party was 1% at fault and

the other parties were 99% at fault, the party who was 1% at fault could be held responsible for 100% of the damages suffered by the injured party.

The law of joint and several liability varies from state to state. A number of states have somewhat complicated variations or modifications of this rule.

VICARIOUS LIABILITY

Vicarious liability deals with the ability to hold institutions or companies liable for the acts of their nonemployee-affiliated personnel. For example, in some states, a hospital may be liable for the negligence of a physician acknowledged to be an independent contractor, while in other states, hospitals may not be liable for the acts of nonemployee members of the medical staff.

EXPERT TESTIMONY

In certain states, a plaintiff in a medical malpractice suit must file a certificate of good faith, or a similar document, that states that a medical expert has reviewed the file and has determined that there is a good-faith basis for a malpractice claim.

THRESHOLD LIMITS

In some states, your injuries must exceed a minimum threshold of seriousness before you are allowed to file suit. Some states define “serious injury” as an injury that results in death, dismemberment, significant disfigurement, a fracture, permanent loss of use of a body function, or other significant permanent disability. In other states,

before you can file a suit, your medical bills must exceed a certain dollar figure or you must be out of work for a certain number of days.

DAMAGE CAPS

A growing number of states place artificial caps on the amount of money an injured party is able to obtain for his or her injuries. This cap may apply whether the claim is for an injury or a death.

COLLATERAL SOURCE RULE

In certain states, the negligent party is allowed to offer evidence of certain collateral or other payments that the injured party has received, information that could then be used to reduce the award that the responsible party has to pay.

LAST CLEAR CHANCE

This legal principle holds that if a plaintiff has the last opportunity to avoid an accident or injury and fails to do so, then that party will be held solely responsible for his or her injuries regardless of the negligence of the person who caused the injury.

PREJUDGMENT INTEREST

Certain states allow for the court or jury to provide interest on the award made to the plaintiff. The interest rates and commencement period for the accumulation of interest vary from state to state.

ASSUMPTION OF RISK

This legal doctrine provides that a plaintiff who has knowingly and voluntarily exposed himself or herself to a dangerous condition

or situation that results in an injury may not be entitled to compensation, on the grounds that the plaintiff has assumed the risk and agreed to accept the consequences.

IMMUNITIES

A number of states provide immunities in specific cases, generally to governmental entities and their employees. Certain states provide for abbreviated notice provisions, which means that you have a much shorter period of time in which to provide a required notice to a governmental agency or employee by way of a state agency or claims commissioner before a claim can be reviewed.

DOCTRINE OF SUDDEN EMERGENCY OR UNAVOIDABLE ACCIDENT

Some states hold that even though a party causes an accident and causes injuries to another, the responsible party may not be held liable for the resultant injuries if it is determined that: an actual emergency existed; which perilous situation was not created but the party causing the accident; and the responsible party when confronted with the emergency, chose a course of action which would or might have been taken by a person of reasonable prudence in the same or similar situation.

CONTRIBUTORY NEGLIGENCE

Certain states follow the principle of contributory negligence, which states that a plaintiff is prevented from recovering for damages caused by someone else's negligence if he or she contributed to or was in any way responsible for the negligence or injury.

COMPARATIVE NEGLIGENCE

Certain states follow the principle of comparative negligence, which states that a plaintiff's damages may be reduced if the plaintiff is in any way at fault for the accident or injury. In some states, if the plaintiff is found to be 50% at fault, no damages will be awarded. In other states, whatever the plaintiff's percentage of fault in the accident or injury, the award will be reduced by the same percentage.

OVERTREATMENT

Claims adjusters often allege that the injured party was over treated for the injuries that he or she sustained as a result of their client's negligence. The adjuster may also claim that excessive tests were ordered or that the injured party was overcharged for treatment.

This list of potentially problematic legal issues is only the tip of the iceberg so far as matters that must be investigated before proceeding with a claim are concerned. If any one of these issues is overlooked or not dealt with properly, very serious negative consequences could ensue, not the least of which could be the dismissal of your case without any prospect of recovering anything at any point in time.

CHAPTER 15

THINGS YOU CAN DO TO IMPROVE THE VALUE OF YOUR CASE

There are a number of common mistakes that people make that can have a very negative impact upon their serious injury case. The actions you take are vitally important and ultimately could affect the value of your case. Therefore, here are ten things you can do to help improve the value of your case.

1. Keep Detailed Records and Document Your Case

Document all evidence and matters related to your case so that the information can be reviewed and used by us. Specifically, you should at least do the following:

- Keep an accurate record of all days lost from work because of your injuries;
- Obtain and duplicate copies of all medical, hospital, and drug bills, and keep a record of all other expenses related to your case. Always keep receipts. Keep a list of the hospitals you have gone to and the doctors and other health care providers you have seen, noting the date and costs of each such visit;

- Keep a very accurate record of all prescription muscle relaxants, pain medication, or other medicines you have taken to obtain any type of relief. This can be a very effective way of demonstrating the amount of pain you suffered;
- If you have received any bruises about your body, you should take photographs of these injuries that can be used to further demonstrate the severity of the impact.

2. Write a Narrative of the Accident

Be sure to write a detailed description of exactly what happened on the day and especially at the time of the accident. This description should include very specific information as to the who, what, when, where, why, and how of the event: any question that could possibly be asked of you. Include in your description: times; places; people; the place that you were going to and why you were going there; how the accident occurred; where you were taken and what was done for you and by whom; and so on.

3. Do Not Give Any Statements

Do not discuss your case with anyone except us. Do not even talk to your own insurance company, or any lawyer hired by your own insurance company, without first speaking with us. You may unwittingly hurt your case by making statements without our assistance.

4. *Do Not Delay Contacting Our Office*

There are a number of reasons why you should contact us as soon as possible. We will be able to counsel you with regard to what you should and should not be doing. Your case might require the assistance of a private investigator, who will want to look into the matter as soon after the accident or incident as possible. Evidence might need to be preserved and statements might need to be taken. You will also want us involved at the start of your case to preserve and protect any notice or statute of limitations dates.

5. *Do Not Discuss Your Case with Others*

It is not good practice to discuss your case with others because you could inadvertently say something harmful to another party that may later be used against you. Additionally, *you may sacrifice the attorney-client privilege if you discuss your attorney-protected conversations with others.*

6. *Your Doctor*

You should return to each of your doctors as often as necessary and tell them *all* of your medical complaints in as much detail as possible. You should not minimize your ailments to your doctors, as it is one of the best ways for them to know how to treat you and because the doctors will keep a record of your complaints.

It is important that you not cancel scheduled appointments with your doctor, because this can later be construed to mean that you were not really in such severe pain or in need of medical care.

If you see any additional doctors, be sure to advise us immediately of their names and addresses. You should keep a detailed list of each and every appointment and the amount of each such bill.

7. Follow Your Doctors' and Our Instructions

It is imperative to follow through with any advice or instructions that are given to you by us or by your health care professionals. Failing to follow these instructions could severely jeopardize your case.

You should also make sure you provide our office with copies of all medical bills, prescription charges, therapy bills, all photographs and any other documentary evidence as soon as possible.

If you follow the steps contained in this chapter you can avoid making costly mistakes that could end up reducing the value of your case. It is important to follow all of the suggestions here to help us maximize the value of your case.

CHAPTER 16

VALUE DRIVERS

In order to maximize the value of your personal injury claim, it is important for you to understand how to develop your case, acquire the vocabulary and recognize which areas of your case you need to emphasize in order to maximize your claim.

One of the most important “buzz” phrases utilized by insurance adjusters is the term “value driver.” Generally speaking, a value driver is anything that will drive the value of your personal injury case upward.

There are basically two types of value drivers: those which affect the economic value of your case that can be calculated using a formula or algorithm and are quantitative; and those which affect the noneconomic value of your case which cannot be calculated using a formula or algorithm and are qualitative.

In developing your personal injury case it is important for you to be aware of these considerations so you know what you should and should not be doing. It is therefore helpful for you to know and understand the importance of certain key value drivers.

MEDICAL BILLS

The total amount of your medical bills is a key value driver because generally speaking, the higher the medical bills, the higher the value of your case. There are a variety of exceptions to this general rule, which would include an analysis of some or, all of at least the following issues:

- 1.** Are your medical bills reasonable and necessary?
- 2.** Did you have any unnecessary tests and or did the test indicate a negative result, which did not uncover any type of injury?
- 3.** Have all of your medical bills been paid for by insurance?
- 4.** Are visits to physical therapists or chiropractors being monitored by an orthopedist or other specialist?

In order for you to maximize the value driver for your medical bills, you should return to your doctor or treater whenever you have an appointment and do not miss scheduled appointments. You should also contact your doctor whenever you feel you need to be seen for any problems you are experiencing rather than suffering in silence or not receiving the necessary or needed treatment.

SPECIALISTS

If you are being seen by a specialist or by multiple specialists then this can act as a value driver. Are you seeing an orthopedic doctor in conjunction with your chiropractor or physical therapist? Do you see a neurologist for complications arising out of your injury case?

Have you been referred to or are you going back to see a specialist for a condition that came about as a result of your accident or has a preexisting condition been exacerbated as a result of your accident that requires you to return to your rheumatologist, internist or other specialized treater? If you see a specialized treater this can act as a value driver and can increase the value of your case.

POSITIVE DIAGNOSTIC TESTING

Diagnostic testing that reveals some type of objective finding such as a broken bone or disc herniation acts as a value driver. Adjusters are often presented with claims that result in subjective findings as opposed to objective findings, which generally act as a negative value driver. A subjective finding results in data being obtained from the subject or patient, for example, “my back hurts when I bend or twist and causes me restrictions in my movement” vs. an objective finding which results in the data being obtained from an object, for example, an x-ray, CT scan or MRI which shows some type of medical problem such as a fracture.

“BUZZ” WORDS AND KEY PHRASES IN YOUR MEDICAL RECORDS

Insurance company adjusters sometimes comb your medical records looking for “buzz” words and key phrases that can act as value drivers. So, if you are experiencing any of these problems and/or conditions, it is important that you use certain terms or phrases when describing them to your treating physician, which could include the following:

- Dizziness
- Ringing in your ears
- Pain radiating from one body part to another
- Being knocked unconscious
- Headaches
- Muscle spasms
- Restriction of movement
- Tightness
- Nausea
- Vomiting
- Vision disturbances
- Balance problems
- Neurosis
- Anxiety
- Depression
- Sleeplessness
- Bruising
- Contusions
- Specific pain complaints (burning, tingling, throbbing, etc.)
- Other specific complaints resulting from your accident or injury

If you are specific in your complaints to your treating physician who properly documents these items, then your medical records can act as a value driver.

USE OF MEDICAL DEVICES OR AIDS

The use of medical devices such as a TENS unit or health aids such as a walker or cane act as value drivers. Be sure you properly document the devices which you use, keep receipts, take photographs, keep the device or aid and be prepared to show why you had to use each such item usually by or through a doctor's written instruction. The fact that you have to use these medical aids will act as a value driver.

DOCUMENTED OUT OF POCKET EXPENSES

Properly documented reasonable and necessary out of pocket expenses will be a value driver. It is important to keep track of and document all out of pocket expenditures such as:

- Insurance co-payments
- Deductibles
- Household help needed to assist you
- Prescription charges
- Braces, canes walkers or other devices and all other out of pocket expenditures
- All other expenditures which result from your injury for which you expend funds

MEDICAL INSURANCE PREMIUMS

Properly documenting all insurance or medical premiums paid by you or your employer for each month that you treated for your injuries will act as a value driver and in certain jurisdictions will increase the value of your case through the collateral source deduction this will create. It is important that you obtain and retain this information.

DOCUMENTING LOST TIME FROM WORK

Properly documenting lost time, income and/or wages acts as a value driver. You should get as many different types of documentation as possible to prove your lost wages or loss of income. In addition to pay stubs or tax returns, you should get a letter from your employer that further solidifies your claim. If you used sick or vacation time you should get a letter from your employer that sets forth the fact that you had to use sick time or vacation time so the value of those days can be calculated as well. You should keep in mind that it is a lot easier to submit a viable lost income claim when it corresponds to your treating physician's orders for you not to work.

DUTIES UNDER DURESS

If you cannot take time off from work and you continue to work when you should not be doing so, or if you have to engage in certain activities despite your limited physical condition which resulted from your accident, then these are oftentimes viewed by insurance companies as duties under duress which, depending upon the circumstances, can be a value driver.

These activities usually require that you participate in them despite the level of pain you experience. These activities could include your job, going to school, household chores, yard work or certain social obligations such as a child's or grandchild's special event (wedding, graduation, etc.). It is helpful to get statements from individuals (friends or family members) who can corroborate these claims.

RESTRICTIONS ON YOUR NORMAL DAILY ACTIVITIES

If you have serious and documented problems that cause you to be restricted or unable to perform your normal daily activities then this can be a value driver. If you were in a golfing or bowling league and can no longer play, get statements from your teammates attesting to this fact. If you went to the gym on a regular basis but can no longer go, get a statement from the desk person at the gym. Other situations could include: leaving your job; dropping out of school; or moving. These are real value drivers so long as they are documented and are properly connected to your accident. Any and all documented restrictions you receive drive the value of your claim up.

It is important for you to consider the various value drivers as you proceed in the course of your care and treatment so that you can take the necessary steps to maximize the value of your personal injury case.

CHAPTER 17

DEALING WITH YOUR HEALTH CARE PROFESSIONALS IN WAYS THAT IMPROVE THE VALUE OF YOUR PERSONAL INJURY CASE

One of the things that insurance companies look at in evaluating the value of a case is your medical care and treatment and how the injury has affected you. Therefore, in order to increase the value of your case, it is important to keep in mind the following points.

Insurance companies pour through an injured party's medical records. Therefore, it is extremely important to make sure that all of your injuries, symptoms, problems, and restrictions on activities are expressed to your health care professionals so that these factors make their way into your medical records. Doctors these days are very pressured and do not have a lot of time to spend with patients. Often they seem to be very rushed. Hence it is important for you to be focused on your visit before you see your doctor.

Ideally, you will want to choose a primary care doctor who conveys a sense of genuine concern, interest, and involvement in your medical treatment—someone who instills a sense of confidence in you. Your primary care doctor will function as the “gatekeeper” who grants or blocks access to specialists. Therefore, choosing a good

primary care physician can be vital in your ultimate recovery. Even if you are satisfied that you have chosen a good primary care physician, if you feel you are being unjustly denied services you need, don't be afraid to request and, if necessary, fight for them. To find out if your doctor is board certified and that his or her certification is up to date, call the American Board of Medical Specialties at 866-ASK-ABMS and inquire about your doctor's status.

Although a physical examination and various tests follow, the first step in your proper care and treatment is your initial description of your symptoms to the doctor. It is a good idea to prepare a full and accurate statement in advance of your appointment, in writing if possible, rather than waiting until you are disrobing in the doctor's office to organize your thoughts. The added anxiety of the office environment may make it more difficult for you to clearly and accurately describe your problems.

You should also be prepared to give your doctor your complete medical history.

If you wish to minimize the amount of time you must wait to see your doctor, you should ask either for the first appointment in the morning or for the first slot after the doctor's lunch hour.

Like everyone else, doctors appreciate being thanked and complimented for the services they perform, and naturally they tend to hold patients who express such feelings in high regard. A brief, heartfelt thank you or simple handwritten note can really make a doctor's day. Ultimately it can even improve the quality of your care.

It would be helpful to tell your treating physicians about some or all of the following:

1. *TELL YOUR DOCTOR EVERY PAIN YOU ARE EXPERIENCING AS A RESULT OF YOUR ACCIDENT*

- Do you experience a sharp pain, a burning pain, a dull pain, an aching pain?
- Is this specifically defined pain limited to one body part? Does it occur in other body parts, or does it radiate or travel to other body parts?
- How frequently do you experience these pains? How long do you experience these pains? Are they more frequent during certain times of the day, or do they tend to occur after certain activities, and, if so, which ones?

2. *TELL YOUR DOCTOR HOW THESE PROBLEMS AFFECT YOU*

- Do you spend time in bed because of the pain? If so, when, and how often?
- Do you have to rest more frequently? If so, when, and how often?
- Do you miss time from work? If so, how much, and when?
- Do you take medication for the pain? If so, what type, and how frequently?

3. *TELL YOUR DOCTOR WHAT ACTIVITIES YOU NOW DO THAT CAUSE YOU PAIN OR WHAT ACTIVITIES YOU CAN NO LONGER DO AS A RESULT OF THE PAIN*

- Do you have lighter duty at work?
- Do you hire someone to do the housework?
- Do you avoid certain sporting activities that you use to do? If so, what activities?
- Do you avoid certain hobbies that you use to do? If so, which ones?

4. *TELL YOUR DOCTOR ABOUT ALL FORMS OF HOME HEALTH ACTIVITIES AND AIDS YOU NOW REQUIRE OR USE TO RELIEVE YOUR SYMPTOMS*

- Are you doing exercises at home pursuant to the instructions of a health care professional?
- Are you using hot packs or ice?
- Did you buy or use heating pads, creams, or other items?

5. *WHENEVER POSSIBLE, DO NOT ALLOW LARGE GAPS IN TREATMENT*

- If your doctor wants to see you in two weeks, make sure you keep that appointment.
- If your doctor tells you to come back when you are in pain, be sure to follow these instructions. Make an appointment to see your doctor again rather than bear

the pain stoically. If you cannot make an appointment, at least call your doctor so your complaints can be made a part of the record.

CHAPTER 18

GETTING THE BEST FROM YOUR HEALTH CARE PROFESSIONALS

When you are a patient with a serious injury, condition, or other health care challenge, there are a number of things you can do to get the best care from your medical providers. The number one thing to remember is that you are the captain of your health care team, and ultimately it is you who makes the decisions that affect your care and treatment.

YOU ARE IN CHARGE OF YOUR HEALTH CARE TEAM!

Before every doctor's appointment, you should write down, in the order of importance, all of your concerns, questions, and medical problems. If your doctor interrupts you, make sure you return to your list of problems and concerns. Make sure you get answers to all of your questions before your doctor concludes his or her examination of you.

TAKING CHARGE

1. Want Answers? Ask Questions!

If you have questions—and yes, you should have many—ask them of your doctors, nurses, therapists, and other health care

providers. Don't be timid or shy. You are the one who is most concerned about your health care, so be sure to ask questions—and lots of them.

WHEN IT COMES TO YOUR HEALTH, THERE IS NO SUCH THING AS A DUMB QUESTION.

In fact, it's a good idea to start a health care notebook to keep a record of your visits, symptoms, side effects, pain, complaints, all the medicines you take, and your questions and the answers you are given. Plan to ask questions about your current condition and what to expect about your future care. Don't be afraid to ask, "Why?"

Bring your notebook to all of your appointments so that you won't forget anything. Write down all of the answers the doctor or other people give you. Don't feel rushed. This is the time to get the answers you need. If you do not have time to write all of the information down during the appointment, make sure you make notes immediately afterward—preferably in the waiting room of the health care professional's office, while the information is still fresh and clear in your mind. There is a lot to keep track of, so keep a thorough written record of everything.

If you do not understand something, say so. Doctors are often in a hurry, but it is part of their job to listen to you and give you all the information that you need. Your doctor wants you to understand everything so that you can do your part and actively participate in getting well.

***IF YOU STILL DON'T UNDERSTAND SOMETHING, KEEP ASKING
QUESTIONS.***

2. Do Not Be Intimidated by Your Doctor

Make a list of what you need to talk about, and stick to it. You should maintain eye contact with your doctor when discussing matters with him or her. This will establish the fact that you are very serious about the process of participating in your care and treatment. Do not let the doctor avoid answering your questions or make insensitive comments that go unchallenged.

3. Tell Your Doctor Everything

Be honest and detailed. Do not tell the doctor what you think he or she wants to hear, or to say you are doing better than you really are. This is the time to be completely honest about everything you are feeling, experiencing, and thinking. Talk about your current condition: what is changing; what is better; what is worse; and how you are progressing. Tell the doctor about other conditions you experience, what times of the day symptoms occur, what activities cause you more discomfort, and about all the medicines you are taking. If you think a medicine he or she prescribed may be causing a problem, mention it. If you feel things are not progressing quickly enough, say so!

Be completely honest about your health habits. If you miss taking your medicine, say so. Tell your doctor exactly how much and how often you smoke, drink, and exercise, and about what you eat. Tell your doctor if you have been feeling depressed or anxious. Your doctor can only provide you with

the best treatment—treatment developed especially for you—if he or she has a complete and accurate picture of you.

4. *Tell Your Doctor If You Are Unhappy with Your Medical Care*

People often will keep their negative comments to themselves, fearing that their complaints will create a bad doctor-patient relationship. In fact, most doctors respect open and honest communication, and communicative patients often ultimately receive better health care.

5. *Keep All Your Health Care Professionals Informed*

Tell each health care professional about the other health care providers you are seeing, what they are doing for you, and what they are telling you. Whether you are receiving acupuncture, physical therapy, or another treatment, each provider on your team needs to know the big picture in order to provide you with the best care. You are the only person who knows everything that is going on, so it is your job to keep everyone on the team informed about your complete medical situation.

