

Employer _____

**SPECIAL REPORT
HERNIA CASE**

1. Describe nature of your work and state how long you have been engaged at this work _____
2. If you were lifting some object, state its approximate weight and size, or else state clearly what happened. _____
3. Were you taking the whole weight? _____
4. Did you take the strain steadily or with a jerk? _____
5. If assisted by anyone, state whom. _____
6. Have you handled similar or heavier weights before? _____ frequently? _____
7. If so, what was there unusual about this particular lift to cause the hernia? _____
8. If not lifting anything, state what unusual occurrence, if any, caused the hernia. _____
9. Did you feel any sensation at that time? Describe in detail what you felt. _____
10. If not at the first time, how soon afterwards did you first feel anything? _____
11. How soon after did you first complain to anyone? _____
12. Give the names and addresses of any person(s), who witnessed the accident. _____
13. Did you report to your employer immediately? If not, why not? To whom did you report? _____
14. Did you complete the task at which you were engaged? _____
15. What kind of work did you do after the injury? _____
16. When did you first examine yourself? _____
17. What did you find? _____

18. Did you ever suffer from a hernia before, wear a truss or have an operation? Give particulars. _____

19. What is your age, height, weight? _____

20. Do you wish to be operated upon? _____ or wear a truss? _____

Signed this _____ day of _____ 19_____

Workman's Signature

Address: _____

