

Do not leave any answers blank. Enter N/A for questions that are not applicable.

## Personal Injury Checklist (juvenile)

### Attorney Information

<b>Hiring attorney name</b>	
<b>Firm name</b>	
<b>Phone number</b>	
<b>Fax number</b>	
<b>Address</b>	
<b>City/State/Zip</b>	
<b>Email address</b>	
<b>Legal assistant</b>	

### Case Information

<b>Project name</b> (client's last name or company name)				
<b>Case name</b>				Case Not Filed
<b>Court and location</b>				Case Not Filed
<b>Docket number</b>				Case Not Filed
<b>Party representing</b>	Plaintiff		Defendant	
<b>Opposing attorney</b>				
<b>Due date of report</b>	Month	Day	Year	
<b>Anticipated deposition date</b>	Month	Day	Year	Unknown
<b>Anticipated trial date</b>	Month	Day	Year	Unknown
<b>Is there an opposing economic expert report?</b>	Yes	No	There Will Be	Unknown
<b>Is there a vocational report?</b>	Yes	No	There Will Be	Unknown

**Do not leave any answers blank. Enter N/A for questions that are not applicable.**

**Subject Information**

<b>Subject's name</b>				
<b>Date of birth</b>	Month	Day	Year	
<b>Gender</b>	Male		Female	
<b>Race</b>	Caucasian	African-American	Hispanic	Asian
	Native-American	Other:		
<b>Number of years of schooling</b>	0 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20			
<b>Highest degree or certificate of education attained</b>	None	GED	High School	Associate's
	Bachelor's	Master's	Professional	Ph.D.
<b>City and state of residence when born</b>				
<b>Current city and state of residence</b>				
<b>Citizenship</b>	U.S.	Other:		

Is there any other information regarding the Subject which would be important for our analysis? For example, does the Subject have a disability? Has there been an impairment rating from a vocational report? Did the Subject have multiple certificates and degrees?

**Do not leave any answers blank. Enter N/A for questions that are not applicable.**

### Subject's Family Information

Siblings		Name	DOB		
	1		Month	Day	Year
	2		Month	Day	Year
	3		Month	Day	Year
	4		Month	Day	Year

### Subject's Parent Information

	Parent 1			Parent 2																				
<b>Name</b>																								
<b>DOB</b>	Month	Day	Year	Month	Day	Year																		
<b>Marital status</b>	Married																							
	Not Married		Divorced	Not Married		Divorced																		
	Separated		Divorced and remarried	Separated		Divorced and remarried																		
<b>Number of years of schooling</b>	0	1	2	3	4	5	6	7	8	9	10	11	0	1	2	3	4	5	6	7	8	9	10	11
<b>Highest degree or certificate of education attained</b>	None		GED		None		GED																	
	High School		Associate's		High School		Associate's																	
	Bachelor's		Master's		Bachelor's		Master's																	
	Professional		Ph.D.		Professional		Ph.D.																	
<b>Job title</b>																								
<b>Average earnings</b>																								
<b>Current city and state of residence</b>																								

Is there any other information regarding the Subject's family which would be important for our analysis? For example, do the spouse and children live in Mexico? Are there any special circumstances surrounding the living arrangements of the family? Does one of the children have a disability?

**Do not leave any answers blank. Enter N/A for questions that are not applicable.**

### Injury Information

<b>Date the economic damages began</b>	Month	Day	Year
<b>Describe how the injury occurred and what happened</b>			
<b>Create a timeline detailing the important dates and key things that have happened or are expected to happen</b>			

**Do not leave any answers blank. Enter N/A for questions that are not applicable.**

### Injury Result Information

<b>Current medical condition?</b>	Able to work	Not able to work	
<b>If not able to work, when will the Subject be able to work?</b>	Month    Day    Year	Never	Unknown
<b>Once able to work, are there any limitations to the jobs that the Subject can perform? (list the limitations)</b>			
<b>If there is a limitation to the jobs that the Subject can perform, how long will these limitations continue?</b>	Month    Day    Year	Indefinitely	Unknown

<b>Is there a life care plan?</b>	Y	N	There Will Be	Unknown
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Note that the life care plan must include the items which will be valued, the start and stop dates in which those items will be used, the frequency of use, and the cost of the item. For example, "The injured will need shots of antibiotics every month from 1998 through life expectancy. The cost of these shots is \$15 each."

Is there any other information regarding the Injury Results which would be important for our analysis? For example, did the plaintiff lose stock options?

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**Damage Calculation Information**

<b>Do Federal taxes need to be incorporated into the analysis?</b>	Yes	No
<b>Do State taxes need to be incorporated into the analysis?</b>	Yes	No

<b>Legal Parameters</b> Describe any legal parameters that might affect this economic analysis For example, how is collateral source income to be treated in this case?	
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Is there any other information that we should consider regarding the analysis?