6. *Network with Others Similarly Situated*

Whatever your injury, condition, or situation, there is generally a national nonprofit health organization out there to help people like you. These organizations can offer a wide range of support and helpful advice—from people who know exactly what you are going through. They can educate you about the latest news and research. The organizations have toll-free phone numbers, Web sites, newsletters, and sometimes even local support chapters that

can help you. Ask your providers about an organization for you, or do some research on the Internet.

7. Educate Yourself Completely

An informed and knowledgeable patient will get better treatment. The more you know about your situation, the different tests and treatments that are used for your condition, and the typical symptoms and how they can be expected to change over time, the more you can be an active part of your health care team. When a health care provider deals with an educated and informed patient, the quality of their care and attention is likely to improve.

8. Take Someone with You to Your Appointments

There is strength in numbers. Sometimes it is hard to keep track of all the advice you get, the instructions you are given, and what you need to do to follow up. Bring a family member or friend along with you to your medical appointments to assist you. This can make you feel more comfortable and more confident and help you to have a more informed conversation with your doctor or other health care provider. Your family member or friend can also help you take notes, follow through on your doctor's advice, and manage your care once you leave the office or the hospital.

9. Second Opinions Make a Lot of Sense

It is standard practice in the world of medicine to seek a second opinion. When you have a serious condition or injury or are told you need a test or treatment—especially surgery—it is a good

idea to get a second opinion from another doctor. Find out if your insurance plan covers a second opinion. Your doctor should understand this and should not be offended when you say you plan to seek another opinion. Here are some ways of politely arranging for a second opinion.

- *If you are told you need surgery* or a complex test or treatment, tell your doctor or the office staff that you must first check with your health insurance carrier to see if it is completely covered.
- *Call your health insurance carrier* to determine if the procedure itself will be approved, and if a second opinion is covered—or required. If so, ask the health plan representative for a list of other providers whose services the plan will cover for your second opinion. Be sure to write down the name of the person you spoke to, the date, and the details of the conversation in your health care notebook in case you have a problem later.
- *To find other health care providers*, ask friends and relatives if they know of doctors who have treated others with your injury or condition. You can also call a local doctor-referral service or contact your state medical society. (The

number can be found in the “white pages” of the phone book).

- ***When you call to make the appointment with the second doctor,*** tell the office staff that you are seeking a second opinion. Depending on your condition, you will be asked to bring certain medical records, which you will need to get from your current doctor’s office staff. Do not be shy about requesting these records.
- ***Once you get a second opinion,*** compare what is similar and what is different. Ask questions of the second doctor about the differences in opinions. Remember to bring your friend or family member with you to this very important meeting. Again, write down everything that is said in your healthcare notebook. When you next visit with the first doctor, ask questions about the differences in opinions, make sure you understand everything and then make an informed decision about what to do.

10. Take Charge of Your Health Care Team

Keep in mind that your health care team is there to help you and that ultimately you make the decisions regarding your care and treatment. That means you need to let everyone on the team know what is working for you and what is troubling you. Talk to each one of them openly and cordially.

If you are not comfortable with someone and feel that you cannot talk to that person about your health care needs—or you are not getting the care and attention you deserve—you are better off making a change, no matter how difficult it may seem to do so.

IT'S YOUR HEALTH . . . YOU NEED TO BE IN CHARGE

If you have an injury or medical condition that requires you to see doctors and other health care providers, you have a compelling need to manage your own health care team. You must take responsibility for following the instructions you and your providers have worked out together. Step up! Ask questions! Educate yourself! Tell your medical providers everything, and keep everyone on your team connected. You will improve your care and accelerate your medical treatment and ultimate recovery.

CHAPTER 19

WHAT INSURANCE COMPANIES DON'T WANT YOU TO KNOW

Many insurance companies currently use a computer software program called Colossus to evaluate the value of personal injury claims. How Colossus works is a mystery to the general public: neither the insurance companies nor the developer of Colossus will divulge exactly how they determine their baseline values.

Essentially, this program is a database that evaluates claims based on information entered by the insurance adjuster. Therefore, the evaluations can only be as good as the information that the adjuster enters into the program.

By utilizing Colossus, most insurance companies will try to artificially lower the value of your claim by plugging in such things as damage to your vehicle, expected length of treatment, expected cost of treatment, and a number of other “objective” variables before coming up with a value.

The Colossus program will *not* take into account such factors as the extent of your pain and suffering, the duration of your pain and suffering, how your injuries affect your ability to work and carry on your normal life’s activities, your inability to perform certain

activities, emotional stress and trauma, how this has affected your relationship with your spouse (loss of consortium) or any number of other factors that a jury would consider.

Perhaps the biggest problem with Colossus is that the insurance adjuster assigned to handle your claim usually is locked into the settlement figure that the program generates. Insurance companies will deny this and will tell anyone who will listen that the program is nothing more than an evaluation tool. The insurance industry claims that the settlement figure generated by Colossus is merely a starting point from which the adjuster can go up if additional facts and circumstances warrant it. This representation is not true: the adjuster has little, if any, room for movement.

Colossus is a well-kept secret of the insurance industry. It is the leading bodily injury claims adjusting software in the world and is being used by an increasingly large number of insurance companies. According to Computer Sciences Corporation, the company that produces Colossus, it is used by thirteen of the top twenty U.S. property and casualty insurers to minimize variance on similar bodily injury claims. A former Farmer's Insurance employee who left the company to consult for plaintiffs' lawyers estimates that insurance companies are saving 15% to 30% on injury claims payouts by using Colossus.

Therefore, in order to increase the value of your case, when dealing with an adjuster who is relying on Colossus, you should consider the following:

- The single most important thing you can do to increase the value of your case is to make sure all of your injuries,

complaints, problems, preexisting conditions, pain, depression, anxiety, lost time from work, loss of life's activities, and other relevant information are expressed to your doctors so that it makes its way into your medical records.

- Be specific about describing your injuries. As a general rule, the more specific you can be, the better. If you cannot perform certain activities, tell your doctor. If you continue to go to work but experience pain, tell your doctor.
- Gaps in treatment will reduce the value of your case. Be sure to follow up with your doctors on a regular basis. If you experience any gaps in treatment, make sure you can explain the reasons for these gaps.
- Colossus generally disfavors alternative medical treatments such as chiropractic or acupuncture. If you do see a chiropractor or seek out alternative treatment, make sure that you do so with a doctor's referral.
- Colossus typically values treatment according to time ranges such as one to three months, three months to six months, six months to nine months, and so on. This means that thirty-one days of physical therapy would make a case worth more than thirty days of physical therapy.
- Colossus has other yardsticks for assigning values to the length of treatment. For example, for the first three

months, physical therapy visits might be valued at \$100 per visit, but in the fourth month, they might be valued at \$40 per visit, and by the sixth month, the amount might go down to \$10 per visit. If you visit a medical doctor between the third and fourth month, then Colossus might bump the value back up to \$100 per visit for the next ninety days.

CHAPTER 20

BOLSTERING YOUR LOSS OF INCOME CLAIM

One of the many elements of your personal injury claim is the amount of income that you lose as a result of the negligence of another. The calculation of your loss of income can either be very easy or extremely complicated so it is a good idea to follow the following suggestions.

Assume that Insurance Companies are Not Going to Believe Your Claim for Lost Wages So Be Prepared to Prove Everything

If you are injured and you work a forty-hour week, with no overtime, then the insurance carrier will want to see some proof from your employer of the amount of money you make (paystub, W-2, tax return, etc.). You should keep a complete record of all lost wages. At the very least, you should obtain a statement from your employer outlining your salary, the number of hours you work in a week, the time that you have missed from work and any other monetary losses, which you incurred.

It is a good idea to obtain other forms of documentary evidence such as: paystubs, copies of paychecks, calendars, ledgers, time cards and anything else that will help to establish your losses. Additionally,

you will also need some documentation from your employer establishing how much time you lost from work.

It would also be helpful to have a note or notation in your medical record from your treating physician that you could not work for any specific time due to the injuries you sustained in the accident. It is important for you to report to your physician your inability to work, and why, so that it will be reflected in his or her records.

Overtime, Sick Time and Vacation Time

If your doctor indicates to you, which should be in writing, that you cannot work, you are entitled to collect monies that do not include just your lost salary. These losses can also apply to overtime, sick time and vacation time that you use. These all have a value and you are entitled to be compensated for the loss of these values that are the result of someone else's negligence.

It is important to note that you are to follow your doctor's instructions. If your doctor tells you to take three weeks off from work, then it is much easier for us to argue that the loss of income incurred during this period of time is the responsibility of the at fault party. It is imperative that you be as detailed as possible when telling your doctor the physical problems you are experiencing and that he/she understands the physical nature and extent of your job duties and responsibilities and what is required of you at work.

If you lose overtime or are forced to use sick time or vacation time from your work, you should arrange to get a letter from your employer (we will arrange for this after you speak with your employer) indicating how much overtime you lost on each day and the value of

that overtime. If you had to use sick days or vacation time, have your employer draft a letter indicating how much sick time and vacation time you used and the value of that time.

Trips to the Doctors

If you have returned to work but you have to take time off to visit healthcare professionals, you are entitled to be compensated for any money you lose, or for the value of your vacation or sick time you have to use. Your employer should clearly document the time you missed from work for these appointments. You should keep a calendar of all time missed from work, the reason you missed time, the hours you missed and why you missed this time. Make sure your employer knows that you are missing time as a result of your accident related appointments and provide written documentation to your employer to confirm this information.

Self-Employed Persons

Unlike an employer-employee situation where the calculation of lost income is much more straightforward, losing self employed income is much more difficult to calculate. As a self employed business person, you could be entitled to lost income, loss of earning capacity, lost profits, lost business opportunities and the loss of good will and/ or the diminution in value to your company. It is your responsibility to lessen or mitigate your damages, to the extent possible.

Again, it is very important to be as detailed as possible in keeping accurate records. Make sure your doctor understands your physical limitations and how it affects your job so your doctor can

place this information in your medical record to help support your lost income claim.

You will be asked to provide tax returns for approximately the last three to five years. Unfortunately for many, this income history does not adequately explain where you are currently or where you may be headed. You will also want to prepare a year to date financial statement that indicates your current situation. You will need to come up with as much evidence and proof as possible to establish the losses you are claiming.

It is a good idea to make copies of your calendar of appointments and get letters from current or prospective clients or customers to provide a better picture of lost income or loss of future business or opportunities.

Another difficulty for a self-employed business person is the fact that you are generally doing your job and marketing for future work at the same time. For more complicated cases, it might be prudent for us to hire a forensic accountant or economist to help clarify your lost income situation.

Many times, claims of loss of income by self employed business people are speculative and difficult to prove. Because you know your business better than anyone else, including your attorney, it is up to you to come up with the best possible documentation to help prove your claim.

Commissioned Salespeople

If you are a commissioned salesperson and are out of work due to injuries sustained in an accident, it may be very difficult to prove

what income you lost as a result of not being able to work. It would be difficult to prove what new orders you might have received, how many new clients or customers you would have gotten and how much additional income you would have made.

You should make a copy of your day planner to show what accounts you were working on or were scheduled to begin working on. You should get a copy of your year to date commissions and make a list of all prospects that you have, “in the pipeline”. You should get letters from your employer, your current accounts and any future accounts that you are working on. You could also get letters from your co-workers or other salespeople who can help to verify what you were doing in the way of business.

Your Accountant

Perhaps the best type of documentation and/or proof to help establish your loss of income claim would be a detailed letter from your accountant, on his/her letterhead, explaining in detail: your business; any seasonal changes you experience in your income; why your business and income were on the rise; forecasting what your income would have been and explaining in great detail the reasons behind that calculation; and any other information which is relevant to explaining any loss of income or business which you incurred or can expect to incur.

Proving Your Case

As the injured party, it is up to you and your attorney to prove your case to either the finder of fact, which can be an adjustor, arbitrator, judge or jury, by a preponderance of the evidence. In loss of income cases it is very important to come up with as much “proof” as possible to back up the claim you are making. Many times this will be done with letters from employees, co-workers, family members and friends who can explain why you are not able to work or cannot earn what you were once making. Other times, paystubs, tax returns, expert reports (economists or accountants), and letters from current or potential customers or clients will help to make your case. You should remember that insurance companies rarely rely on oral representations of facts so don’t think it will be enough for you to just say you could not work. You must come up with written materials to corroborate your representations.

Put yourself in the mind of the insurance adjuster, arbitrator, judge or a member of the jury: What proof would be necessary to help you come to a decision that would result in the greatest amount of money in awarding past loss of income, future loss of income or diminution in one’s business? While there is no hard and fast rule as to what to present, you should be as comprehensive and creative as possible. Make sure you discuss all of the components of your business with us so a comprehensive loss of income claim can be developed and presented.

CHAPTER 21

WHAT IS MY CASE WORTH?

Determining the value of any personal injury, wrongful death, or medical malpractice case is both an art and a science.

The science in determining the value of a claim is making sure that all of the necessary facts and figures are gathered and put together in a complete package that answers all of the needed questions. The art of the process lies in being able to present this information persuasively, in a manner that convinces the reader of the significance of your injuries and the great value that they carry.

Because there is no mathematical formula that can be used to put a value on a case, it is very important that you have us apply our knowledge, experience, and visceral feel for determining the value of your case.

It should be stressed that no case should be settled until such time as the injured party has reached maximum medical improvement, that is, until that person has reached a point where his or her medical condition can no longer improve and their situation is stationary and permanent.

If the claimant's medical condition is subject to change, has not stabilized, and will continue to improve, then settlement discussions

should not be started. The only exception to this situation occurs when there is not enough insurance coverage to compensate the individual for the damages suffered to date and there is no further hope of recovering any other funds. For example, if a person is involved in a motor vehicle accident caused by the fault of another who has \$20,000 of total insurance coverage available, and the at-fault party has no assets and no other means of paying any judgment, the injured party might settle with the at-fault party while still being treated, taking the \$20,000 of insurance coverage prior to reaching maximum medical improvement even if the injured party's case is worth more than \$20,000.

In general, however, once you have reached maximum medical improvement, we can begin to assess the value of your case.

The first major issue that must be evaluated is the strength of your case based on liability. In other words, a determination must be made as to who is at fault. In many instances, this question is relatively easy to answer, yet in other cases, the issue becomes much more complicated. In a typical case, an injured party must prove that their injuries were caused by the fault of another.

In a number of states, an injured party may pursue a claim even if he or she is partly responsible for the injuries sustained, due to the principle of comparative negligence. In those instances, an injured party will have the award reduced by the amount of fault assessed against him or her. For example, if the injured party is found to be 20% responsible for his or her injuries, and a jury finds the case to have a value of \$100,000, the injured party's award would be reduced by his or her comparative fault (20%), which would result in an award to the

injured party of \$80,000 (\$100,000 less the 20% at-fault percentage, \$20,000 [20% of 100,000]).

Some states follow the principle of contributory negligence, which holds if the injured party is in any way at fault, there is no recovery whatsoever. Still other jurisdictions follow a modified comparative negligence standard.

In still other cases, fault is assessed on public policy grounds, which results in a finding of strict liability. In other words, certain states hold that a person or company is automatically liable for the injured party's injuries. In such states, the owner of a dog is strictly liable for the injuries suffered by a person who is bitten by their dog and the manufacturers of certain products may be strictly liable for injuries caused by their use.

The second major issue that must be analyzed is the question of damages. Essentially, two types of damages are recoverable in a negligence action: economic damages and noneconomic damages.

Economic damages are damages intended to cover injuries for which an exact dollar amount can be calculated. Economic damages could include:

1. Medical expenses that have been incurred to date, along with future medical expenses likely to be incurred as a result of the injury;
2. Lost wages or loss of income incurred to date, as well as loss of the ability to earn the same or more income in the future, that are likely to result from the injury sustained;

3. The cost of past and future special services and/or medical devices needed to assist with activities that were previously performed without aids by the injured party;
4. The cost of any vocational or other training that might be reasonable in order to retrain or otherwise assist an injured party who has a permanent disability; and
5. All reasonable out-of-pocket expenses.

Noneconomic damages are intended to cover injuries for which an exact dollar amount cannot be calculated. Noneconomic damages could include compensation for:

1. Pain and suffering to date, as well as future pain and suffering;
2. Loss of enjoyment of life's activities normally experienced by the injured party;
3. Emotional distress; and
4. Loss of companionship by a loved one (generally this is a separate claim available to a spouse).

The determination of economic damages is generally regarded as a science. Medical expenses can be obtained from health care providers (doctors, hospitals, therapists, and so on). Future medical expenses can be addressed by the injured party's treating physician or other medical experts.

Past lost wages or loss of income can generally be calculated from tax returns or pay stubs. Future loss of income is usually

determined by an economist and/or vocational rehabilitation expert. All out-of-pocket expenses can be calculated and documented by the injured party.

The determination of a person's noneconomic damages is generally an art. There is no formula or other "objective" way to calculate the dollar value of the loss of function of a certain body part or permanent injury to a person's body, or of the loss of one's enjoyment of life.

We know through our personal experience and jury verdict research what juries have awarded in similar cases: this experience and professional access to research may help us arrive at a range of values for a particular case.

To further complicate matters, the value of an injured person's case can also be influenced by any one or more of the following factors and/or considerations:

- The age of both the injured party and the at fault party;
- The likeable qualities of both the injured party and the at-fault party, including the impression each party might have on a jury;
- The experience and skill of each party's lawyer and his or her ability to influence the jury to side with his or her particular client;
- The willingness of the injured party to go to trial;
- The willingness of the injured party's lawyer to go to trial;
- The willingness of the at fault party's lawyer to go to trial;
- The cost of defending the case;

- The cost of prosecuting the case;
- The experience, skill, and history of the trial judge;
- The speed with which the case is likely to come to trial;
- The available insurance limits and any risk that there may be a verdict in excess of the available coverage;
- The assets of the at fault party;
- The injured party's life expectancy and any unrelated conditions that might shorten the injured party's life;
- The chance of the injured party being awarded punitive damages from the at fault party;
- The injured party's need for the money;
- The assessment of the injured party's treating physicians;
- The assessment of the injured party's expert witnesses;
- The assessment of the at fault party's expert witnesses;
- The strength of the claims for future damages;
- The probability of success for future medical treatments for the injured party;
- Any claimed lien amounts on file by any health care professionals, insurance companies, or other parties;
- The nature and extent of any scarring or deformity;
- The sex of the injured party;
- The extent of any pre-existing conditions;

- Any statutory caps for damages; and
- The applicable law of the particular jurisdiction.

The above factors are just some of the considerations that make the evaluation of a case an art. The ability to know what information to look for, how to evaluate it, and how to present it makes the proper evaluation of a case a very difficult undertaking. We will be able to gather all of the needed information and properly weigh each piece, and we will then be able to persuasively present it to the insurance adjuster, judge, or jury to help maximize the amount of money an injured party can receive.

CHAPTER 22

THE ADJUSTER'S POINT OF VIEW

Insurance adjusters are presented with new personal injury files every week and look to resolve cases for the least amount of money possible. Adjusters have a great number of resources available to help investigate and develop personal injury cases. This chapter has been developed in conjunction with an insurance company adjuster to better explain how adjustors work, what they look for and how they go about evaluating claims.

This information is being presented to help you better understand the process from an insider's point of view as well as providing you with the information needed to help you help us better develop your case and get you more money.

A typical insurance adjuster would be concerned with some or all of the following:

Coverage

The first item of business that an adjuster looks into is verifying coverage. The adjustor, or it's claim representative, needs to verify coverage for each loss, usually before the investigation begins, to determine how much coverage (money) is available to pay the claim.

When handling automobile accident claims, it is extremely important for the adjuster to determine who was driving the insured vehicle. Is the owner different from the operator? Is there excess coverage available? Carriers generally do not reveal the policy limits to attorneys prior to suit, unless there is a valid reason to do so.

Insurance carriers are notified of new claims in many different ways, whether from the parties themselves (claimants/insureds), agents or directly from the claimant's attorney. The information received during the initial contact is usually the most important and the more information received the better.

Initial Investigation

The police/incident report is obtained on most, if not all claims, whether for car accidents, dog bites or even homeowners' losses, when available. All of the relevant parties are listed and are usually contacted for further information about the loss. This usually includes contact with the insured, injured party (when possible) and any witnesses to the loss. Recorded interviews are important, however not vital to the investigation. Photographs of the accident site are taken when applicable. Photographs of all vehicles are essential to determine the extent of impact and also points of impact when liability is not clear.

Liability

Determining liability in any claim is essential and is usually conducted in an expeditious manner with a thorough investigation. Connecticut's negligence law is *modified comparative or 50/50*. If it is determined that the claimant is 51% at fault or greater, a liability

denial letter is usually issued. There are some circumstances where carriers settle cases even when the investigation has determined the claimant holds 51% or more liability. An example of this scenario would be a severe injury with minimal coverage.

If there are multiple parties that may have contributed to a loss, it is important that the party that contributed be put on notice of the claim. The carrier for each responsible party would send a letter of claim placing them on notice of the claim and asking for contribution whether to the claimant's bodily injury claim or property damage claim.

Verification Of Injuries

The adjuster will want to establish early contact with the injured party's attorney in order to secure all relevant injury information. This is important in order to set initial case reserves. A reserve is the amount of money the insurance company estimates the case is worth based upon all available information. If the injuries claimed appear to be questionable or negligible based on the type of accident (i.e. low impact loss) the claim representative usually shifts the investigation into a "low impact" type investigation. A "low impact" case is where the insurance company looks to pay a nominal amount of money due to the relatively minor nature of the collision and the expected injuries.

