

The InPractice Playbook

for Defense Attorneys

60 Case Chat prompts across every stage of the defense case lifecycle, from retention to resolution.

GETTING STARTED

How to Use This Playbook

InPractice Case Chat is built for legal professionals working with medical records. For defense attorneys, that means going on offense with the plaintiff's own records. Every prompt in this guide is designed to be used directly inside Case Chat, with the plaintiff's medical file already uploaded.

This playbook organizes 60 prompts across six stages of the defense case lifecycle. Whether you need to surface pre-existing conditions, draft a deposition outline, challenge a causation opinion, or build a mediation narrative, Case Chat generates work product in seconds.

Simply copy any prompt, paste it into Case Chat with the plaintiff's records uploaded, and let InPractice do the heavy lifting.

THE SIX STAGES

01 Retention & Initial
Case Assessment

02 Medical Record
Review &
Investigation

03 Discovery &
Depositions

04 Expert & IME Strategy

05 Dispositive Motions &
Pre-Trial

06 Trial Prep &
Resolution

01

STAGE 01

Retention & Initial Case Assessment

You've just been retained. Get up to speed fast and assess exposure.

- 01** Summarize the plaintiff's claimed injuries based on the medical records in this file and give me a quick read on the strength of their damages narrative.
- 02** Are there any pre-existing conditions documented in these records that predate the alleged incident?
- 03** What is the earliest date of treatment in this file, and does it support or undermine the plaintiff's claimed mechanism of injury?
- 04** Based on the records, what is the gap between the date of the incident and the plaintiff's first medical visit, and how significant is that gap?
- 05** Identify any treating providers in this file who have documented opinions on causation, and summarize what they say.
- 06** What are the most significant red flags in these medical records from a defense standpoint?
- 07** Based on the records, what is our initial exposure assessment, soft tissue only, surgical, catastrophic?
- 08** Are there any inconsistencies between the plaintiff's reported symptoms and the objective findings documented in these records?
- 09** Summarize the diagnostic imaging results in this file. Do the objective findings support the severity of the claimed injuries?
- 10** Draft a retention memo summarizing the plaintiff's claimed injuries, key medical providers, and initial defense observations based on the records in this file.

02

STAGE 02

Medical Record Review & Investigation

Building the defense medical narrative by dissecting the plaintiff's records.

- 01** Identify every treating provider in this file and summarize what each one documented about causation, diagnosis, and prognosis.
- 02** Are there any gaps in treatment, periods where the plaintiff went more than 30 days without care, and where do they appear in the timeline?
- 03** Pull all references to pre-existing conditions, prior injuries, or prior treatment from any provider in this file.
- 04** Are there any inconsistencies across providers, conflicting diagnoses, contradictory symptom reports, or unexplained changes in treatment direction?
- 05** What medications were prescribed in this file, and do they align with the documented diagnoses and severity of the claimed injuries?
- 06** Identify any records in this file where the plaintiff reported improvement, resolution of symptoms, or discharge from care.
- 07** Are there any records missing from this file that are referenced by treating providers but not included?
- 08** Summarize the plaintiff's reported subjective complaints across all providers and flag any inconsistencies in how symptoms were reported over time.
- 09** Based on the records, what portions of the plaintiff's treatment appear unrelated to the alleged incident?
- 10** Draft a medical record summary memo organized by provider, documenting the key findings, red flags, and defense opportunities in each record set.

03

STAGE 03

Discovery & Depositions

Using the medical records to drive discovery strategy and deposition preparation.

- 01** Based on the medical records, who are the most important witnesses to depose and why?
- 02** What deposition questions should I ask the plaintiff based on the gaps, inconsistencies, and pre-existing conditions documented in these records?
- 03** Draft a deposition outline for the plaintiff's primary treating physician focused on challenging their causation opinion.
- 04** What records or authorizations should we request in discovery based on what's referenced but missing from this file?
- 05** Based on the treatment records, what deposition questions would best expose gaps in the plaintiff's damages narrative?
- 06** Are there any treating providers in this file whose records suggest they may be a favorable witness for the defense?
- 07** What prior medical history is referenced in these records that we should be subpoenaing from other providers?
- 08** Draft a deposition outline for the plaintiff's orthopedic surgeon focused on objective findings versus subjective complaints.
- 09** Based on the records, what inconsistencies between providers should we confront the plaintiff with at deposition?
- 10** Summarize the top five medical record findings we should use to challenge the plaintiff's credibility at deposition.

