

*Orthopaedic Center of South Florida*  
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**PATIENT INTERVIEW FOLLOWING A MOTOR VEHICLE ACCIDENT**

1. Age of Patient:
2. Date of Accident:
3. Position in car: Passenger or Driver
4. Were you wearing a seat belt? Yes or No
5. Was there loss of consciousness?
6. Were you evaluated at the scene by police or paramedics or both?
7. Did you go to the hospital?
8. How did you get to the hospital ?(Ambulance/Drove yourself/  
Family member drove)
9. If you were delivered by ambulance, were you on a backboard with a hard collar?
10. At the hospital were you: X-rayed and released?  
X-rayed and treated in some way?
11. When did you begin Physical Therapy?  
Is therapy beneficial?
12. Are you taking any medications?
13. What is your main problem?
14. If there is neck pain or back pain, does it radiate into the extremities?
15. Are there any bowel or bladder problems?
16. Has an MRI been done?