The investigation usually involves securing photographs of all the involved vehicles. Accident reconstruction experts are sometimes considered. At this point, the claim's representative usually notifies the claimant's attorney to advise the attorney that the loss was a "low

“impact” type accident. It is important that the attorney is aware of the extent and type of the accident so he/she can decide whether or not to advise the client of how the insurance carrier is viewing the case. Claim adjusters will want to meet in person to gather additional information. Surveillance is also considered, but only on a case-by-case basis.

At the early stages of the case, claim representatives access systems that enable them to determine if the injured person has a prior loss history. If it is determined that there are prior losses with similar injuries claimed, the claimant’s medical records are requested. A medical authorization is usually needed to independently obtain all medical records for the subject loss and any prior or subsequent losses.

The adjuster is very anxious to get this information to establish and/or argue that the injuries suffered were not the fault of their insured and/or that they are only responsible for some small percentage of the loss.

Medical Bills

Prior to a claim adjuster evaluating any type of bodily injury claim, it is imperative to determine the amount, nature and extent of the claimed medical bills to determine if they are related to the loss. There are a great number of issues that the insurance adjuster will want to investigate:

- Were the bills paid by medical payment coverage or health insurance?

- Were co-pays involved?
- If health insurance paid the bills, is there a lien that has to be repaid?
- Did Workers' Compensation pay any of the bills and what liens have resulted?
- Does the Claimant appear to have over treated?
- Do the medical bills appear to be reasonable?

Loss Of Income Claims

Lost wage claims are very common with personal injury cases. Some are minimal and last only a few days to a week, however others can be for months or even years. Insurance adjusters usually require documentation from management at the claimant's employer indicating such information as: salary; time lost from work; lost sick time or vacation time; and a calculation of the amount of money lost as a result of the subject accident.

For larger claims it is essential to get prior year W2's and tax returns. When lost wage claims become complicated, insurance adjusters have resources such as their auditing department to review documentation to determine if the wage claim presented is accurate. It is very important for claimants to keep a diary of the time they lose from work and lost advancement opportunities due to their injuries.

Preexisting Injuries

There are several ways for claims adjusters to determine if an injured party has a prior medical history or even a loss that occurs after the injury in question. Most insurance carries utilize vendors

such as NICB (National Insurance Crime Bureau) and ISONet. These systems provide information on prior and subsequent claims history. These companies get this information from the insurance carriers themselves. Most, if not all, injury claims are reported to these vendors. This information is invaluable in determining not only the proper loss history but also if the claimant is telling the truth about prior claims.

Reserves

A reserve is the amount of money an insurance company is required to set aside, or “reserve” for the payment of a particular claim. All insurance carriers have differing reserving philosophies. Some carriers reserve cases based on a “worst case scenario,” others base their reserve on the “most probable outcome” of the case. Some companies utilize “step” reserving and change reserves throughout the life of the claim based on the length of time a claimant treats.

At the onset, reserves are set based on the type of claim that is presented. If the case involves a motor vehicle accident and the injuries are unknown, the reserve may be set based on the extent of the impact, age of the claimant or even the location of the case. Soft tissue injuries generate certain reserves and are essentially the same, however sometimes differ based on the claimant’s age, loss history, and other factors. When new information is provided such as medical reports that indicate the injuries are no longer soft tissue in nature, the reserves will increase. If, for example, a herniated disc is diagnosed or surgery is recommended, the reserves will increase dramatically.

Personal Liability Of The Insured

If an attorney provides a letter indicating that the tortfeasor may be personally exposed, the insurance adjuster will take the necessary steps to advise their insured(s). The first step is usually to check the policy limits and compare that to the injuries presented. Attorneys sometimes send these letters to find out the available policy limits. Generally, carriers do not reveal the policy limits unless the injuries claimed suggest potential exposure at or above the policy limits. When it appears exposure may be in excess of the available policy limits, insurance carries will put their insured on notice of potential excess exposure. This occasionally generates a response from a personal attorney who is representing the insured. Some personal attorneys may even request that the case be settled for the policy limits to protect their client from personal exposure. This request is taken seriously: however, insurance carriers generally settle the case based on its merits and not because of threats from the insured's personal attorney.

Case Evaluation

Once all of the medical records and reports are obtained, it is time to make a decision as to whether or not a case is ready for evaluation. The major issue that all claim representatives address prior to evaluating a claim is: Do the injuries claimed appear related to the loss? If there are any concerns about a particular injury being related to a loss, the claim representative will usually consider obtaining a peer review where a doctor will review the claimant's records and comment on both the reasonableness of the treatment and whether or

not the injuries appear to be related to the accident, and/or an independent medical evaluation, where a doctor selected by the insurance company will examine the claimant and then write a report setting forth his/her findings.

Once a case is ready to be evaluated there are several factors that need to be considered:

- The type and extent of the injuries;
- Treatment required for the injuries;
- Recuperative period;
- Medical bills (past and future);
- Lost wages (past and future);
- Disability period;
- Are the injuries permanent in nature (PPD rating(s), scarring);
- Is future treatment recommended/warranted;
- The nature and cost of future treatment;
- How the injuries have affected the injured party; and
- How the injuries can expect to affect the person in the future.

The age of the claimant and witness potential are also key factors and can increase and even reduce the value of a particular case. The Defendant's witness potential is also considered and can change the value of a case significantly. Was the defendant driving recklessly?

Where drugs or alcohol involved? What type of a witness will the Defendant make?

Experience is key when evaluating a bodily injury case. All cases are different: however most have similarities that carry over from case to case, which is why it is very important to have an experienced personal injury attorney represent you from the start of your case.

Plaintiff's Attorney

Experienced claim adjusters are familiar with most, if not all, of the personal injury attorneys in the state. Over time, adjusters become accustom to the way an attorney presents his/her case or even what they expect as a Settlement Demand Package from certain attorneys. Most, if not all bodily injury cases, start with a Settlement Demand Package that includes all medical bills, reports, lost wage information and other important documents that are essential to the claimant's case. A demand letter provides a brief summary of the case and usually ends with a monetary demand. Sometimes the demand is strategic or realistic, however on occasion the demand is unrealistic. Attorneys gain an essential edge in their negotiations with a well-organized demand letter and package of medical specials. A well-organized demand package tells the adjuster that the attorney is organized and has put a lot of time into the case.

Negotiations

Once it is time to attempt to resolve a case, the insurance adjustor generally prefers to make the initial offer, however there are some circumstances when a demand is warranted prior to making an offer.

Claim representatives generally argue the facts and try to shy away from arguing dollars and cents. The strengths of the case are generally pointed out when negotiating. It is helpful for a claim representative to know all of the weaknesses of the case so there are no surprises and it is easier to counter a particular attorney's arguments. Claim adjustors like to chip away at a claimant's case pointing out such issues as:

- Low impact collision;
- Over treatment;
- Not seeking medical attention until weeks after the accident;
- Sporadic treatment or gaps in treatment;
- Missing medical appointments;
- Low disability ratings;
- Preexisting injuries;
- Advanced age;
- No lost time from work;
- Contributory negligence;
- Emergency circumstances;
- Poor witness potential; and
- Other issues that might be present in a case to potentially reduce its value.

In order to increase the value of a claimant's case, it is important for the claimant's attorney to review the issues which might negatively affect the case and explain to the client what can be done to help increase the value of the claimant's case.

Once negotiations fail or just prior to the statute of limitations running, the claimant's attorney will put the case into suit, at which point, the claimant's adjustor will refer the case out to defense counsel to represent the claimant. This attorney technically represents the insured but is paid by the insurance company by virtue of the coverage afforded under the policy.

After the case is put into suit, the insurance company has the opportunity to conduct extensive discovery through written interrogatories and requests for production, deposing the claimant, the claimant's witnesses, the claimant's treating physicians and most importantly, having the claimant examined by a doctor that the insurance company hires who generally disagrees with some or all of the claimant's treating physicians' findings which further helps to reduce the value of the case.

There are a great number of other considerations which factor into the decision of when to settle a case and for how much. The greatest benefit a claimant has is by involving an experienced personal injury attorney in their case right from the start so they get continuous practical advice and do not jeopardize the value of their case.

CHAPTER 23

DEFENSE LAWYER'S SECRETS

Introduction

Many plaintiffs file personal injury actions thinking that they are all but certainly guaranteed win their cases and take home huge awards. They believe that bringing a lawsuit is like winning the lottery. What many plaintiffs overlook, however, is that defense attorneys are always looking for a “silver bullet” which can deal a death knell to their cases. Defense attorneys have numerous extremely effective tools at their disposal which can be used to establish that a plaintiff is exaggerating or that the claim has absolutely no merit at all. This chapter examines the secret weapons used by defense attorneys to attack a plaintiff’s claim.

Police Reports

Police reports can have a devastating effect on a plaintiff’s case. Since the information in these reports is recorded immediately after an event by an officer of the law whose position, by its very nature, bestows upon him a degree of credibility, it could be very difficult for a plaintiff to convince a jury of the falsity of the information in such a report. The following example, from an actual case, illustrates just

how a police report can change the complexion of what appeared to be a “slam dunk” claim.

The plaintiff claimed that he slipped and fell on a crack on the sidewalk and broke his leg. The evidence clearly showed that the crack was caused by a tree root and the plaintiff had a strong argument that the defendant landowner knew or should have known about the problem.

The injury was extremely serious and led to three surgeries. Had the case gone to trial, the plaintiff could have received a substantial verdict. However, the defendant obtained a police report establishing that, on the night the alleged accident occurred, the plaintiff was being pursued by two assailants and that, during the pursuit, one of the assailants tripped the plaintiff and broke his leg.

Once the police report was exchanged with plaintiff’s counsel, the plaintiff’s \$1 million demand plummeted instantly and the case was subsequently resolved.

This further illustrates that an enterprising defense attorney has at his disposal numerous means by which to ascertain whether a claim is fabricated.

Ambulance Records

Ambulance records are another valuable source of information to defense attorneys. When a person is reeling from the effects of a trauma, he may be more inclined to speak without thinking about the ramifications of what he says and may volunteer certain information, which will contradict the claims he makes once he files suit. Defense counsel can argue that the information divulged by a plaintiff to an

ambulance attendant carries a great deal of weight because it was uttered immediately after the accident and before the plaintiff had a chance to reflect on how to best craft his account of the incident to support his claim.

There are other ways in which ambulance records can be valuable. For instance, if a plaintiff claims that he was unconscious following the accident and the ambulance report reflects that he was alert and oriented; his credibility will of course be called into question. Similarly, if the plaintiff claims that he had pain in a certain area of his body immediately after the accident and the ambulance report is silent as to any pain in that area, the plaintiff is less likely to be believed.

Big Brother Is Watching You

Many plaintiffs who commence lawsuits do not realize how many methods exist for observing their conduct, both before and after the accident in which they were allegedly involved. As technology advances, so do the means of capturing plaintiffs on video. During the last few years, security cameras have been mounted in thousands of public locations.

The footage captured by these cameras can be extremely effective in undermining a plaintiff's claim. If a plaintiff claims that he was injured in front of a particular building at a particular time and security video contradicts the plaintiff's version of the incident, his credibility could be destroyed.

Similarly, virtually every cell phone has a camera or video camera built into it, allowing people at the site of an accident to take

photographs which could contradict a plaintiff's version of events. For example, a photograph showing a trip and fall plaintiff on the ground in an area nowhere near the crack in the sidewalk on which he said he tripped could be devastating to his case.

Another highly effective tool is surveillance. Following the commencement of a lawsuit, the defendant can hire an investigator to follow the plaintiff around in an attempt to ascertain whether he is capable of engaging in the activities he claims he cannot perform. If, for example, a plaintiff testifies at his deposition that his back hurts so much that he can no longer take out the garbage, and he is captured on videotape carrying large garbage cans from his driveway to the curb, he could lose his credibility with the jury.

Your Litigation History Is Fair Game

If a plaintiff made a prior claim about an injury to the same part of his body injured in his current lawsuit, it could severely undermine his claim.

There are numerous databases where defendants can search a plaintiff's prior litigation history. ISO searches and court data bases can lead to information about prior claims made by the plaintiff. The defendant can find out not only what the plaintiff's injuries were in the prior action, but who he sued and where. This includes workers' compensation claims as well.

Deposition testimony and pleadings in a plaintiff's prior personal injury action can be particularly effective for a defense attorney in a personal injury claim. If, for example, the plaintiff claimed permanent injuries to his cervical spine in a prior action, a jury is less likely to

believe that the cervical injuries alleged in his current lawsuit had anything to do with his more recent accident. This is especially true if the plaintiff, and not his attorney, personally verified the pleadings or bill of particulars in the prior action. This will enable the defendant's attorney to destructively cross-examine the plaintiff at trial about those prior claims.

Prior lawsuits commenced by the plaintiff can also reflect a motive for bringing his current suit. For example, a plaintiff may sue his landlord claiming that he was injured because the premises where he lived were unsafe. However, a search of the plaintiff's litigation history may reveal that he has been in litigation with the landlord for years over rent disputes, suggesting that his current lawsuit was intended as a retaliatory measure.

Finally, if the plaintiff has commenced numerous prior lawsuits, his litigation history can help portray him as a litigious individual, further undermining his credibility.

Medical Records And Radiological Studies

One thing a plaintiff may not know is that, by commencing a personal injury lawsuit, he waives the doctor patient privilege. This means that his prior medical history becomes accessible to the defense attorney so that the latter can determine whether the plaintiff's injuries preexisted the alleged accident or the accident merely exacerbated, but did not cause, the alleged injuries.

In conducting the investigation of the plaintiff's past medical history, defense counsel can order a Trace Hospital Search, which will identify each hospital visit ever made by the plaintiff. The defense

attorney can then obtain the hospital records from these prior visits in order to ascertain whether the prior ailments were in any way related to those claimed in the plaintiff's current lawsuit. The plaintiff cannot hide this important information.

The waiver of the physician-patient privilege also includes any records from psychiatrists, psychologists, or social workers who treated the plaintiff should there be an allegation of mental or emotional suffering.

Spoliation

The success or failure of a lawsuit is of course intrinsically related to the evidence which comes out at trial. If you are a plaintiff who is injured in an accident and you sue to recover for your injuries it could be very difficult, if not impossible, for you to prove your case without showing the judge or jury the item which caused your injury.

For example, if you buy a replacement blade for your lawnmower at your local home improvement store and are injured when it allegedly malfunctions, you should not dispose of the mower since it will be crucial evidence at trial. If the mower cannot be inspected by the defendants, then they will all but certainly assert that they are entitled to sanctions arising from the "spoliation," or disposal, of evidence since they have been deprived of establishing the defense that the blade was installed improperly by the plaintiff or that the mower and blade were not defective.

In many jurisdictions, the defendant does not even need to show that the spoliation was intentional; mere negligent spoliation is

sufficient to give rise to a sanction. The court typically has the discretion to determine the severity of the sanction, which can range from:

- The dismissal of the complaint
- An instruction from the court advising the jurors that they are able to draw an adverse inference against the plaintiff that the evidence would have benefited the defendant to a monetary sanction.

The court has the power to impose this sanction even though there is no guarantee that the defendants would have discovered anything beneficial to them if they had inspected the missing piece of evidence. This, of course, could be a tremendous benefit to the defendant at trial. Therefore, the plaintiff must be extremely careful not to lose or dispose of such crucial evidence.

Your Life Is An Open Book

If you commence a lawsuit, your hobbies, everyday activities, and even criminal convictions will fall under strict scrutiny, even though you may not even be aware that this investigation is taking place.

For example, if you testify that you cannot golf any more due to a back injury, the defendant can obtain the records of your country club or, if you are a member, the United States Golf Association. These records could reveal that you have continued to golf often since your alleged accident.

Or, if you claim that your back is so badly injured that you cannot even sit at your desk to surf the web, your Internet records can be

obtained. Even if the Internet records are redacted to remove any private information, they will still demonstrate that you have been able to engage in activity you said you were unable to perform.

If you are injured in an automobile accident and maintain that you were not on your cell phone when it occurred, your cell phone records can still be obtained to validate your claim.

If you claim that you are too ill to travel due to your injuries, your passport can be obtained and the defendant can demonstrate that you have continued to travel all over the world since your accident.

Finally, a plaintiff's criminal convictions can be more damaging than any other evidence to his credibility. Such convictions are a matter of public record and are readily available from various websites.

Your Medical Expert

If you retain a medical expert, be it a treating physician or not, there is no guarantee that person will be believed on the stand. That physician can be impeached at trial in many different ways.

IDEIX searches help to gather data on an expert, such as how many times has he testified for plaintiffs in the past. Of course, if an expert always testifies for plaintiffs, he will be viewed as nothing more than a biased "hired gun."

If your lawyer referred you to your doctor, this could cast suspicion on your need for the treatment and/or the validity of that doctor's opinion. The negative effect these referrals can have on your claim can be even more pronounced if your lawyer sends you to a litany of physicians in an attempt to bolster your claim.

If your expert has given prior testimony or written books or journals contradicting what he says on the stand, this could be devastating to your case.

Physical And/Or Mental Examinations

If you commence a personal injury lawsuit, you are subject to examinations by doctors designated by the defendant to evaluate your condition. These doctors will be called by the defendant as experts at trial and they are likely to claim that you are not as badly injured as you claim. They may even claim that you are not injured at all.

Similarly, if you claim that you have experienced mental suffering as a result of the incident, the defendant may designate a psychologist or psychiatrist to examine you.

If you claim that you can no longer work, the defendant may designate a vocational rehabilitation specialist to evaluate your ability to work. This type of expert is usually able to identify various jobs that even an injured individual can perform.

One or more of these defense experts can establish that you are exaggerating your symptoms and are able to resume your regular daily activities.

Comparative Fault

Just because you prevail in a personal injury action does not mean that you will walk away with all of the money you are awarded by the jury. Many states are comparative negligence jurisdictions, meaning that if you are partially to blame for your accident, then your award can be reduced by your own share of fault. Additionally, some states

have collateral source rules allowing a deduction of medical and/or wage payments made by third parties.

Additionally, a jury can find that, although an accident occurred and the plaintiff was injured, the plaintiff's own actions were the sole proximate cause of the incident. Therefore, it is extremely important to discuss exactly how the accident occurred with your attorney in order to thoroughly evaluate your chances of success before commencing the action.

Conclusion

Every plaintiff who brings a personal injury claim must discuss the strengths and weaknesses of his case with his attorney. This conversation must include the "dirty laundry" which could be exposed during the action. Although a plaintiff may not want to share sensitive private information with anyone, such a candid conversation would of course be protected by the attorney client privilege. It is far more beneficial for a plaintiff to discuss the pitfalls of his case at the outset of the litigation, when he and his attorney can do "damage control," then to withhold this information from your attorney and let him learn about this devastating information while you are being cross-examined at trial. By that time, your attorney's chances of rectifying the situation will be all but lost.

If you heed the caveats contained in this chapter, you will enhance your attorney's ability to effectively represent you which could increase the value of the case.

CHAPTER 24

THE LITIGATION PROCESS

Approximately 95% of all personal injury claims are resolved before trial. Experienced attorneys know that the best way to settle a case is to prepare it for trial. Therefore, attorneys for both parties follow a heavily scripted process in which: documents are exchanged; questions are posed; witnesses, including experts, are disclosed; depositions are conducted; and evidence is gathered to build a strong case. This process can be divided into the following categories: the filing of pleadings; discovery process; pretrial conference; and trial.

PLEADINGS

Pleadings include a variety of legal documents that state and/or allege the opinions, positions, damages, injuries, or theories of law of a party to a lawsuit that are filed with the court. The most common pleadings are:

- 1. Complaint.** A lawsuit is initiated when the plaintiff, or petitioner, serves the initial complaint on the defendant, or respondent. A complaint sets forth the basic elements of a case, including what happened and the injuries and damages incurred. It also describes the plaintiff's

allegations as to why the defendant is responsible for the plaintiff's injuries and damages;

- 2. Answer.** The defendant's attorney has a prescribed amount of time to respond to the plaintiff's complaint in the form of the answer. This is the document wherein the defendant admits, denies, or alleges insufficient information to respond to each allegation of the plaintiff's complaint;
- 3. Special Defenses.** These are filed with the answer and allege reasons why the defendant is not responsible for the plaintiff's injuries or claim that the plaintiff is partially responsible for his or her injuries. Special defenses are unique to every personal injury case. The defendant may claim the plaintiff's injuries were caused by his or her own negligence, or that the plaintiff's claim is barred by the applicable statute of limitations. These are defenses to the plaintiff's complaint or cause of action;
- 4. Counterclaims.** If the defendant feels that he or she has a claim against the plaintiff, then a counterclaim is filed along with the answer; and
- 5. Claim for Jury Trial List.** This is the point at which the plaintiff acknowledges he or she is ready for trial and advises the court of this fact.

DISCOVERY

Typically, discovery is the process by which attorneys for both sides “discover” all of the facts, witnesses, and testimony regarding the case. During the discovery process, attorneys for both parties share information about the lawsuit. This process is accomplished through written and verbal questioning as well as through the production of documents and records and physical examinations. In the majority of personal injury cases, the information gathered will help to convince the parties to reach some sort of out-of-court settlement instead of going through the long, drawn-out process of a trial. There are multiple ways in which attorneys gather evidence.