04

STAGE 04

Expert & IME Strategy

Using an IME and defense experts to counter the plaintiff's medical narrative.

- 01** Based on the treating records in this file, what are the strongest arguments for an IME physician to challenge causation?
- 02** Summarize the plaintiff's treating physicians' causation opinions and identify the weakest points in their reasoning.
- 03** What specific findings or lack of findings in the diagnostic imaging should our IME physician address?
- 04** Based on the records, what pre-existing conditions or degenerative findings should our IME physician highlight?
- 05** Draft a referral letter to our IME physician summarizing the plaintiff's claimed injuries and the key issues we need them to address.
- 06** Are there any treatment decisions in this file that appear excessive, unnecessary, or inconsistent with the documented findings?
- 07** Based on the records, what would a reasonable course of treatment for these injuries look like, and how does the plaintiff's actual treatment compare?
- 08** Summarize the gaps between the plaintiff's subjective complaints and the objective clinical findings across all providers in this file.
- 09** What questions should we instruct our IME physician to answer in their report based on the treating records?
- 10** After receiving the IME report, compare its findings to the treating physicians' opinions and summarize every point of conflict.

05

STAGE 05

Dispositive Motions & Pre-Trial

Using record weaknesses to narrow damages, support motions, and prepare for trial.

- 01** Based on the medical records, what portions of the plaintiff's claimed damages are most vulnerable to a motion to exclude or limit?
- 02** Are there any treating provider opinions in this file that lack foundation or rely solely on the plaintiff's subjective history?
- 03** Summarize the medical record support, or lack thereof, for the plaintiff's claimed future medical expenses.
- 04** Based on the records, what treatment costs appear attributable to pre-existing conditions rather than the alleged incident?
- 05** Draft a summary of the medical evidence we intend to challenge at trial and the basis for each challenge.
- 06** Identify any provider in this file whose records could support a motion to exclude their causation opinion under Daubert or similar standards.
- 07** What does the record show about the plaintiff's ability to work, and does it support or undermine their lost wage claim?
- 08** Based on the records, what is a reasonable defense valuation of the plaintiff's medical damages and why?
- 09** Summarize the pre-existing condition evidence in this file in a format suitable for use in a motion in limine.
- 10** Draft a pre-trial medical summary memo outlining our defense narrative on causation, damages, and credibility.

06

STAGE 06

Trial Prep & Resolution

Mediation, settlement evaluation, or trial preparation.

- 01** Draft a confidential mediation statement based on the medical records in this file. Lead with the causation challenges and close with our damages valuation.
- 02** Generate a complete medical chronology from the plaintiff's records that we can use to cross-examine at trial.
- 03** Based on the records, what is the strongest version of our defense narrative on causation and damages for a jury?
- 04** Summarize the top three medical record arguments we should lead with at mediation to drive down settlement value.
- 05** Draft a cross-examination outline for the plaintiff's primary treating physician based on their records and documented opinions.
- 06** Based on the IME report and treating records, summarize the key conflicts a jury would need to resolve on the medical issues.
- 07** What is the single weakest point in the plaintiff's medical damages case based on everything in this file?
- 08** Draft a closing argument outline for the defense on the medical damages portion of the case.
- 09** Summarize the full medical record in two paragraphs as if presenting our position to a mediator. Lead with causation, close with damages.
- 10** Based on everything in this file, what is our recommended settlement range and what medical record findings support that number?



Medical record reviews in minutes.

Upload your case records, open Case Chat, and put these 60 prompts to work. InPractice delivers summaries and chronologies grounded in the record — fast.

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