- 1. Interrogatories.** Interrogatories are written questions sent from one attorney to the other party to be answered to the best of his or her ability. These questions are answered under oath and must be sent back within a certain amount of time.
- 2. Request for Production.** This document is sent from one attorney to the opposing attorney requesting that documents, photographs, bills, records, reports, or other forms of evidence be produced and made available to opposing counsel.
- 3. Requests for Admission.** Parties are permitted to require the other side to admit to certain facts under oath. Requests for admission must be answered under oath

within a short time period, or they will be deemed to be admitted by the other side. These admissions are useful as proof of obvious facts; it is unnecessary to introduce additional evidence at trial to prove these already admitted facts.

- 4. Depositions.** Along with written discovery, oral questions may be asked of the parties involved. This takes place out of court and in the form of a deposition, in which the plaintiff, the defendant, a witness, or another person involved in the case is examined and cross-examined by the opposing attorneys, under oath. Depositions allow attorneys to find out what witnesses are going to say in court; witnesses' answers can be used to refute, impeach, or discredit them. Attorneys often will call for disclosure of the opposing counsel's expert witnesses so they can be deposed before the beginning of a trial.
- 5. Independent Medical Examination (IME).** Usually, an important part of a plaintiff's personal injury case will be the testimony of the medical professionals who treated him or her. It is this evidence that tells the jury what injuries the plaintiff suffered, how they were incurred, and—in the expert opinion of the medical professional—if those injuries were causally related to the accident in which the parties were involved.

The defendant's insurance carrier often will require that the plaintiff be examined by a doctor of its choosing, which is called an independent medical examination. This is seen as a chance to refute, discredit, or downplay the injuries that the plaintiff's treating physician indicates the plaintiff suffered, and, if possible, to tarnish the credibility of the plaintiff's physician.

CHAPTER 25

PRETRIAL CONFERENCES

A pretrial conference is held in private, usually in the judge's chambers, with the trial judge and opposing counsel present. Several objectives can be accomplished during one of these conferences. A status conference, for example, occurs after all pleadings have been filed and is used by the judge to manage upcoming events. For example, the judge may set dates for further pretrial conferences or set a tentative trial schedule.

A judge may also use the pretrial conference process to encourage settlement of the matter by acting as a mediator, attempting to move both parties closer to an acceptable settlement figure. Generally speaking, a pretrial judge will not serve as the trial judge because of his or her knowledge of and involvement in the settlement process.

Pretrial conferences are also a forum in which the opposing counsel and judge can discuss the case and agree on undisputed facts, or stipulations, or can argue disputed issues. Stipulations benefit attorneys because these facts no longer have to be determined in the trial, and they might move the case and the attorneys closer to a settlement.

The Client should be aware that many times cases do not settle during a pretrial conference. However, this conference may provide

the parties with an opportunity to reconsider opposing parties viewpoints, which may later result in a settlement of the case.

Although a Client generally does not participate in the pretrial conference it is important that the Client be fully prepared and ready to discuss any aspect of their case should the opportunity arise.

CHAPTER 26

THE TRIAL

If the parties cannot settle their case after a pretrial conference, a judge will set the case down for a trial date. The trial process attempts to ensure that both plaintiff and defendant receive a fair trial.

The first step in any *jury* trial is to pick the jury! The selection process, known as *voir dire*, occurs in the courthouse, sometimes before the judge and always with opposing counsel present. The attorneys advise the jury pool of the lawyers they practice with and their potential witnesses to see if anyone has any prior knowledge of or experience with any of the named parties. The attorneys, after determining if there are any conflicts regarding witnesses, will then ask the potential jurors questions in order to ascertain whether they can serve as unbiased interpreters of the facts.

Each attorney has a number of “preemptive challenges,” whereby a potential juror may be removed from a case without demonstration of cause. Additionally, each attorney may seek to have a juror removed for cause: these challenges are decided by the judge.

Once a jury of six is selected, the trial will begin with the opening statements of each side. The attorneys for the plaintiff and defendant

each use these statements to outline their case and their theories of law to the jury.

Following the opening statements, the plaintiff's attorney will call witnesses and introduce evidence. The defendant's counsel has the opportunity to cross-examine every witness the plaintiff calls. The plaintiff then may have a chance to conduct a re-direct questioning, followed by the defense's opportunity for a re-cross-examination.

After the plaintiff calls all of his or her witnesses, counsel for the defendant may move for a directed verdict, whereby the defendant alleges that the evidence and testimony provided by the plaintiff has not proved his/her case by the "preponderance of the evidence." If the judge agrees with the defendant, then the case is decided in the defendant's favor. Normally, though, this does not occur, and the defendant then has the opportunity to present evidence. This process is very similar to the presentation of the plaintiff's case. After the defense "rests," or completes the presentation of its evidence, the plaintiff may call rebuttal witnesses and present rebuttal evidence that refutes or discredits witnesses or evidence presented by the defendant.

After both parties have rested, opposing counsel give their closing arguments. Closing arguments allow the attorneys to review the evidence that was presented and to refocus the jury on their version of the case. The plaintiff's attorney gives his or her summation first, followed by the defendant's attorney. The plaintiff's attorney then has the opportunity to give a rebuttal closing argument.

Following closing arguments, the judge will provide the jury with his or her instructions or charges for deliberation. The judge tells the jurors to base their judgment solely on the evidence

provided and the laws relevant to the case. These instructions are referred to as jury charges. Attorneys may request that specific charges be given to the jurors, but the eventual decision as to what charges to express is left to the judge. Once the jury has reached a verdict, it is announced to the court. The judge may accept, reject, or modify the verdict based on his or her interpretation of the case, at which point a judgment is entered.

CHAPTER 27

MEDIATION

Mediation is the process of inviting an experienced, acceptable, impartial third party (Mediator) who has no decision-making authority but who will attempt to assist adverse parties in voluntarily negotiating an acceptable settlement of a dispute.

The client should understand that the Mediator is trained and experienced in dispute resolution and has no bias for or against any party and whose function is to analyze the issues and assist the parties in reaching an equitable solution of the case.

Mediators have different styles in how they conduct their own mediation. Most mediators normally practice “shuttle diplomacy” in that the Mediator goes back and forth discussing matters with one side at a time without the other side being present.

Some Mediators are facilitative which means they provide a forum in which information is exchanged in order to promote a voluntary agreement between the parties. Facilitative Mediators neither express opinions concerning the merits of the case nor offer estimates as to the value of the case. Other Mediators are evaluative in that they assess the merits of the claim based upon information submitted by the parties and thereafter express an opinion regarding the likely

outcome of the case and may offer an opinion as to the value of a case. In still other cases, a Mediator can be both facilitative and evaluative.

The timing of a mediation is an important consideration in determining when to submit a case to a Mediator. The best time to mediate any case is when ALL parties and their attorneys are prepared to engage in serious settlement discussions.

Generally, materials concerning each side's case (liability discussions, medical bills, medical records, lost wages, disability ratings, defenses and the like) are provided to the Mediator in advance of the day of the scheduled mediation. These "position papers" are reviewed by the Mediator so that the Mediator is aware of the positions of the parties. It is extremely helpful if the client is made a part of the process of developing these materials so that all issues are properly presented to the satisfaction of the client.

Most Mediators begin the mediation process with a group meeting involving the Mediator and all the parties (all clients and lawyers). Generally, the Mediator will introduce himself or herself and explain to the parties what to expect in the mediation process. Most Mediators require that all parties sign an agreement that the Mediator will not be called as a witness for any purpose and that all parties agree to keep an open mind and voluntarily participate in the process.

A Mediator will generally allow each side an opportunity to present their case. The Client may be called upon to comment about issues concerning their case. The Client may be hearing from the opposing counsel who may make a number of negative comments about the client and/or their case. The Client should be prepared for

these possibilities and should not allow these negative comments to detract from their willingness or ability to move towards a settlement.

Many times the mediation process moves along very slowly and a potential settlement might not seem possible. The Client needs to realize that much of the process will be spent waiting while the Mediator shuffles back and forth between rooms discussing various issues with the parties. The Client needs to understand how this process works and realize that it takes time for this process to unfold. In order to help pass the time, the Client should consider bringing something to occupy their time (for example a book). One of the most important qualities to have during mediation is patience.

In addition to being patient and keeping an open mind it is important that a client stay and be flexible. Staying flexible means not becoming so stuck on a position that the client cannot consider other arguments or view points and, where necessary, reconsider their position. Staying flexible often times results in obtaining an agreeable outcome.

It is important to review all materials regarding your case well in advance of your mediation, so that you are fully prepared to intelligently discuss your case. Be flexible, listen and be patient. If you understand and follow these instructions then you will improve the likelihood of your chances of obtaining a settlement.

CHAPTER 28

PREPARING TO TESTIFY

No matter how well prepared you are, it is impossible to predict what will happen when you give sworn testimony under oath.

The best advice you can be given is to relax, be yourself, take your time, and give all answers truthfully and to the best of your knowledge.

The following list attempts to cover some of the general rules you should follow when giving sworn testimony.

1. *TELL THE TRUTH*

Honesty is the best policy. At no time is this truer than while you are under oath. When you are unable to recall something with 100% accuracy, you should avoid a yes-or-no answer and instead reply that you are testifying from memory and that your response is accurate to the best of your ability to remember.

2. *ANSWER ONLY THE QUESTION ASKED*

The best way to do this is by giving a very brief answer (one word or one sentence). If the question is, “Do you know that time it is?,” the answer is not, “It’s 9:30 a.m.” The answer is either “yes” or “no.”

3. DO NOT VOLUNTEER INFORMATION

Answer only the question asked. Offering information only creates potential problems.

4. FULLY ANSWER QUESTIONS THAT CAN HURT THE OTHER SIDE OR HELP YOUR CASE

If you are asked to list every activity that you cannot engage in now as a result of your accident, you should be prepared to give a comprehensive, all-inclusive list.

5. USE THE NINE-WORD MAGIC ANSWER

When asked by defense counsel, “Is that all?” you should use the nine-word magic answer: *“That is all I can recall at this time.”*

6. THINK ABOUT THE QUESTION

Think about the question before answering it. Remember the question, “Do you know what time it is?”

7. OBEY THE APPROXIMATION RULE

Use the word *approximately* when giving a time, date, speed, distance, and so on.

8. DO NOT GUESS

You should never guess at an answer without explaining that you are approximating.

9. NEVER SAY NEVER OR ALWAYS

These words can be used against you and are not necessary to fully answer a question.

10. LET THE OTHER ATTORNEY FINISH ASKING A QUESTION BEFORE ANSWERING

Do not anticipate the question or interrupt opposing counsel.

11. POINT OUT WHEN YOU ARE INTERRUPTED

If you are interrupted by opposing counsel, let the attorney go ahead and finish speaking. You should then respond with “I’m sorry, but I had not completed my answer to the previous question.”

12. WHAT TO DO WHEN YOU DO NOT UNDERSTAND THE QUESTION

You can tell opposing counsel that you do not understand the question and ask for clarification or to have the questions restated or rephrased.

13. ALWAYS BE POLITE

Courteous witnesses make a positive impression on the jury.

14. CLIENT APPEARANCE AND DEMEANOR

You should dress and behave appropriately. Wear clothes you would normally wear for a celebration dinner or to church. Witnesses who are neat, calm, articulate, and polite rarely go wrong.

15. TRAPS FOR THE PLAINTIFF

Questions regarding how much money you are looking for or what is meant in particular legal documents are meant to trip you up. You should answer questions such as these by saying, “You would have to ask my lawyer that question.” If you are asked to state everything you can no longer do, you should state after you have listed those things, “That is all I can recall at this time.”

CHAPTER 29

INSTRUCTIONS TO CLIENTS UNDERGOING AN INDEPENDENT MEDICAL EXAMINATION

An independent medical examination (IME) is set up by the defendant's insurance carrier to help bolster its claim that you are either not injured or that your injuries are less severe than your doctor states.

The doctor the defendant's insurance company selects to examine you is paid by the insurance company and is looking for ways to discredit either you or your treating physician. It is therefore helpful to go over a few basic ground rules to follow when going to an IME.

1. *DO NOT BE LATE*

It is helpful to start off on the right foot and to show respect for others. Likewise, the IME doctor should not keep you waiting.

2. *BE POLITE*

A polite "Good morning" or "Good afternoon" is sufficient to start things off. Do not try to be overly friendly or get on the doctor's "good side."

3. ANSWER THE QUESTIONS ASKED

Do not ramble on unless it is to elaborate all of the complaints, problems, or pain you experience.

4. DO NOT EXAGGERATE

You can only hurt your case by constantly talking about the “excruciating” pain you are experiencing.

5. DO NOT UNDERSTATE YOUR PROBLEMS

Make sure you tell the doctor about *all* of the pain, discomfort, limitations, and problems you experience.

6. KNOW ABOUT YOUR CASE

Make sure you know about your case before you go in to see the IME doctor. Be able to say, for example, what was the date of the accident, what happened, what doctors you have seen, and so on.

7. FOLLOW INSTRUCTIONS

When the IME doctor asks you to walk, twist, or bend, do what is asked of you as best you can without a big production or explanation.

8. KNOW YOUR LIST OF COMPLAINTS

Be prepared to tell the doctor how this injury has affected you and what activities you can no longer perform.

9. AVOID BEING EMOTIONAL

To the extent you can answer questions in a non-dramatic fashion, the better.

10. BE HONEST

Do not try to “con” the IME doctor as this can only hurt your case.

CHAPTER 30

HOW INSURANCE COMPANIES TRY TO PAY YOU LESS MONEY FOR YOUR CLAIM, AND WHAT YOU CAN DO ABOUT IT

A number of insurance companies have implemented a new program aimed at reducing the amount of money you are paid as a result of your motor vehicle accident. Under this program, insurance companies are making low settlement offers on all soft-tissue injury claims involving low-speed crashes and minor vehicle damage.

The new program is referred to as DOLF (Defense of Litigated Files) or MIST (Minor Impact Soft Tissue) cases. These cases typically involve low-impact crashes with minor property damage as a result of which the injured party claims injuries to the neck or back—the classic whiplash case.

One of the major factors insurance companies look at in these cases is the amount of property damage, because they allege that the less damage there is to a motor vehicle, the less injury the claimant suffered.

Whiplash, or soft tissue injury, has been the subject of a great deal of research and study. Roughly one million whiplash injuries occur each year, many in low-impact crashes. Studies have shown that even

in an impact at only 5 miles per hour, the sudden movement results in g-forces (gravitational and acceleration forces) is high enough to turn the average human head into a 150-pound load resting on the spine.

One study showed that the less a car is damaged in a collision, the higher the acceleration of the impacted vehicle and the greater the risk of injury to the spine. This is because a motor vehicle that compresses or collapses in a collision absorbs more of the force of the impact than one that remains undamaged.

So what can you do to improve the value of your personal injury case if you are involved in a low-impact collision?

One definition insurance companies use to determine if an impact was minor is whether there was less than \$1,000 of property damage to the motor vehicle.

Therefore, because property damage estimates can vary by hundreds of dollars, you should take your damaged vehicle to the dealership for that make of motor vehicle. Generally speaking, dealerships will charge more to repair your damaged vehicle than will the local body shop. You should also insist that new parts, not reconditioned or used parts, be used to repair your vehicle.

If the estimate to your vehicle is higher, you stand a better chance of defeating the DOLF or MIST strategy used by many insurance adjusters.

CONCLUSION

If you follow the information contained in this book, you will enable us to maximize the value of your personal injury case. This ultimately puts more money in your pocket.

A more important consideration in following these instructions is getting better health care and thus improve your chances of recovering much more quickly.

Please contact us at the earliest possible moment at any time during your process if you have problems, concerns, or questions.

APPENDICES

APPENDIX A:
CONTINGENCY FEE AGREEMENT

I/We, hereinafter called the “Client”, do hereby request and authorize THE LAW OFFICES OF HASTINGS, COHAN & WALSH, LLP, hereinafter called “Attorneys”, to represent the Client as legal counsel for any and all claims related to injuries sustained by Client.

A. The Attorneys will devote their full professional abilities to the Client’s case. The Client will fully cooperate with the Attorneys. The Attorneys will not settle the Client’s case without the Client’s approval.

B. The Client agrees to pay the Attorneys for the Attorneys’ services rendered and authorizes the Attorneys to retain out of any monies that may be received from any source and in any manner as follows and which Fee Schedule is set by Connecticut law:

- 1.** One-third (1/3) of the first \$300,000.00;
- 2.** Twenty-five (25%) percent of the next \$300,000.00 (up to \$600,000.00);

3. Twenty (20%) percent of the next \$300,000.00
(up to \$900,000.00);
4. Fifteen (15%) percent of the next \$300,000.00
(up to \$1.2 million); and
5. Ten (10%) percent of any amount exceeding
\$1.2 million

The above fee schedule is based upon the **GROSS** recovery before the deduction of expenses.

IN THE EVENT OF NO RECOVERY, THE CLIENT SHALL OWE THE ATTORNEYS NO ATTORNEYS' FEES FOR THEIR SERVICES RENDERED.

- A. THE CLIENT AGREES TO PAY ALL COSTS OF INVESTIGATION, PREPARATION AND TRIAL OF THE CASE. IN THE EVENT OF NO RECOVERY WHATSOEVER, THE CLIENT WILL NOT PAY FOR OR REIMBURSE THE ATTORNEYS FOR ANY AND ALL COSTS INCURRED.**

The Client further authorizes the Attorneys to deduct their fees and any unpaid costs from any proceeds recovered by way of lump sum settlement, the award or otherwise upon receipt.

The Client authorizes and directs the Attorneys to deduct from the Client's share of any recovery the sums necessary to pay directly to any doctor, hospital, expert or other medical creditor for any unpaid balance due them for the Client's care

and treatment. Upon recovering any proceeds on behalf of the Client, the Attorneys will provide the Client with a written settlement statement explaining the disposition of the proceeds.

In the case of any recovery pursuant to periodic payments by way of settlement, the award or order of Court, all costs incurred are due and shall be paid upon receipt of any lump sum, and if not fully covered by that sum, then out of the initial periodic payments until fully paid.

- B.** This fee agreement applies to all services rendered up to and including the final determination of the amount of the award as increased or decreased by the Court. The Attorneys agree to handle matters ancillary to the above claims such as: Probate Court hearings, guardianships, foreclosures and post-trial hearings on a reasonable fee basis to be agreed by the Attorneys and the Client.
- C.** Appeals: In the event that the Client authorized the Attorneys to file, prosecute or defend any appeal, the Client agrees to pay to the Attorneys reasonable fees based upon an hourly rate agreed upon by the Client and the Attorneys prior to commencing the appeal or the defense thereof. THE APPEAL FEES ARE IN ADDITION TO ANY FEES THAT MAY BE DUE TO THE ATTORNEYS PURSUANT TO THE ABOVE AND ARE DUE AND PAYABLE TO THE ATTORNEYS REGARDLESS OF THE OUTCOME OF THE APPEAL.

D. THE CLIENT AGREES THAT THE ATTORNEYS HAVE MADE NO PROMISES OR GUARANTEES REGARDING THE OUTCOME OF THE CLIENT'S CLAIM.

The client understands the Attorneys will investigate the Client's claim, and, if after so investigating, such claim does not appear to them to have merit, then the Attorneys shall have the right to cancel this agreement.

The client agrees that after commencement of a civil action it is determined that the defendant has no insurance or is otherwise unable to pay this claim for injuries, then the client agrees that the attorneys may withdraw from any further representation of the client in this matter.

I have read the above agreement, have received a copy of it, and agree to its terms and conditions. There are no other Agreements between the undersigned and said Attorneys.

HASTINGS, COHAN & WALSH, LLP

/ _____
Date

CLIENT

/ _____
Date

APPENDIX B:
PAIN AND INJURY QUESTIONNAIRE

Dear Client:

We have enclosed an Injury and Pain Questionnaire and Lost Wages and Profits Questionnaire, if applicable, which we would ask you to complete, in detail, at your convenience and thereafter forward it on to our attention.

These documents will help assist us in better understanding your medical condition which will in turn be used in settlement negotiations with the insurance company and/or defense counsel.

To the extent you have any problems or questions, please do not hesitate to give us a call.

- 1. Describe the accident or circumstances which led up to your injury and resulting pain.***

2. When and where did you first become aware of the pain associated with each injury?

3. In what part or parts of your body did the pain first occur?

4. In what part or parts of your body does the pain now occur?

5. Has the pain ever been localized?

If so, where?

6. *Describe as best you can how the pain feels to you (include in your answer the severity of the pain, whether the pain is continuous or intermittent, how long its lasts, and whether it ever changes). If appropriate, rate the pain from 1 (no pain) to 10 (the greatest pain).*

7. *Are there any circumstances which either intensify or lessen the pain?*

If so, please describe in detail.

8. Does the pain lead to any other difficulties (i.e. inability to move your arms or legs, headaches, nausea, irritability)?

If so, explain.

9. Does the pain ever interfere with your daily activities?

If so, please explain in detail.

10. Do you ever have to stop your activities to alleviate the pain?

If so, please explain including how frequently this occurs.

11. Do you ever have to lie down and rest to alleviate the pain?

If so, please explain when and how often.

12. Do you ever have to take off from work because of the pain?

If so, please explain how often this happens.

13. Has anything helped to lessen the pain (i.e., medication, relaxation, massage, rest, counseling)? If so, please explain what helps lessen the pain.

14. If the answer to the preceding question was yes, please state how long does it take for these remedies to work?

15. How long do these remedies last before the pain returns?

16. What have you told your doctor about your pain?

17. List all persons you have consulted for treatment of your pain and injury. If any of these persons are doctors, specify their specialties (i.e., cardiologists, internists, neurologist, orthopedist, chiropractor, osteopath, psychologist, plastic surgeon).

18. Has any doctor recommended an operation to alleviate the pain?

If so, please state the doctor's name and address, and when the recommendation was made.

19. Have you had any operations for your pain?

If so, please list dates of operations.

20. Did any of the operations help?

If so, please list dates of operations.

21. List all medications (both prescription and nonprescription) which you are taking; include the name of the medication, its dosage, who prescribes it, and how often you take it.

22. Do any of these medications alleviate your pain?

If so, specify which ones work and for how long each works.

23. Have you ever had any nerve blocks for pain?

If so, give the dates.

24. Did any of these injections bring relief? If so, for how long?

25. Who prescribed the nerve blocks?

26. Have you ever used a TENS unit for the pain?

If so, who prescribed it for you?

27. Did the TENS unit provide relief?

28. Prior to this injury, did you ever experience any severe pain that affects the same body parts that are bothering you from this accident or injury?

If so, please give the circumstances and dates.

29. What is your current treatment?

30. What do you expect from your treatment?

31. Do you think your treatment plan is working?

**32. Do you think your treatment plan is helping to alleviate
your pain?**

33. Are you satisfied with your doctors and your treatment plan?

If not, what changes would you like to make?

**34. Have you ever had any psychological treatment for
your pain?**

If so, when and from whom?

35. Have you ever had any psychological treatment for any other condition or problem?

If so, when and from whom?

36. Has the pain interfered with your social life?

If so, be as specific as possible in describing any activities or hobbies in which you can no longer participate or which you can no longer enjoy.

37. Has the pain and injury affected your sexual activities?

If, so, please explain.

38. Do you feel that your anger or irritability is associated with your pain?

If so, please explain:

39. Do you feel that your pain is causing you to have emotional difficulties?

If so, explain.

40. How does your spouse react to the pain?

41. How does this pain affect your outlook on life?

**42. Have you ever experienced any of these problems, which
have been mentioned, in the past?**

If so, please explain:

43. If yes, when, what was the cause of the pain, what body part(s) was affected, who treated you, what disability rating did you receive and did each listed injury affect you right before this accident.

44. What other information about anything that affects you as a result of your injury or condition should we know about that has not been covered in the preceding inquiries.

APPENDIX C:
LOST WAGES AND PROFITS

EMPLOYMENT BACKGROUND:

1. *Describe client's occupation:*

2. *Name and address of employer.*

3. *Brief job description.*

4. *Special training or education of client.*

5. *Amount and rate of client's earnings.*

6. *Client's prospects for advancement at the time of injury:*

LOST WAGES

1. How much time did client miss from work?

2. What was the actual loss of earnings from client's regular work?

3. What were client's other monetary losses from:

Loss of overtime pay? \$ _____

Loss of raises? \$ _____

Loss of bonuses? \$ _____

Loss of holiday pay? \$ _____

Loss of subsistence pay? \$ _____

Loss of tips? \$ _____

Loss of insurance benefits? \$ _____

Other \$ _____

4. *What other income losses have you experienced and how are those losses calculated?*

5. *What future income losses do you anticipate incurring and how are those losses calculated?*

APPENDIX D:
CLIENT QUARTERLY REPORT

Dear Client:

In order for us to properly understand, monitor, and be updated on your progress, so we can intelligently answer any questions an insurance adjuster might pose, it is important for you to provide us with this information every ninety (90) days.

Therefore, please complete in as much detail as possible, a report at the end of each quarter (three month period) and return it to our office. At the time of completing your quarterly report, please fill in your name and date.

- 1. Describe all the symptoms or pains you had this quarter related to your injuries.***

2. *List the name of each doctor, chiropractor or therapist you saw during the quarter because of your injuries, the dates you were seen and the cost of each such visit.*

3. *If you were hospitalized this quarter for your injuries, please tell us where and when.*

4. *If you lost any time from work this quarter because of your injuries, fill in below:*

Number of hours/days missed:

Dates missed:

Wages lost:

How lost wages were calculated:

5. *Describe how your injuries have affected your ability to do your work (include housework, yard work, home chores). If employed outside the home, please identify any co-worker or supervisor or other person who could verify how your injuries have affected your work.*

6. *Please describe how your injuries have affected your social and recreational activities. Please identify any possible people who could verify this information.*

7. *Please list all your expenses this quarter which you believe are related to your injuries (i.e., prescriptions, over-the-counter medicine, medical visits, physical therapy, etc.).*

8. Tell us anything else you believe we should know about how your injuries affected you this quarter.

Please be sure to include any and all documentation you have received this quarter regarding your case (i.e., doctor bills, prescription charges, bills for out of pocket expenses, lost wage documentation, etc.)

Thank you for taking the time to fill out this form. Keeping track of your physical condition is an important part of our record of your case.

Client Name
(Please Print)

Date

APPENDIX E:
SAMPLE SETTLEMENT DEMAND PACKAGE

___/___/___

Mr. Robert Barnes
American Claims Services, Inc.
420 Main Street, Suite 1
Anytown, USA 06405

Re: Your Insured: Hillside Dragway
Our Client: John Jackson
D/O/I: October 12, 2004
Your File No.: 4730296

Dear Mr. Barnes:

I have obtained all of the necessary information which I required in order to provide you with our complete settlement demand package. I have therefore enclosed, for your review, the following information and documentation:

I. DESCRIPTION OF THE SUBJECT ACCIDENT

Mr. Jackson arrived at the Hillside Dragway on October 12, 2004 at approximately 8:45 a.m., to pre-register his Kawasaki 1000 motorcycle, for the race that was to occur later that day.

After paying the required fee and presenting all of the necessary documentation, including his motor vehicle license, Mr. Jackson was assigned a number and given a copy of the Hillside Dragway – Official Rules, a copy of which is included here with the Settlement Package as Exhibit IA.

Pursuant to the aforesaid Official Rules, it was expressly stated that: “Hillside Dragway conducts all events in accordance with NHRA rules and accepted safety and operating procedures.”

Page 17 of the 2004 NHRA Rulebook states, under the E.T. Motorcycle Section Credentials that: “NHRA competition license **MANDATORY** for riders of all bikes running 9.99 (*6.39) or quicker elapsed times. Valid state driver’s license mandatory.” In addition to the above, the NHRA Rulebook also provides for certain mandatory equipment and manufacturer’s specifications, a copy of the aforesaid 2004 NHRA Rulebook section is included herewith as Exhibit I B.

The NHRA Rulebook further provides that the rules and regulations constitute the **MINIMUM** acceptance standards for competition. The NHRA professes that the development of the NHRA rules is based upon many consideration which include the safety of the participants and spectators who attend the various events. These “minimum” standards were not followed by the Hillside Dragway on the day of the subject accident.

At the time Mr. Jackson was on the starting line and awaiting the green light, he had every reasonable expectation that the Hillside Dragway had properly performed its job to see to it that Mr. Jackson and all fee paying racers were properly safeguarded and protected pursuant to the rules and regulations of the National Hot Rod Association. Unfortunately for Mr. Jackson, he was wrong.

Due to the negligence of the Hillside Dragway, Thomas Bronson was allowed to enter the raceway and attempt to race Phil Peterson's 1500 cc Kawasaki supergas motorcycle despite the fact that he did not have the **MANDATORY** NHRA Competition License.

'The necessity of an NHRA Competition License is mandated by the NHRA and the need for same was confirmed by Barb Harwick, the General Manager of the Hillside Dragway.

Despite this requirement, Tim Carlson, the person employed by Hillside Dragway to tech in the racers on the day of the subject accident and insure that each racer complied with the rules and regulations of the NHRA, stated that on the day of the subject accident an NHRA license was not required.

In addition, Mr. Carlson confirmed the fact that Mr. Bronson did not have his NHRA Competition License on the day of the accident.

In short, Mr. Bronson, pursuant to the Rules and Regulations of the Hillside Dragway and the National Hot Rod Association, **SHOULD NOT HAVE BEEN ALLOWED TO RIDE THAT MOTORCYCLE ON THE DAY OF THE ACCIDENT.**

Further, our expert witnesses have confirmed the fact that the Hillside Dragway was, at the time of the subject accident, an "outlaw track". In addition to the less than ideal physical conditions that

existed at the Hillside Dragway, our experts have indicated that that particular facility was run in a less than professional, haphazard manner.

Our experts have also stated that your assureds' facility was not properly staffed with sufficient personal to adequately monitor and control the large number of riders that were pushed through that dragway like cattle. Mr. Carlson indicated that the reason the track operated as it did was to expedite the races.

Your assured was negligent in anyone or more of the following ways, in that it:

1. Did not properly supervise the races;
2. Allowed unqualified racers on to the dragway to race;
3. Did not adequately monitor and supervise the riders lined up behind the manned starting line;
4. Allowed riders into areas where they should not have been;
5. Did not have sufficient dragway personnel on the track to control the large number of racers;
6. Attempted to push racers through at a much quicker pace than was reasonable and/or prudent under the circumstances attendant;
7. Allowed racers to perform maneuvers they should not have been performing, in areas where they should not have been;

8. Employed person who were not conversant with the Rules and Regulations of the NHRA;
9. Did not properly check credentials, and necessary licenses of person attempting to race; and
10. Did not use the degree of care which should have been employed, given the nature and risks of the subject activity.

In fact, the underlying reason why this accident occurred, apart from your assureds' negligence, was purely economic. Your assured was quick and willing to take Mr. Jackson's money to allow him to race but was not so quick or not so willing to spend the few extra dollars it would have taken to provide adequate personnel to safeguard against the foreseeable consequences of its neglect.

In addition to the expert witnesses, I also have a number of lay witnesses, who witnessed the events and the subject accident and who have stated that your assureds' method of operation was something less than controlled chaos.

In total, this accident and Mr. Jackson's horrific injuries could have been avoided if your assured spent just a few dollars to hire sufficient personnel to properly manage and supervise the raceway. The actions of your assured in attempting to save itself a few dollars, given the nature and gravity of its operation and the activities performed there, is absolutely and completely inexcusable.

As is apparent from the videotape of the subject accident, a copy of which is included herewith as Exhibit I C, Mr. Bronson was traveling

at a high rate of speed and was generating a tremendous amount of force when he slammed into Mr. Jackson, causing Mr. Jackson and his motorcycle to fly up into the air. The noise made by this collision nothing short of sickening.

As a direct result of the negligence of the Hillside Dragway, Mr. Jackson was involved in a horrific motor vehicle accident wherein he was hit from behind, while he was at a complete stop, and thrown into the air.

When Mr. Jackson landed on the asphalt of the dragway, at which time he was fully conscious, his motorcycle exhaust pipe was wrapped around his leg. His right ankle was completely shattered into little pieces, causing it to dangle perpendicular to his leg. The bone in his leg tore a hole through both the muscle and skin, causing a 20 cm hole in his leg, which bone protruded out for all to see.

In addition to the above, Mr. Jackson also suffered a myriad of other injuries as a result of this accident. Mr. Jackson was left on the ground for approximately one half hour, in utterly excruciating pain, before the ambulance arrived and took him to the Beckwith Medical Center.

II. MEDICAL TREATMENT AND SPECIALS

1. Hospital, Surgical Intervention

As a result of this accident, Mr. Jackson was admitted to the Beckwith Medical Center, where he underwent surgery on October 12, 2004, for an open reduction fixation of

bimalleolar, right ankle fracture and treatment of open, right, proximal fibula comminuted fracture.

Mr. Jackson's surgery included the installation, in his body, of a 5-hole plate, a clamp and two 35 mm screws.

On October 15, 2004, Mr. Jackson was taken back to the operating room, for his second procedure, where he underwent a repeat open treatment of his right proximal fibula fracture.

On the evening of October 17, 2004, Mr. Jackson suddenly developed pleuritic-type, left chest pain and he was found to be hypoxic. As a result thereof, Mr. Jackson was prescribed coumadin.

Mr. Jackson was discharged from the Beckwith Medical Center on October 24, 2004 and advised to follow up with Dr. Daley in ten days. Mr. Jackson spent a total of thirteen days in the Beckwith Medical Center.

Mr. Jackson was then admitted to the Danvur Hospital on December 19, 2004, because his right ankle wound had split open. He was brought to the operating room on that date, for his third surgical procedure, where his rotting skin was removed and sent for culture. Mr. Jackson's wound was irrigated and it was later determined that he had developed a staph infection.

Mr. Jackson was again admitted to the Danvurs Hospital on January 29, 2005 for the right ankle wound which again split open and for an infection of the non-union ankle fracture. Mr. Jackson continued to have a widening of his ankle wound as well as the onset of purulent or pussy drainage.

On January 29, 2005, Mr. Jackson was brought to the operating room for his fourth surgical procedure. During this surgery, the rotting skin was removed as well as the granulation tissue, which was cut back to viable muscle. The muscle was cut free from the fibula exposing pussy drainage.

In addition, the plate overlying the fibula bone was removed which revealed the fracture site had not healed.

Mr. Jackson was again brought into the operating room on February 10, 2005 for his fifth surgical procedure, for a skin defect of his right lateral calf. Mr. Jackson's rotting skin surrounding the wound, as well as the granulation tissue, was removed down to the bleeding tissue.

Dr. Sheehan then took an 8.0 x 15.0 cm, 20,000 split thickness skin graft from Mr. Jackson's right thigh. The skin graft was then affixed to the recipient site.

Mr. Jackson was returned to the operating room, on February 18, 2005, for his sixth surgical procedure as a result of an inflammation of the bone caused by a pus producing organism and the need for long term IV antibiotics.

Dr. Goldberg made six separate unsuccessful attempts to pass a catheter through Mr. Jackson's veins into the superior vena cava. Dr. Goldberg was then forced to insert a CVP catheter tip in the superior vena cava due to the fact that Mr. Jackson was under anesthesia for such a long period of time. Thereafter, a saline solution was introduced into Mr. Jackson's system.

Mr. Jackson was not released from the Danvurs Hospital until March 13, 2005.

Mr. Jackson returned to the Danvurs Hospital on June 3, 2006 for his last surgery wherein the surgical hardware in his leg was removed.

Mr. Jackson was in the Danvurs Hospital, on three separate occasions, for a total of forty seven days. In addition, Mr. Jackson underwent this third, fourth fifth, sixth and seventh surgical procedures while in the Danvurs Hospital.

2. Medical Specials

I have enclosed for your review the following medical expenses incurred by Mr. Jackson, which have been attached hereto as corresponding Exhibits II A- II N;

A. Beckwith Medical Center

123 South Street
Anytown, USA 12345

10/12/04 to 10/24/04	14,651.82
11/3/04	274.35
<u>11/23/04</u>	<u>220.00</u>
TOTAL	\$15,036.17

B. Beckwith Physicians & Surgeons, P.C.

2 Federal Road
Anytown, USA 12345

10/12/04	1,835.00
10/16/04	624.00
11/03/04	60.00
<u>11/23/04</u>	<u>73.00</u>
TOTAL	\$2,592.00

C. Beckwith Anesthesiologists, P.C.

4 Main Street
Second Floor
Anytown, USA 12345

10/12/04	735.00
<u>10/15/04</u>	<u>441.00</u>
TOTAL	\$1,176.00

D. Beckwith Faculty Services, Inc.

P.O. Box 123
Anytown, USA 12345

10/18/04	125.00
10/19/04	106.00
10/20/04	83.00
<hr/>	
TOTAL	\$314.00

E. Beckwith Radiological Associates

6 North Street
Anytown, USA 12345

11/23/04	20.00
12/06/04	477.00
<hr/>	
TOTAL	\$497.00

F. Primary Care Center

6 Souter Drive
Anytown, USA 12345

10/28/04	22.00
11/05/04	40.00
12/04/04	22.00
<hr/>	
TOTAL	\$84.00

G. Danvurs Hospital
P.O. Box 770
Anytown, USA 12345

11/07/04	15.83
12/04/04	17.12
12/19/04 to 12/20/04	1,062.30
12/16/04	42.14
01/29/05 to 03/13/05	41,285.24
05/06/05	94.97
05/13/05	66.28
05/16/05	89.73
05/20/05	123.34
05/27/05	89.73
05/29/05	123.34
06/06/05	99.89
06/13/05	99.89
06/15/05	99.89
06/22/05	100.68
06/27/05	100.68
06/30/05	412.30
07/04/05	100.68
07/04/05	638.04

07/11/05	66.80
07/17/05	90.44
07/20/05	90.44
07/24/05	124.32
07/27/05	100.68
07/27/05	614.53
08/03/05	100.68
08/07/05	100.68
08/10/05	66.80
08/25/05	124.32
08/28/05	124.32
08/31/05	90.44
09/05/05	66.80
09/07/05	100.68
09/13/05	66.80
06/03/06	2,118.35
<hr/> TOTAL	\$50,776.49

H. Danvurs Orthopedic Associates, P.C.

22 Warren Street

Anytown, USA 12345

11/29/04	46.00
12/03/04	292.00
12/10/04	55.00
12/12/04	50.00
12/18/04	90.00
12/20/04	35.00
12/21/04	468.00
01/08/05	60.00
01/15/05	62.00
01/30/05	1,336.00
04/05/05	122.00
05/17/05	153.00
11/23/05	159.00
05/03/06	50.00
06/01/06	146.00
06/03/06	877.00
<hr/>	
TOTAL	\$4,001.00

I. Medical Center Laboratory, Inc.
5 Blake Drive
Anytown, USA 12345

12/03/04	80.00
01/19/05	63.00
<hr/>	
TOTAL	\$143.00

J. Danvurs Office of Physician Services, P.C.
P.O. Box 500
Anytown, USA 12345

12/19/04	350.00
01/29/05	230.00
01/29/05	450.00
01/31/05	75.00
02/09/05	550.00
02/10/05	120.00
02/18/05	756.00
02/25/05	175.00
02/26/05	40.00
02/27/05	40.00
06/26/05	95.00
06/26/05	45.00

06/26/05	21.00
06/26/05	20.00
06/26/05	15.00
06/30/05	100.00
07/23/05	200.00
<u>06/03/06</u>	<u>464.00</u>
TOTAL	\$3,746.00

K. David M. Sheehan, M.D.
 2 Hospital Avenue, Suite 403
 Anytown, USA 12345

01/30/05	150.00
01/30/05 to 02/08/05	500.00
<u>02/09/05</u>	<u>1,750.00</u>
TOTAL	\$2,400.00

L. Danbury Surgical Associates, P.C.
 25 Crescent Drive
 Anytown, USA 12345

02/17/05	180.00
<u>02/18/05</u>	<u>368.00</u>
TOTAL	\$548.00

M. Danvurs Radiological Associates, P.C.

15 Spring Street
Anytown, USA 12345

02/18/05	117.00
02/19/05	40.00
<hr/>	
TOTAL	\$157.00

Mc. Miscellaneous

10/12/04 Beckwith Health at Home (Crutches)	
	22.09
10/24/04 Patrick's Pharmacy	24.79
10/28/04 New Danvurs Pharmacy	15.79
11/05/04 New Danvurs Pharmacy	29.83
11/22/04 Patrick's Pharmacy	80.49
<hr/>	
12/15/04 Home Health, Inc.	4.61
<hr/>	
TOTAL	\$177.60

Mr. Jackson's medical expenses incurred to date are \$81,648.26.

III. MEDICAL RECORDS AND REPORTS

I have enclosed for your review the following medical records and reports, which have been attached hereto as corresponding Exhibits III N – III U;

N. BECKWITH MEDICAL CENTER (MEDICAL RECORD)

Mr. Jackson was taken by ambulance and admitted to Beckwith Medical Center on October 12, 2004 for the very serious injuries he sustained as a result of the subject accident.

Upon examination, he had findings consistent with a right ankle bimalleolar fracture, which was confirmed on x-ray. He also had a fracture of the upper one-third of the fibula, which tore a patch out through the posterolateral calf muscles, creating an open wound of approximately 20 cm in length.

On October 12, 2004, Mr. Jackson was taken to the operating room where he underwent an open reduction fixation of bimalleolar, right ankle fracture and treatment of open, right, proximal fibula fracture.

Dr. John's report of the operation reveals the following: After satisfactory general anesthesia, a tourniquet was placed at the top of Mr. Jackson's right leg. The entire right lower extremity was prepped and draped. The fibula fracture was difficult to reduce due to the multiple comminuted fragments that were completely free.

Dr. John was able to fix this fracture by applying a 5-hole plate to the more proximal segment, then using that to help gain anatomic reduction of the middle distal fragment giving a satisfactory internal

fixation. The syndesmosis was completely torn from the level of the proximal to the fracture.

Dr. John then moved to the medial side. After removing all interposing soft tissue, and thoroughly irrigating the joint, reduction was performed, held with a clamp and two 35-mm partially threaded cancellous screws where placed in parallel giving good fixation of the medial malleolus.

Dr. John next moved to the more proximal wound where he encountered a lot of muscle damage due to the fibula protruding through the skin. There was great deal of foreign body in the wound, consisting mostly of gravel and dirt. After multiple irrigations of the wound site, Dr. John noted that the deeper portion of the sural nerve was seen to be quite contused.

The wound was left entirely open; the open area was covered with a large sheet of Zeroform gauze, followed by sterile dressings. In addition, the ankle was also thoroughly dressed, the entire lower leg padded and a posterior plaster splint was placed with the ankle.

On October 13, 2004, dressing changes were started to the posterior leg wound. On October 15, 2004. Mr. Jackson was taken back to the operating room where he underwent a repeat open treatment of the right proximal fibula fracture, with wound closure.

Dr. John's report of this second operation reveals the following: After satisfactory general anesthesia, a tourniquet was placed on the top of the right leg. The site of the open fracture was thoroughly irrigated with 3 liters of fluid. Minimal debridement had to be performed and additional containment debris in the wound was also removed. A sterile dressing was applied and reinforced with a plaster splint.

On the evening of October 17, 2004, Mr. Jackson suddenly developed pleuritic-type, left chest pain, and he was found to be hypoxic. A ventilation and perfusion lung scan showed high probability of pulmonary embolus and he was treated with intravenous heparin followed by "coumadinization".

Mr. Jackson's lower leg was casted, with all sutures still in place, while in the hospital. He was switched over to coumadin completely on October 24, 2004 and was discharged with instructions to see Dr. Jeffrey John in ten days for suture removal.

Mr. Jackson, while in the hospital, was constantly given medication for the excruciating pain that he experienced. In addition, he was also given medication to assist him in obtaining sleep. Mr. Jackson spent a total of thirteen days in the Beckwith Medical Center.

**O. Beckwith Radiological Associates
(Medical Record)**

The record of Beckwith Radiological Associates indicates the following:

Right Lower Leg

There is a transverse nondisplaced fracture of the proximal third of the right fibula;

Right Ankle

There is a fracture of the distal third of the right fibula with overriding of fracture fragments. The fracture is mildly comminuted. There is an associated fracture of

the medical malleolus and posterior displacement of the talus with respect to the ankle join;

Portable Chest

There is atelectases at the left base with depression of the left hemidiaphragm;

Lung Scan

The ventilation scan shows a nearly normal appearance with only a small segmental ventilation defect in the posterior segment of the left lower lobe. The ventilation scan shows numerous wedge-shaped defects in both lungs. The defects are suspicious for pulmonary embolus; and

Compression Ultrasound of Right Leg

Ultrasound examination demonstrates a filling defect in the right femoral vein.

P. Primary Care Center
(Report of 11/08/04)

This report indicates that Mr. Jackson required regular blood testing.

Q. DANVURS HOSPITAL
(MEDICAL RECORD)

Mr. Jackson was admitted to the Danvurs Hospital on December 19, 2004, for a right ankle wound dehiscence. He was brought to the

operating room on the aforesaid date where after being placed under anesthesia, necrotic debris was removed and sent for culture. The skin edges were trimmed back and the wound was irrigated with 1 liter of Bacitracin. The culture report later indicated staph aureus.

Mr. Jackson was admitted to the Danvurs Hospital, for a second time, on January 29, 2005, for a right ankle wound dehiscence and an infection of the non-union ankle fracture. Mr. Jackson continued to have widening of the lateral ankle as well as the onset of purulent drainage.

After being placed under general anesthesia, Mr. Jackson's opened lateral wound was prepped and draped. A tourniquet was then applied.

The skin was incised proximal and distal to the 3 x 5 open wound in the lateral aspect of the ankle. The overlying granulation tissue was then debrided back to viable muscle. The muscle was digitally dissected free from the fibula exposing purulent drainage.

In addition, the plate overlying the fibular bone was exposed and removed. This allowed Dr. Lashley to see the facture site which clearly had not healed.

Mr. Jackson was again brought into the operating room on February 10, 2005, for a skin defect of the right lateral calf. After being placed under general anesthesia, Mr. Jackson's right leg was flexed at the hip and supported with his knee flexed. Mr. Jackson's right calf was then prepped and draped. The remaining skin around the wound and granulation tissue was excised down to the bleeding tissue.

Dr. Sheehan then took a 20,000-split thickness skin graft from Mr. Jackson's right thigh. The skin graft was then affixed to the recipient site.

Mr. Jackson was returned, once again, to the operating room for osteomyelitis and the need for long-term IV antibiotics on February 18, 2005. Dr. Goldberg made six separate attempts to pass the catheter through the cephalic vein through the subclavian vein into the superior vena cava. The catheter and each attempt passed laterally along the chest wall. Because of that location, Dr. Goldberg abandoned this procedure, after six attempts. An additional procedure, into the left subclavian vein, was also abandoned.

Due to the fact that Dr. Goldberg experienced so many problems, and because Mr. Jackson was under anesthesia for several hours, a CVP was placed over the guide wire. The CVP catheter tip was placed in the superior vena cava just above the heart. Thereafter, beparimized saline was introduced into Mr. Jackson's system.

Mr. Jackson was then kept in the hospital, until March 13, 2005, where he received IV antibiotics and physical therapy.

The hospital record is replete with entries regarding Mr. Jackson's constant and continuous pain and the regular need for pain medication.

Mr. Jackson was in Danvurs Hospital on three separate occasion for a total of forty seven days. In addition, Mr. Jackson underwent his third, fourth, fifth, sixth and seventh surgical procedures while in the Danvurs Hospital.

R. DANVURS ORTHOPEDIC ASSOCIATES, P.C.

(Office Notes and Medial Reports)

The reports of Dr. Lashley indicate that Mr. Jackson was unable to work for one year following his accident. Mr. Jackson was rated as having a 7% impairment of his lower extremity. In addition, he might experience significant degenerative arthritis of the tibiotalar joint, possibly requiring further surgical intervention.

Dr. Lashley notes that Mr. Jackson experiences a persistent dull ache, which at times is sharp in nature, and he is unable to run and walking is painful to him.

The Danvurs Orthopedic Associates, P.C., office notes indicate the following:

Mr. Jackson was in to see Dr. Lashley on December 3, 2004, due to the fact that he had increased swelling and some drainage from the two open wounds in his lower extremity. Mr. Jackson was started on saline wet-to-dry dressings on both of his open wounds. He was given a prescription for Duricef and was told to come back to see Dr. Lashley in one week's time for re-evaluation.

Mr. Jackson was next in to see Dr. Lashley on December 10, 2004, at which time it was determined that he had a staph infection. There were very little signs of healing. He was continued on wet-to-dry dressings. He was again told to come back in to see Dr. Lashley in one week's time.

Mr. Jackson was next in to see Dr. Lashley on December 17, 2004 at which time Dr. Lashley indicated that the wound was not improving, and, in fact, looked worse than it did that prior week. Dr.

Lashley indicated that the wound would have to be opened, thoroughly irrigated, debrided and all necrotic tissue removed.

Dr. Lashley entry of December 30, 2004 indicates that Mr. Jackson is now one week following the debridement of the wound dehiscence. Mr. Jackson was to continue the saline wet-to-dry dressings and was to return in one week to see Dr. Lashley for re-evaluation.

Mr. Jackson was in to see Dr. Lashley on January 6, 2005 at which time his wound was more opened. There was also a hint of purulence distally at that point. Dr. Lashley indicated that he thought there was an infection at the fracture site. Mr. Jackson was given a prescription for Tylenol #3 to alleviate the pain and was to return in one week.

Mr. Jackson was next in to see Dr. Lashley on January 13, 2005 at which time his wound had opened even more. The wound was probed and a small collection of pus was found underneath the anterior edge over the opened area. Dr. Lashley notes that Mr. Jackson's wound was getting worse rather than better and the fracture site showed no signs of healing which lead him to believe that there was an infection non-union.

Dr. Lashley recommended having the fracture site opened, removing the hardware, and debriding the fracture site.

Mr. Jackson was next in to see Dr. Lashley on April 28, 2005, wherein Mr. Jackson exhibited loss of range of motion and was told to continue with his physical therapy and return to see Dr. Lashley in six week's time.

Mr. Jackson was next in to see Dr. Lashley on June 11, 2005 at which time he was unable to stand on the tips of his toes of his right

leg. Mr. Jackson was to continue with physical therapy and was to return in six month's time to see Dr. Lashley.

Mr. Jackson was next in to see Dr. Lashley on January 16, 2005 at which time Mr. Jackson was still unable to run on his right lower extremity. He experienced a dull ache which was almost constant when walking on his leg. Dr. Lashley indicated that he would be discharged for the next three months at which time Mr. Jackson would have to see him for the removal of the screws.

Mr. Jackson was next in to see Dr. Lashley on May 4, 2005, at which time he discussed the prospect of having the screws removed from his leg.

Mr. Jackson was next in to see Dr. Lashley on June 4, 2005 for a pre-op visit for the right ankle hardware removal of the two cancellous screws.

The last entry date is for June 15, 2005 at which time the sutures were removed and the wound was healed.

**S. WESTERN PHYSICAL THERAPY AND SPORTS MEDICINE
CENTER
(REPORT AND OFFICE NOTES)**

This information deals with Mr. Jackson's condition and his course of physical therapy.

T. ASSOCIATED NEUROLOGISTS

(MEDICAL REPORT DATED JANUARY 28, 2005)

Dr. Badame of Associated Neurologists, P.C. examined Mr. Jackson on January 28, 2005 relative to a neurological consult.

Dr. Badame notes that Mr. Jackson experiences two persistent symptoms as a result of the subject accident. The first symptom is a persistent numbness along the lateral aspect of the right leg going into the dorsum of the foot. The second symptom is persistent pain that he experiences in his right ankle.

Dr. Badame reports the Mr. Jackson's pain worsens on rainy days and after being on his feet for a significant period of time.

Upon examination, Mr. Jackson was found to have an enlarged right ankle that was tender to pressure. In addition, there was numbness to touch above the right ankle.

Dr. Badame concludes his report by stating that Mr. Jackson is going to have arthritic symptoms to his right ankle, for the rest of his life. In addition, as a result of the injury to his right peroneal nerve, he will also experience numbness to the above-described areas.

U. PLASTIC SURGERY ASSOCIATES, P.C.

(MEDICAL REPORT DATED FEBRUARY 7, 2005)

Mr. Jackson was seen by Dr. Koch on February 7, 2005. Dr. Koch recites Mr. Jackson's history as relayed to him by the patient.

Dr. Koch describes the scars of Mr. Jackson as follows:

1. There is a scar of the right elbow measuring about 2.0 cm in diameter which was pink, flat and well-bended;

2. On the left anterior chest, just below the clavicle, there is a 4.0 cm x 1.0 pink, flat scar;
3. On the right lateral thigh area there is a partial thickness scar from the skin graft donor site which measures 8.0 cm x 15.0 cm and is slightly hyperpigmented;
4. There is a scar on the anterior aspect of the right leg below the knee which measures 4.0 cm with partial thickness and some hyperpigmentation.
5. On the medial ankle area there is 4.0 cm surgical scar that is slightly hyperpigmented;
6. On the posterior aspect of the right leg there is a 3.0 cm by 10.0 cm scar just below the knee in the calf area;
7. There are numerous small circular scars on the back of the leg represented by hyperpigmented spot 1.0 cm to 2.0 cm in diameter; and
8. On the lateral aspect of the right lower leg just above the ankle there is a 6.0 cm by 13.0 cm healed skin graft.

Dr. Koch indicates that all of the aforementioned scars on Mr. Jackson's body are permanent and could not be improved with plastic surgery. Pictures taken by Dr. Koch are detailing the ugly, permanent, and disfiguring scars are attached to this report.

IV. *LOST WAGES*

A. *Background*

At the time of subject accident, Mr. Jackson was self-employed as a licensed electrician in his own growing electrical business.

Mr. Jackson had worked in the electrical field since June of 1999. He began as an apprentice for MetMaint Electric, and worked there from May 1999 until September of 2003. During his tenure there, he worked his way up to a journeyman electrician.

In addition to the above, Mr. Jackson devoted significant amounts of time to learning the electrical trade which included but is not limited to the following:

1. Four years of apprenticeship which included on the job training and classroom studies at City Trade School as a part of Local 363;
2. An additional year's training, including on the job training and classroom studies at City Trade School wherein he was awarded a diploma in Controlled Wiring; and
3. An advanced studies diploma was awarded to Mr. Jackson in Solid State Controls after he completed yet another year of on the job training and classroom studies at City Trade School.

As a result of Mr. Jackson's training, learning and experience, he went out on his own in January of 2003 to start his electrical business. Mr. Jackson's business continued to grow and at the time of the subject accident he had acquired a large number of regular accounts. A brief listing sting of those accounts are as follows:

- 1.** Food City Markets located in White Plains, the Bronx, Queens and Brooklyn;
- 2.** Met Foods, located in Queens;
- 3.** Pioneer Supermarkets, located in the Bronx;
- 4.** Bayside Milkfarm, located in Queens;
- 5.** Five Towns' Refrigeration, located in Long Island;
- 6.** Walbaums Supermarkets, located in Long Island, the Bronx and Upstate New York; and
- 7.** Johnny's AutoTops, located in the Bronx.

Mr. Jackson was servicing over ten supermarkets a week located throughout the New York City area in addition to the other business he had generated at the time of the subject accident.

Despite the fact that Mr. Jackson commenced his electrical business in less than favorable economic times, where building permits were at an all time low, he was able to generate \$33,609.00 in business

for 2003 and \$30,351.00 in business for 2003. See 2002 and 2003 Income Tax Returns included herewith as Exhibits III A and III B.

At the time of Mr. Jackson's debilitating accident, he had worked for a total of eight months in 2004 and had generated business income of \$30,350.00- which annualized over a twelve month period totals \$45, 525.00, or one and one half times his income for the prior year. See Mr. Jackson's 2004 income tax return, a copy of which is included herewith as Exhibit IIIC.

Mr. Jackson's business had grown so much that just prior to the accident; Mr. Jackson was in the process of hiring two apprentices to help him keep up with all of the work that he was generating.

As a direct result of this accident, and the injuries he sustained, Mr. Jackson's electrical business was totally and completely destroyed. This destruction was due to the fact that Mr. Jackson was unable to service his established customers, who were forced to go elsewhere, and was not able to devote the time and energy necessary to allow his business to grow.

More importantly, Mr. Jackson, due to his injuries was and is unable to climb ladders or engage in the work which is crucial and required on a day to day basis, for an electrician. A good part of Mr. Jackson's workday would be spent on a ladder either maintaining, repairing, installing or rewiring lighting fixtures or ceiling conduits. These responsibilities are in conformity with the job description of an electrician, as set forth in the U.S. Department of Labor, Dictionary of Occupational Titles, Section 824.261-010 a copy of which is attached hereto as Exhibit III D.

In addition, the 2002-2003 Occupational Outlook Handbook, developed by the U.S. Department of Labor Bureau of Labor Statistics, a copy of which is included herewith as Exhibit III E, indicates that an electrician's work is sometimes strenuous, they may stand for long periods of time and they frequently work on ladders and scaffolds and they often work in awkward or cramped positions.

Further, the Occupational Outlook Handbook states that the employment for electricians is expected to increase faster than the average for all occupations through 2005 and the overall employment outlook for electricians is expected to be very good.

Although Mr. Jackson's business was only several years old at the time he was involved in the subject accident, it was growing by leaps and bounds. This accident destroyed Mr. Jackson's business and had denied him the right to make a living in a trade that he had worked all of his adult life to learn and develop.

There is no question that if Mr. Jackson was not involved in this accident he would still have his electrical business, which by conservative estimates would have grown substantially from its income bases of \$45,000.00.

Mr. Jackson began in April of 2005 to work as an automobile mechanic at Conti Automotive in Danvers, Connecticut, where he is currently employed.

B. METHODS OF LOST INCOME EVALUATION

1. Past Lost Wages

In 2004, for the eight months that Mr. Jackson worked prior to his accident of October 12, 2004, he generated income of \$18,850.99

(See 2005 Income Tax Return: Line 28 of Schedule C plus depreciation of \$521.00 from line 13). Therefore, Mr. Jackson made a net annual income of \$28,275.00 (\$18,850.00 divided by 8 months = \$2,356.25 a month x 12 = 2005 annualized net income.)

Assuming Mr. Jackson's business was to increase by one half of its prior year's base, his 2005 income would have been \$42,412.50 and his income for the first three months of 2006 would have been \$15,904.69.

Therefore, without including the fact that Mr. Jackson was in the process of hiring two apprentices in 2004, and without factoring in his additional expected income as a result thereof, he has incurred the following past lost wages:

Oct. – Dec. 2004	9,425.00;
Jan. – Dec. 2005	42,412.50; and
Jan. – June 2006	15,904.69

Mr. Jackson's past lost wages for the period which he did not work as a result of this accident totals \$67,742.19.

2. Future Lost Wages

At the time of the subject accident, Mr. Jackson was self-employed as a master electrician. As was previously indicated, he did not work until April of 2005, at which time he was employed as an automobile mechanic.

If we were to use the averages for both professions, we would find that the average electrician in the New York area made an average weekly wage of \$455.00 and the average auto-mechanic wage was \$339.00. (See America Salaries and Wages Survey, a copy of which is included herewith as Exhibit III F.)

Therefore, the average electrician in the New York area made a yearly wage of \$23,660.00 and the average automobile mechanic made a yearly wage of \$17,628.00. (It should be noted that the figures above referenced apply to the time period of January through December of 2004. Although the figures are several years old, the comparisons still apply.)

The aforesaid figures indicate that the average electrician in the New York area would make \$6,032.00 a year more than the average automobile mechanic. Due to the fact that Mr. Jackson could expect to work until he reached 65 years of age, he would be employed for the next 35 years, and lose \$6,032.00 per year.

Therefore, Mr. Jackson's future lost wages total \$211,120.00 which is confirmed in Eric Campbell's, our economic expert, report, which is attached hereto as exhibit III G.

3. Destruction of Business

Assuming that Mr. Jackson wanted to sell his electrical business and engage in his profession in some other locality, or if he wanted to wait until he was nearing retirement age, he would have waited until such time as it was generating a sufficient amount of income to make it attractive to place his business on the market for sale.

For purposes of illustration, we will assume very conservative numbers which will make the example and figures appear on the low side. If we were to assume that Mr. Jackson would have waited until his business generated \$100,000.00 of net income we would have been talking about a time frame of approximately 2009.

In order to determine the approximate sale price of an electrical business, one would take two and one half times the owner's cash flow income to arrive at the sale price. (See report of Ryan & Floria, CPAs attached hereto as Exhibit III H.)

In this particular example, Mr. Jackson would have realized the sum of \$250,000.00 for the sale of his business.

Therefore, using this conservative figure, Mr. Jackson has lost the sum of \$250,000.00 for the destruction of his business.

V. PHOTOGRAPHS

I have enclosed for your review the following photographs, which have been attached hereto as corresponding Exhibits VI – V 25:

- 1.** Photograph of Mr. Jackson, on his motorcycle, pictured in the lower right, positioned at the starting line just prior to being struck by Mr. Bronson;
- 2.** Photograph of Mr. Bronson, at rest, on the supergas powered motorcycle taken just seconds before he slammed into the rear of Mr. Jackson;
- 3.** Photograph of Mr. Bronson, speeding down the raceway, just prior to slamming into Mr. Jackson;

4. Photograph of Mr. Bronson, attempting to jump off his speeding motorcycle, just prior to slamming into Mr. Jackson;
5. Photograph of Mr. Bronson slamming into the rear of Mr. Jackson at the time of contact. The object in the upper middle left of the picture is Mr. Jackson and his motorcycle, both of which are airborne;
6. Photograph of the accident scene just after Mr. Bronson slammed into Mr. Jackson. Note: Mr. Bronson is in the white leather suit with what appears to be a severed left hand. Mr. Jackson is under his motorcycle and his head is visible between the feet of the man in the middle of the picture;

7-13. Photographs of the open wound of Mr. Jackson's right lower leg;

14. Photograph of the scar on Mr. Jackson's right lower leg;

15. Photograph of Mr. Jackson's right lower leg showing the damaged muscle in the top of the picture and the scars located on the leg ankle and foot;

16-17. Photographs of Mr. Jackson's right lower leg, ankle and foot;

18.Photographs of the damaged muscle and scars on Mr. Jackson's lower right leg;

19-20. Photographs of Mr. Jackson's right ankle showing the scar and permanent discoloration;

21.Photograph of Mr. Jackson's deformed and swollen right ankle and foot;

22.Photograph of another scar on Mr. Jackson's right lower leg;

23.Photograph of Mr. Jackson's discolored and deformed right ankle and foot; and

24-25. Scars from the donor site of Mr. Jackson's right thigh.

VI. LOSS OF LIFE'S ACTIVITIES

Mr. Jackson was positioned at the starting line of the Hillside Dragway on October 12, 2004, when a high-powered gas motorcycle slammed into him and forever changed his life.

At no time at, during, or after the incredibly violent collision did Mr. Jackson lose consciousness. He was thrown into the air, along with his motorcycle, and smashed into the asphalt dragway.

After landing on the pavement, Mr. Jackson's mind and body were filled with the agonizing sensation of pain, fear, horror and shock.

Mr. Jackson viewed his ankle and foot dangling perpendicular to his leg. His anklebone was smashed into pieces. His fibula ripped

though the muscle and skin of his calf and the motorcycle exhaust pipe was wrapped around his leg.

There are not sufficient words to adequately describe the emotion, the horror, the pain, the outrage, the fear, the uncertainty, the shock, the despair, the helplessness, and the devastation, which filled Mr. Jackson's being as he lay on the dragway pavement.

In what seemed like an eternity, Mr. Jackson was left on the dragway pavement awaiting some type of emergency medical assistance. The pain he experienced during this period of time almost caused him to pass out, unfortunately for Mr. Jackson, he did not.

Mr. Jackson was then taken, by ambulance, to the Beckwith Medical Center, where he had to endure two invasive surgical procedures, wherein hardware was installed in his body, where he developed pleuritic-type left chest pain, where he was constantly and continuously given pain medication, and was discharged after thirteen days in the hospital with very painful open wound.

After being discharged from the hospital, Mr. Jackson continued to take pain medication, was unable to ambulate and suffered severe depression.

Less than thirty days after being discharged from the Beckwith Medical Center, and after numerous visits with an orthopedic surgeon, Mr. Jackson was admitted to the Danvurs Hospital because his right ankle wound had split open.

To further complicate his situation, it was discovered that Mr. Jackson had a staph infection. He underwent his third surgical procedure in an effort to mitigate both his pain and adverse medical status.

Mr. Jackson was hospitalized for a total of two days. He still experienced a great deal of pain. He still had an open wound. He was drifting deeper and deeper into depression due to the fact that his condition was degenerating rather than improving and there was no end in sight to the problems that plagued him.

Upon being discharged from the Danvurs Hospital, on December 20, 2004, Mr. Jackson was monitored by his orthopedic surgeon, Dr. Lashley.

Mr. Jackson continued to experience severe pain. His leg became worse and worse. He became more and more despondent over his situation and, as a needed last resort, was once again admitted to the Danvurs Hospital on January 29, 2005.

This hospitalization was by far his longest and most traumatic. He was forced to spend more than six weeks, a total of forty-four days, inside Danvurs Hospital.

He was admitted to the hospital, this time, because his ankle had once again split open. In addition, he had an infection in his leg which was discharging pus and it was determined that his upper ankle wound had not healed.

These problems resulted in Mr. Jackson undergoing his fourth surgical procedure, in as many months. During this operation, the plate was removed from Mr. Jackson's fibula which revealed the fracture site had not healed.

Mr. Jackson's fifth surgery occurred less than two weeks later, on February 10, 2005. During this procedure, a skin graft was taken from Mr. Jackson's thigh and affixed to his calf.

Approximately one week later, on February 18, 2005, Mr. Jackson returned to the operating room for his sixth surgical procedure. This surgery was necessary due to an inflammation of his bone caused by a pus-producing organism.

After six aborted attempts to pass a catheter through Mr. Jackson's veins, an alternate procedure was performed.

The hospital record is full of entries regarding the controlled substances which were prescribed to Mr. Jackson for both the intense pain he was experiencing and to assist him in obtaining sleep.

Mr. Jackson was finally discharged from the Danvurs Hospital on March 13, 2005. In the five months from the date of the accident, Mr. Jackson was hospitalized for fifty-nine days or almost two full months and also averaged 1.2 operations per month during that same period of time.

Due to the fact that Mr. Jackson experienced such constant, intense and severe pain, and was given frequent and extensive doses of medication, his body became dependent on painkillers and he was forced to undergo a program of detoxification.

After his discharge from the Danvurs Hospital on March 13, 2005, Mr. Jackson continued to obtain medical treatment from the Danvurs Hospital and Danvurs Orthopedic Associates, P.C.

Mr. Jackson returned to the Danvurs Hospital on June 2, 2005 at which time he underwent his seventh surgery for the removal of the surgical hardware from his leg.

Mr. Jackson, after seven operations and years of medical care and attention, still lives with greatly restricted use and mobility of his right leg, ankle, and foot.

Mr. Jackson's growing electrical business was destroyed as a result of this accident and he was out of work until April of 2005.

Prior to this accident, Mr. Jackson led a very active lifestyle. He was involved in many water sports: swimming; water-skiing; jet skiing; and snorkeling.

Mr. Jackson is unable to engage in these activities due to his lack of balance and mobility, his restricted loss of motion, and the pain which he experiences.

Due to the scars, deformities and skin graft, Mr. Jackson is reluctant to wear a bathing suit. The affected areas burn easily and make wearing long pants afterwards very painful.

Mr. Jackson experiences great difficulty in walking through the sand. When Mr. Jackson comes out of the water, he has to side step his way out due to the problems he encounters with his foot, ankle and leg.

Prior to the accident, Mr. Jackson was an avid fisherman, both freshwater and saltwater. He had previously enjoyed fishing for trout and salmon in the Housatonic and Salmon Rivers as well as saltwater fishing trips out to sea.

Due to his loss of balance and problems associated with his foot, ankle and leg, Mr. Jackson can no longer engage in these activities. While on boats in the ocean, one is required to have good balance in order to move from place to place on the boat which is not possible for Mr. Jackson. When salmon or trout fishing, Mr. Jackson is required to wear waders and stand in the water which is now impossible.

On a day to day basis, Mr. Jackson's injuries, scars, and resulting disabilities have had a very dramatic life altering impact

upon him. Mr. Jackson is reminded of his pain and limitations each day, beginning when he wakes up in the morning. His leg is stiff and numb and it takes him approximately one hour before he becomes relatively mobile.

Mr. Jackson is next reminded of his limitations and pain anytime and every time he has to move about. The simplest of activities become a painful and tedious chore for Mr. Jackson: carrying anything of any degree of weight; getting in and out of a motor vehicle; standing or walking for extended periods of time; and engaging in any activities that require any type of coordination to make him sure afoot.

In short, Mr. Jackson is aware of and reminded of his limitations every hour of everyday of his waking life. There is never an hour during his waking day that Mr. Jackson does not think about the accident, his pain, his limitations or his disabilities.

Assuming that Mr. Jackson has only thought of these problems once an hour, for the sixteen hours he was awake everyday since the date of the accident, he would have thought about his pain, injuries, scars, disabilities, and resultant problems in excess of 15,000 times since the date of the accident. In addition, he can expect to be reminded of these problems, limitations, scars, disabilities, and resultant problems in excess of 300,000 times over the rest of his lifetime.

The problems and limitations that Mr. Jackson currently experiences can only be expected to get worse over time. There is the likelihood that Mr. Jackson will develop significant arthritis in his ankle which will greatly reduce his otherwise limited mobility.

Temperature extremes are especially difficult for Mr. Jackson. The cold weather which he experiences in the winter causes him

to endure added stiffness and numbness which further restricts his ability to move about.

The warm summer weather, when Mr. Jackson wears short pants, causes him different types of problems. The scars located on Mr. Jackson's ankle, leg and, especially his calf, are quite disfiguring and draw a lot of pained looks from the public in general. Inevitably, Mr. Jackson will be asked any number of times during the course of a day, when he is wearing shorts, about how he received the very ugly, permanent, and disfiguring scars. In addition to the scars, Mr. Jackson's muscle in his calf was mangled which makes it look as if his leg has a further deformity.

Apart from the severe physical and cosmetic problems which Mr. Jackson has to deal with every hour of every day, there is another aspect of this case that has had a very real impact upon Mr. Jackson.

The psychological ramifications of the events of this accident, the multiple surgeries and hospitalizations, the constant setbacks, the excruciating pain which he experienced, his extended period of recuperation, his addiction to pain medication, his limitations, pain and scars, the loss of his business, his being unable to do physical work for one year, the loss of his vocation, his inability to find work for another year, his inability to run or move about as he did before the accident, the stares and questions he receives about his deformities, and the constant, continuous outpouring of sympathy which he receives, but does not want, have created adverse psychological ramifications, including the tremendous sense of anger and despair which are impossible to adequately describe and sufficiently put into words.

Mr. Jackson's emotions and feelings ran the gambit, from excruciating pain, fear and horror at the time of the accident, to disgust and despair when he did not appear to be getting any better, to helplessness and a sense of no purpose when he was unable to move about, when he was unable to work, and when he lost his business and vocation.

He now feels as if he is a burden to his family and friends. He feels uncomfortable when he is around these people because they either feel sorry for him or they have to rearrange their plans and activities so as not to leave Mr. Jackson out.

In summary, this accident and the constant pain, numbness, stiffness, loss of mobility, his limitations, his permanent, ugly and disfiguring scars, and the loss of his vocation and business, have dramatically affected Mr. Jackson's life in a very profound way.

Mr. Jackson is a very different person today than he was just seconds before Mr. Bronson slammed the super gas motorcycle into him. Mr. Jackson's young life has been forever changed and he can only expect his condition to deteriorate and provide him with additional pain, discomfort, loss of use and restricted mobility.

Mr. Jackson is attempting to get his nearly shattered life back in order. He is making strides in developing a different career and is handling the entire situation as well as could possibly be expected, despite his situation and that which he can expect to experience in the future.

VII. CONCLUSION

In summary, Mr. Jackson was involved in this horrific motor vehicle accident which resulted from the carelessness and negligence of the Hillside Dragway.

Mr. Jackson was hospitalized on four separate occasions, undergoing seven separate surgical procedures and was admitted to the hospital for a total of sixty days.

Mr. Jackson has incurred \$81,648.26 in past medical specials. Mr. Jackson has incurred \$67,742.19 in past lost wages, \$211,120.00 in future lost wages and \$250,000.00 for the destruction of his electrical business. Mr. Jackson's total specials amount to a staggering \$610,510.45.

Mr. Jackson has endured a significant amount of pain and suffering, physical disabilities and permanent, ugly and disfiguring scars. He can expect to develop arthritis in the future and he can no longer run, stand for long periods of time, and his once active lifestyle has been destroyed.

Mr. Jackson, by conservatives estimates, has thought of or been reminded of these problems over 15,000 times since the date of the accident and can expect to be reminded of these problems for at least another 300,000 times over his lifetime.

The life changing impact and psychological ramifications resulting from this accident are tremendously devastating.

This file has been reviewed by numerous law firms who have all indicated settlement figures in the mid one to two million dollar range. However, in an effort to attempt to provide you with some

room to move, and in an effort to settle this matter immediately, we hereby submit our formal demand of \$1,475,000.00.

Although Mr. Jackson was prepared to accept a much lesser figure prior to my involvement, I have explained the value of this case to him and he is no longer interested in such a meager settlement figure.

This figure is being presented to you with the expressed understanding that this entire package constitutes a settlement offer and is not to be used in any method or manner should this case not settle.

In fact, should this case not settle, this offer will be formally withdrawn and we will proceed with suit and seek both compensatory and punitive damages against your insured, due to its callous disregard for the safety of those who paid to race at its dragway. The exposure which your client faces is astronomical.

I should also like to point out that despite my brief involvement with this file, I have done ALL of the necessary background work to prepare this case for trial including employing a local private investigative agency which uncovered a lot of damaging information through its extensive research and interviews. I can assure you that we are fully prepared to swiftly move to trial if this case does not settle in short order.

You have previously been provided with the bulk of this information and you have already met with Mr. Jackson and had any questions which you may have had answered.

I do not anticipate that this will take you a great deal of time to re-review. I expect to hear from you shortly.

To the extent you require anything further, please contact me immediately.

Very Truly Yours,

Richard P. Hastings

RPH:pm

Enclosures

Cc: Mr. Jackson

APPENDIX F: *GLOSSARY OF USEFUL TERMS*

Accident Law: Refers to a broad range of claims that involve a variety of accidents ranging from motor vehicle accidents to slip and falls.

Action: Another term for a complaint or lawsuit.

ADA: Abbreviation for Americans with Disabilities Act, the federal law that prohibits discrimination against person with disabilities.

Additor: An increase in the amount of damages awarded by a jury made by a judge.

Admissible Evidence: Evidence that can be legally and properly introduced in a court proceeding.

Affidavit: A written statement signed and sworn to under oath.

Affirmative Defense: A defense raised by a Defendant as a defense to the complaint which might include contributory negligence or assumption of risk.

Airplane Accidents or Aviation: A very specialized area of the law that deals with injuries or deaths resulting from commercial or passenger flights.

Allegation: A statement made by one party to a lawsuit filed in a pleading which that party is prepared to prove in court.

Alternative Dispute Resolution: A process for resolving disputes that exists outside of the court system, which typically include arbitration and mediation.

Amicus Cuirae: A Latin phrase meaning “friend of the court.” This refers to a party that is allowed to provide information to the court (usually a legal brief or memorandum) even though they are not directly involved in the case.

Annuity: A contract which provides that a person receives fixed payments for a defined period of time.

Answer: A Defendant’s written response to the allegations contained in the Plaintiff’s complaint or petition which must be filed within a specified period of time.

Answers to Interrogatories: A written statement sworn to under oath which answers written questions asked by the other party in a lawsuit.

Appeal: A request or petition to a higher court, usually composed of a panel of judges, to overturn the legal ruling of a lower court.

Arbitration: A method of resolving a dispute or case outside of the court system by agreeing to present it to an impartial third party or panel of individuals (usually three) for a decision that may or may not be binding.

Asbestos Cases: Cases where there has been or may be an injury arising out of prolonged exposure to asbestos, which are normally, handled in a class action cases.

Assumption of the Risk: A defense raised in personal injury cases which states that the Plaintiff knew that a particular activity was dangerous and therefore bears all or some of the responsibility for the injury which resulted.

Attorney of Record: The attorney principally responsible for signing all documents relating to the lawsuits.

Attorney-Client Privilege: A rule that keeps communications between an attorney and a client confidential, which are not discoverable in any court proceeding.

Attorney-in-Fact: A person named in a written power of attorney that is to act on behalf of the person who signs the document. The

attorney-in-fact's power and responsibilities depend on the specific powers granted in the power of attorney.

Attractive Nuisance: Something that is located on a property that attracts children and endangers their safety. For example, unfenced swimming pools, open holes, and certain dangerous and defective conditions may qualify as attractive nuisances.

ATV (All Terrain Vehicle) Accidents: Accidents involving injuries and or deaths resulting from the operation of an all terrain vehicle.

Aviation Law: The area of the law that deals with the operation of civilian, usually commercial, aircraft. This area of the law generally deals with cases involving airline disasters, plane crashes, hijackings and wrongful death.

Bad Faith Cases: Bad faith cases normally involve a claim or lawsuit against your own insurance company alleging unfair claims practices.

Bench Trial: A trial before a judge without a jury.

Beneficiary: A person named in a will or insurance policy that is to receive some type of asset or assets.

Bifurcation: The process of splitting a trial into two parts. The first phase deals with liability and the second phase deals with damages.

Boating Accidents: These cases are somewhat specialize and involve accidents between boats, which are governed by state or federal admiralty or maritime law.

Brain Damage: This is a specialized area of the law which deals with cases that result in brain damage either through an accident or medical malpractice case.

Brief: A legal document that outlines a party's legal arguments in a case which typically cites applicable case law.

Burden of Proof: The responsibility of convincing the decision maker in a trial that their version of the facts is true. In a civil trial it means that the Plaintiff must convince the judge or jury "by a preponderance of the evidence" that is after balancing all of the evidence, the scales of the justice tip ever so slightly in favor of one party. In a criminal trial because a person's liberty is at stake, the government has a harder job, and must convince the judge or jury "beyond a reasonable doubt" that the Defendant is guilty.

Canon of Ethics: The formal standards of ethical conduct which must be followed by all attorneys.

Case: A term that refers to a lawsuit. Case can also refer to a judge's decision. Finally, the term also describes the evidence a party must submit in support of their position.

Case Law: Also known as common law which is created by judges when deciding individual cases. The cases decided by the U.S. Supreme Court become the law of the land and cases decided by the states' highest court (usually the State Supreme Court) becomes the law of the state.

Case of First Impression: A novel legal question that has not yet been decided by a court.

Catastrophic Law: The area of law that deals with serious personal injury and wrongful death cases.

Cause of Action: A specific legal claim for which a party seeks a remedy or compensation.

Certiorari: A Latin word which means “to be informed of.” This refers to the order an appellate court issues so that it can review the decision of the lower court.

Challenge for Cause: It is when a potential juror can be rejected if it is established that for some reason the juror cannot or will not be willing to set aside any preconceived biases which would avoid prejudice to one party.

Change of Venue: A change in the location of the trial which is granted to avoid some type of prejudice to one of the parties to a lawsuit.

Circumstantial Evidence: Indirect evidence that implies that something happened that does not directly prove that it occurred.

Civil Case: A non-criminal case or lawsuit.

Civil Law: Deals with all areas of the law that do not involve criminal law.

Civil Procedure: The rules used to dictate how a civil case proceeds from the time the initial complaint is filed through the trial itself and any subsequent appeal. Each state enacts its own rules of civil procedure.

Civil Rights: The area of law protecting those rights guaranteed by the Bill of Rights (the first ten Amendments of the Constitution) and, the 13th and 14th Amendments to the Constitution, including the right to due process, equal treatment under the law of all people regarding the pursuit of life, liberty, property, and protection.

Civil Rights Act of 1964: Federal legislation enacted to end discrimination based on religion, color, race or national origin. This law guarantees the right of equal access to education, public facilities and public accommodations and prohibits discrimination in employment.

Claim: A demand made by a person who is seeking to recover damages from a loss.

Class Action: A lawsuit or action in which a large number of people with similar legal claims join together in a group (the class) to sue a common Defendant which is usually a company.

Clear and Convincing Evidence: The level of proof sometimes required in a civil case needed for a Plaintiff to prevail. It is more than a preponderance of the evidence but less than beyond a reasonable doubt.

Closing Argument: At the conclusion of the presentation of evidence, a summary made by each party or their attorney.

Confidential Communication: Information exchanged between two people who have a relationship whereby private communications are protected by law.

Common Law: See Case Law.

Comparative Negligence: A system followed in certain states that allows a Plaintiff to recover some portion of his/her damages.

Compensatory Damages: Money awarded to a party to compensate him/her for their injuries.

Complaint: It is the document in a civil action that initiates the lawsuit. It outlines the allegation and the hopes for the requested legal remedy.

Complex Litigation Cases: This area of the law usually involves a difficult case involving many lawyers and significant amounts of evidence.

Conflict of Interest: Refers to a situation when someone, usually an attorney, has competing or conflicting obligations which make it difficult, if not impossible, to properly fulfill his/her duties in a fair manner. In certain situations, this conflict may require that the attorney withdraw from further representation in a case.

Conservator: Sometimes known as a guardian, is a person appointed usually by a probate court, to manage the affairs of another.

Consortium: Consortium includes all the benefits that one spouse derives from the other, including material support, companionship, affection, and sexual relations. In many instances a spouse brings a claim against a third part for “loss of consortium” after their spouse is injured or killed.

Consumer Protection: The area of law that deals with the remedies available in most states and the federal government which have enacted statutes and laws and set up agencies to protect the consumer from inferior, adulterated, hazardous or deceptively advertised products or services, and deceptive or fraudulent sales, acts or practices.

Contingency Fee: A method of paying a lawyer for legal representation by which, instead of an hourly fee, the lawyer receives a percentage of the money obtained for the client.

Continuance: The postponement of a legal proceeding to a later date.

Contributory Negligence: A system followed in certain states that prevent a Plaintiff from recovering damages if he/she contributed in any way to the injury.

Costs: These may refer to monies that are advanced by a lawyer on behalf of his/her client or it could be monies, which a court may order that one party pay to another.

Counterclaim: A claim by a Defendant that the Plaintiff committed some wrong which would allow the Defendant to be awarded money damages or some other type of relief.

Construction Accidents: These cases involve injuries that occur at worksite that may be caused by heavy equipment or machinery.

Corroborating Evidence: Evidence which supplements or tends to strengthen initial evidence.

Court Costs: Certain expenses of prosecuting or defending a lawsuit that does not include legal fees.

Cross Complaint: A legal claim filed by the Defendant against the Plaintiff or some other person or entity that is not yet a party to the lawsuit.

Cross Examination: The opportunity to question any witness, including your opponent, who first testifies on direct examination.

Custodian: The person appointed to manage the assets of a minor.

Damages: In a claim or lawsuit, it is the money awarded to one party based upon the injury or loss caused by the other party. There are many different types of damages that may be included:

Compensatory Damages: Compensatory damages are intended to put the injured party in the same position he/she was in prior to the injury. Compensatory damages typically include medical expenses, lost wages, damages for pain and suffering and any permanent injury;

Economic or Specific Damages: Damages intended to cover injuries for which an exact dollar amount can be calculated. Economic damages are usually composed of medical bills, lost wages and out of pocket expenses;

Non-Economic or General Damages: Damages intended to cover injuries for which an exact dollar amount cannot be calculated. Non-economic damages typically include pain and suffering,

permanent injuries, loss of companionship of a loved one, and loss of life's enjoyment;

Nominal Damages: A term used when a judge or jury finds in favor of one party but determines that no real harm was done and therefore awards a very small amount of money;

Punitive Damages: Also called exemplary damages, are awarded over and above compensatory damages to punish a party because of their willful or malicious misconduct; and

Statutory Damages: Damages imposed by a state or federal statutory law. These damages can be awarded in addition to compensatory damages.

Death Cases: These cases are also referred to as wrongful death cases which is an action which claims damages from the person or entity responsible for the death of another brought under a wrongful death statute.

Decedent: A person who had died, who is also referred to as "deceased."

Declaratory Judgment: A court decision in a civil case that decides an issue and tells the parties what their rights and responsibilities are, without awarding damages or ordering them to do anything.

Default Judgment: A court decision awarded to the Plaintiff when a Defendant fails to contest the case or file documents in a timely manner.

Defective Product Cases: These cases involve the area of the law dealing with the liability imposed on a manufacturer or seller of a defective and/or unreasonable dangerous product.

Defective Vehicles: These cases involve some type of product design or defect which results in dangerous conditions that creates some type of injury to a consumer such as a vehicle rollover.

Defendant: The person also referred to as the respondent, against whom a lawsuit is filed.

Demurrer: A written pleading filed by the Defendant stating that the complaint as filed does not set forth an actionable case.

Deposition: A type of pretrial discovery where one party questions the other party or a witness before a stenographer or court reporter under oath.

Direct Evidence: Evidence that is self-explanatory to prove an alleged fact.

Direct Examination: In court, the initial questioning of a party or witness by the side that has called that person to testify.

Directed Verdict: A ruling or verdict by a judge, typically made after the Plaintiff has presented all of the evidence but before the Defendant puts on his or her case, that awards judgment to the Defendant because the judge has determined that the Plaintiff has not proven his/her case.

Disbursements: Expenses associated with a party's case that the lawyer passes onto the client.

Discovery: A pre-trial process during which parties to a lawsuit request relevant information and documentation, either through written or oral examinations, in an attempt to "discover" all relevant facts.

Discrimination: The area of law dealing with unfair or unequal treatment of a person based upon their belonging to a protected class of individuals.

Dismissal with Prejudice: When a case is dismissed and the Plaintiff is barred or prohibited from bringing a new suit based upon the same claim.

Diversity of Citizenship: The situation where one party to a lawsuit is a citizen or resident of one state while the opposing party is a citizen or resident of another state which is a jurisdictional issue in federal court.

Dram Shop Cases: These cases involve the liability imposed upon the seller of liquor for damages caused by the purchaser of liquor.

Duty to Warn: The legal obligation required of one party to warn people of a danger. This is typically required of manufacturers of dangerous products.

Eggshell Skull: A hypothetical medical condition and legal principle used to illustrate the fact that you take your Plaintiff as you find them. You are responsible for all the consequences, whether you could have foreseen them or not. For example, if you bump into a person with an eggshell skull and cause it to fracture, you are responsible for whatever happens to that person, even though you had no way of knowing that the injury would be so severe.

Elements (of a case): The components or parts of a legal claim or cause of action which must be proven in order to prevail in a legal claim.

Evidence: Various methods and things represented in court to prove an alleged fact which could include: testimony; documents; drawings; photographs; maps and tapes.

Ex parte: A Latin phrase meaning “by or for one party.” This refers to the situation in which only one party to a lawsuit appears before a judge.

Executor: The person named in a will to handle the affairs of someone who has died.

Executrix: The term for a female executor.

Expert Witness: A witness with specialized knowledge of a particular subject who is allowed to give an opinion in court even though that person did not witness the relevant event or occurrence in person.

Failure to Diagnose Cases: These cases involve the failure of a health care professional (usually a doctor) to diagnose a medical condition where such misdiagnosis results in some type of harm or even death.

Fault Automobile Insurance: This refers to a system in which the responsible party to an accident insurance company is responsible for the damages up to the stated limit of liability.

Federal Court: United States government courts operating pursuant to powers derived from the U.S. Constitution which hear and decide cases involving federal law and cases involving diversity jurisdiction where the parties to the lawsuit are from different states and the value of the case exceeds a certain threshold.

Foreseeability: A key element in determining a person's liability which states that if a Defendant could not have reasonable foreseen that someone might be injured by his/her actions, then there may be no liability.

General Practice: An area dealing in many or numerous different areas of the law.

Golden Rule Argument: During a jury trial, an attempt made by Plaintiff's attorney to persuade the jurors to put themselves in the place of the victim or the injured person and deliver the verdict that they would wish to receive if they were in that person's position.

Gross Negligence: A situation where a Defendant fails to use even the slightest degree of care in a way that shows reckless or willful disregard for the safety of others which may in certain situations provide for an award of punitive damages.

Guardian: An adult who has been given the legal right by a court to control and care for a minor or a person judged to be incompetent and their property.

Guardian Ad Litem: A person, not necessarily a lawyer, who is appointed by a court to represent and protect the interests of a child or an incapacitated adult during some type of court proceeding.

Head of Household: A person who provides for the support in the household, of one or more people who are closely related to him/her by blood, marriage or adoption.

Health Law: The area of law dealing with the health care industry.

Hearing: A legal proceeding, other than a trial, held before a judge.

Hearsay: Secondhand testimony that a witness only hears from another party without personally seeing the event.

Hearsay Rule: A rule of evidence that prohibits the consideration of secondhand testimony at a trial unless it falls within a recognized exception.

Heir: One who is to receive property from someone who has died.

Hung Jury: A jury that is unable to come to a final decision, resulting in a mistrial.

Impeach: To discredit the testimony of a witness in an effort to establish that the witness is not to be believed.

Impeachment of a Witness: An attack on the credibility of a witness in a legal proceeding utilizing evidence introduced for that purpose.

Inadmissible Evidence: Testimony or other evidence that fails to meet certain court rules governing the types of evidence that can be presented to a judge or jury and is thereby not considered by the judge or jury.

Incapacity: A lack of types of abilities that results in a person's inability to properly manage his or her own affairs.

Incompetence: The inability, as determined by a court, of a person to properly manage his or her own personal or financial affairs.

Industrial Accidents: These cases involve accidents which occur in an industrial setting.

Informed Consent: An agreement made to do something or to allow something to happen that is arrived at after receiving complete knowledge of all relevant facts, such as the risks involved or any available alternatives.

Injunctive Relief: A situation in which a court grants an order, called an injunction, requiring a party to refrain from doing something.

Insurance Law: The area of law that deals with insurance, insurance agents, insurance carriers and insurance issues.

Intentional Tort: A deliberate wrongful act that causes harm to another, for which the victim may sue the wrongdoer for damages.

Interrogatory: A type of discovery whereby written questions designed to discover key facts about an opposing party's case are posed to a party in a lawsuit.

Intestate: The situation whereby one dies without a valid will.

Invitee: A business guest or someone who enters property held open to members of the public, such as a visitor to a store, with the consent of the possessor of the property.

Implied Warranty: A guarantee about the quality of goods or services purchased that is not expressed either orally or in writing.

In Camera: A legal proceeding is “in camera” (Latin for “in chambers”) if it is held before the judge in private chambers when the public is excluded from the courtroom.

J.D.: Is an abbreviation for the degree of juris doctor or doctor of jurisprudence awarded by most law schools on its graduates.

Joint and Several Liability: It is a doctrine whereby one person may be sued for the damages caused by the liability of more than the one person being sued.

Judgment: A final court ruling settling the key issues in a lawsuit and determining the rights and obligations of the parties.

Judgment Not Withstanding the Verdict (JNOV): A reversal of a jury’s verdict by a judge after a judge believes that there were insufficient facts on which to base the jury’s verdict, or that the jury did not correctly apply the law in arriving at the verdict.

Jurisdiction: The legal authority of a court to hear and decide a case.

Jurisdictional Amount: The minimum monetary amount that determines whether or not a particular court can hear a particular case.

Juror: A person, or sometimes referred to as a venierman, who serves on a jury.

Jury: A random group of people selected by the attorneys in a case to apply the law, as stated by the judge, to the facts of a case and render a decision.

Jury Charge: The judge's instructions to the jurors, at the end of a case, on the law that applies in the case and provides definitions of relevant legal concepts.

Jury Trial: A trial held before a group of people selected by the attorneys in the case who listen to the evidence and then relate the facts of the case to the law provided by the judge and then render a verdict or decision.

Labor & Employment Law: This area of the law encompasses a wide variety of issues like Occupational Safety & Health Regulations, Affirmative Action and Sexual Harassment. Employment or labor lawyers can help protect workers when their rights are being violated.

Legal Malpractice: The delivery of substandard care by a lawyer which results in some type of injury or harm to the client.

Liability: A legal duty, responsibility or obligation owed by one party to another.

Lis Pendens: The term, from the Latin meaning suit pending, is a written notice that is filed against a piece of real estate that is in someway affected by the litigation.

Litigation: The area of law that deals with the preparation and presentation of a lawsuit or other resort to the courts to determine a legal question or matter.

Malpractice: The delivery of substandard care by a licensed professional usually a doctor, lawyer, dentist, accountant, or other professional.

Malpractice Law: The area of law that deals with representing those who have suffered through negligence, misconduct, lack of ordinary skill, or a breach of duty in the performance of a professional service (medicine, law, accounting, etc.) resulting in some type of injury or loss.

Mediation: A method of intervention between parties to promote resolution of a case outside of the court system.

Medicaid: A program established by the federal government and administered by the individual states to help pay medical costs for financially needy people.

Medicare: A program established by the federal government that assists older and some disabled people in paying their medical costs. The program is divided into two parts: Part A is hospital insurance and covers most of the costs of a hospitalization; and Part B, medical insurance, pays some of the costs of doctors and outpatient medical care.

Minor: A person who has yet to reach the age of majority who does not enjoy the legal rights of an adult.

Misdiagnosis: A specialized area of the medical malpractice law that deals with the late or missed diagnosis of a medical condition that causes injury or death to the individual.

Mistrial: A trial that ends prematurely and without a judgment or verdict, due either to a mistake that jeopardizes a party's right to a fair trial or to a jury that cannot agree on a verdict (a hung jury).

Motion: An oral or written request asking a judge to issue a ruling or order on a specific legal matter.

Motion for a New Trial: A request made by a losing party to a lawsuit that asks for a new trial because it is alleged that the original trial was unfair due to legal errors that prejudiced the case.

Motion for Directed Verdict: A request made by the Defendant, typically made after the Plaintiff has completed his/her case, asking

that the judge rule in favor of the Defendant because the Plaintiff failed to make out a *prima facie* case.

Motion for Summary Judgment: A request made by the Defendant asking the judge to rule in favor of the Defendant because the Plaintiff failed to state a claim for which relief could be granted.

Motor Vehicle Accidents: This is a broad category that involves a variety of motor vehicles ranging from cars to trucks to motorcycles where an accident results in injury or death.

Negligence: In simplistic terms, it is the failure to act as a reasonable person would be expected to act under similar circumstances.

No-Fault Insurance: Motor vehicle insurance that requires the insurance companies of each person in an accident to pay for medical bills and lost wages of their insured, up to the stated limits, regardless of who was at fault.

Nursing Home Neglect: The area of law focusing on the rights of the elderly and infirmed that provide for the proper maintenance and nursing care for persons who are unable to take care of themselves.

Oath: A statement that a person will tell the truth, or a promise to fulfill a pledge, often calling upon God as a witness. One of the best-known oaths is the witness' pledge "to tell the truth, the whole truth, and nothing but the truth" prior to testifying in a legal proceeding.

Objection: When one party takes an exception to some statement or procedure in court which is either sustained (allowed) or overruled by the judge.

Opening Statement: A statement made prior to the introductory of evidence at a trial, by an attorney or self-represented party that outlines the theory and facts of the case.

Order: A decision or directive issued by a court.

Order to Show Cause: An order from a judge or court that directs a party to come to court and convince the judge why they should be entitled to the relief which they have requested.

Perjury: A criminal offense in which a person knowingly makes a false statement under oath.

Personal Injury: A general category that relates, to an injury to a person's body, mind or emotional well-being.

Personal Injury Recovery: The amount of money awarded in a lawsuit or paid through a settlement to compensate someone for injuries to that person's body, mind or emotional well-being.

Personal Injury & Torts: The area of law that involves civil law cases designed to obtain compensation for injury to an individual.

Plaintiff: The person who institutes or files a lawsuit.

Pleadings: The written allegations by each party to a lawsuit stemming from the various claims and defenses.

Polling the Jury: The procedure, after the jury verdict has been announced, of asking jurors individually where they agree within the verdict.

Post-Trial: Refers to all matters happening after the trial.

Power of Attorney: A signed document that gives another person legal authority to act on your behalf.

Prayer for Relief: What the Plaintiff asks the court to award as part of the Plaintiff's complaint.

Precedent: A legal principle that requires lower courts to apply the decisions of appellate courts when faced with similar legal issues.

Preemptory Challenges: A limited number of challengers each side has during jury selection which may be used to eliminate potential jurors without stating a reason.

Pretrial Conference: A conference, called at the discretion of the judge, whereby the judge meets with opposing counsel to narrow or define issues to be tried and to attempt to settle the case prior to trial.

Prima Facie: A Latin phrase meaning “a first view.” This refers to the minimum amount of evidence a Plaintiff must present in order to avoid having his/her case dismissed.

Privileged Communication: A communication that takes place within the context of a protected relationship, such as between an attorney and a client, a priest and a penitent or a doctor and a patient. The law often protects the disclosure of such communications.

Pro se: A Latin phrase meaning “for himself.” A person who represents himself/herself is said to appear pro se.

Probate: The area of law dealing with the validity of wills, administration of estates of deceased persons or disabled, and sometimes over the affairs of minors and persons determined to be incompetent.

Products Liability Law: The area of law dealing with the liability imposed on a manufacturer or seller of a defective and/or unreasonably dangerous product.

Proximate Cause: A person is generally liable for an injury caused to another if it was proximately caused by his/her action or failure to act when there was such a duty present.

Punitive Damages: Money damages awarded to a Plaintiff that is intended to punish a Defendant which is meant to deter others from similar conduct.

Quash: To vacate or void a type of legal document such as a summons or subpoena.

Re-Cross Examination: The questioning of a witness about matters which were raised during the re-direct examination.

Re-Direct Examination: The questioning of a witness about matters which were raised during cross examination.

Remand: When an appellate court sends a case back to the trial court with directions for further proceedings.

Request for Admission: A discovery procedure or process which authorizes a party to a lawsuit to ask an opposing party to admit that certain facts are true. If the party either admits the facts or does not respond in a timely manner, the facts will be admitted as being true for purposes of trial.

Res Ipsa Loquitur: A Latin phrase which means “the thing speaks for itself.” This doctrine creates presumption or inference that Defendant was negligent, based upon proof that the thing causing the injury was in Defendant’s exclusive control, and that the accident ordinarily does not happen in absence of negligence.

Retainer: This is the up front payment a lawyer receives from a client to accept a case.

Serious Injuries: While there is no hard and fast rule about defining a serious injury case, typically it is a case involving an injury that results in a major disruption of the life of the victim caused by the fault of another person. Examples of serious injury cases would include: Wrongful death cases; Spinal cord injuries; Traumatic brain injuries; Amputations; Injuries involving surgery; Disfigurement cases; Loss of senses (vision, hearing, taste, smell); or any other life altering injury.

Service of Process: The act of advising the other parties to an action that it has begun and informing them of the steps they should take in order to respond to the lawsuit.

Settlement: The agreed upon resolution by the parties to a civil lawsuit.

Settlement Agreement: The agreed upon resolution by the parties to a civil lawsuit set forth in writing.

Setoff: A claim made by a Defendant that alleges the Plaintiff's damages should be reduced because the Defendant suffered damages or money is owed to the Defendant by the Plaintiff.

Social Security/Disability Law: The area of law assisting those who, due to disability, require a program of public assistance for the economic security and social welfare of the individual and his or her family.

Standard of Care: The degree of care which a reasonable person would take to prevent harm or injury to another.

Standing: The legal right which one possesses to start a lawsuit.

Stare Decisis: A Latin phrase which means, “let the decision stand.” It is a doctrine that requires judges apply the same decisions in legal issues which have already been decided in a similar case.

State Court: A court that decides matters involving the law of that state or its constitution.

Statute of Limitations or Repose: The time limitation imposed by state or federal law for the filing of a lawsuit.

Strict Liability: This theory states that a person is liable for the injuries caused to another even though there is no proof of negligence. In certain states, an owner of a dog, in certain cases, is strictly liable to the injured party when their dog bites the injured party.

Structured Settlements: In certain instances, usually in cases involving catastrophic injuries, insurance companies who are responsible for the payment of these damages may want to payout the funds over an extended period of time which may result in tax advantages to the Plaintiff.

Subpoena: A document which compels a party to appear in court or at a deposition.

Subpoena duces tecum: A subpoena which compels the witness to produce documents.

Summary Judgment: A final decision that is issued prior to trial.

Summation: The closing argument made at the conclusion of a case.

Summons: A document that advises the Defendant that he/she is being sued.

Surviving Spouse: A widow or widower of the deceased.

Tort: A civil wrong that does not involve a contract which causes injury to another for which the responsible party can be held liable.

Tortfeasor: A person who commits a tort.

Toxic Tort: An injury caused by prolonged exposure to a toxic material.

Trial: The process that focuses on the judicial examination of issues of fact or law before a judge or jury for the purpose of determining the rights of the parties.

Underinsured Motorist Coverage: The portion of a motor vehicle insurance policy that compensates you for any injuries resulting from an accident with a driver that has insufficient amounts of insurance to compensate you for your injuries.

Uninsured Motorist Coverage: The portion of a motor vehicle insurance policy that compensates you for any injuries resulting from an accident with a driver that has no insurance to compensate you for your injuries.

Veniremen: People who are summoned to court who are questioned as potential jurors who may later be chosen as jurors for a trial.

Venue: The law which governs the proper court in which to file a case.

Vicarious Liability: When one person is liable for the negligent actions of another even though the first person was not directly responsible for the injury. In certain cases, parents can be vicariously liable for the acts of their children and an employer can sometimes be vicariously liable for the acts of an employee.

Voir dire: A Latin phrase meaning, “to speak the truth.” This is the process of interviewing prospective jurors.

Willful Tort: A harmful act that is committed in an intentional manner.

Witness: A person who testifies under oath at a deposition or court proceeding.

Workers Compensation Law: The area of law that deals with the remedies and compensation for injuries to an employee arising out of and in the course of employment that is paid to the worker or dependents by an employer whose strict liability for such compensation is established by law.

Writ: A judicial order or decree.

Wrongful Death: An action which claims damages from the person or entity responsible for the death of another brought under a wrongful death statute.

OUR AREAS OF PRACTICE

Personal Injury

Our attorneys, who include former in house counsel to State Farm and Progressive Insurance Companies, have helped injured people and their relatives recover millions of dollars from negligent parties and their insurance companies in cases involving:

- * Motor Vehicle Accidents
- * Medical Malpractice
- * Dog Bites
- * Premise Liability
- * Wrongful Death Cases
- * Fall Down Cases
- * We Also Make Out Of State Referrals
- * Defective Products

We have also written the book, “Understanding and Improving the Value of Your Personal Injury Case.”

Real Estate

We are not only real estate lawyers, but also real estate investors. We have decades of experience in representing clients in a variety of real estate matters in situations involving Commercial Closings, 1031 Exchanges, Residential Closings, New Construction, Refinances, Landlord/Tenant Matters, Builder Representation, and Lease Negotiations.

Criminal/Motor Vehicle

Our attorneys, who include a former assistant district attorney, represent individuals charged with crimes by protecting their rights and ensuring that they get the best criminal defense available. Recently our firm obtained a not guilty jury verdict in a murder case. We take cases involving:

*All Criminal Matters

*All Felony and Misdemeanor Cases

*DUI/DWI Cases

*All State and Federal Cases

*Drug Possession/Sale Matters

*Burglary/Theft/Embezzlement

*All Juvenile Matters

*White Collar Crime

Business Services

We counsel clients on a wide variety of business matters, which include the formation of business entities, reviewing of new products and business ideas, drafting of business agreements as well as assisting in the raising of venture capital through syndications and private placement memoranda.

Litigation

Our attorneys have extensive experience litigating a wide variety of cases including Contract Cases, Personal Injury Cases, Construction Cases, Real Estate Matters, Will Contests, Collections, Foreclosures, Landlord/Tenant Matters, Unfair Insurance Practices, Unfair Trade Practices, and Arbitration/Mediation.

Estate Planning

We assist clients in developing estate plans through the preparation of a variety of legal documents to help reduce estate taxes resulting in substantial savings to the client. We also offer trust formation, powers of attorney, health care appointments and living wills. Our services also include fiduciary representation and probate administration.

HASTINGS, COHAN & WALSH, LLP
Attorneys at Law

440 Main Street
Ridgefield, Connecticut 06877

Telephone: 203-438-7450
Facsimile: 203-438-0263

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THE CRASH COURSE ON DOG BITE CLAIMS IN CONNECTICUT

A DOG BITE can totally disrupt and completely change your life. The way in which you engage in your daily activities can be significantly altered and you may be forced to endure a great deal of pain.

A SERIOUS PERSONAL INJURY may ruin you and your family financially and cause you a great deal of mental anguish. This situation becomes even more frustrating when caused by the negligence of another.

YOU HAVE TWO MAIN CONCERNs when involved in a dog bite case: improving physically as quickly as possible; and maximizing the amount of money you can collect.

THE CRASH COURSE ON DOG BITE CLAIMS IN CONNECTICUT gives you easy and practical strategies to use in obtaining better medical care and in helping your attorney recover more money for you.

IN THIS COMPREHENSIVE BOOK YOU WILL LEARN:

- What to do first;
- How a personal injury claim is put together;
- What insurance adjusters don't want you to know;
- The do's and don'ts;
- How to better communicate with your health care providers;
- How to support your loss of income claim; and
- What you need to do to help your attorney improve the value of your claim

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