PRIMARY CARRIER COMPANY CODE 04160

(FLORIDA CERTIFICATE OF AUTHORITY NUMBER)

9400969

COMPANY NAME FLORIDA PHYSICIANS INSURANCE RECIPROCAL POLICY NUMBER 8301 - 12712

EXCESS CARRIER COMPANY CODE

(FLORIDA CERTIFICATE OF AUTHORITY NUMBER)

COMPANY NAME POLICY NUMBER

CALENDER YEAR CLAIM CLOSED 84

INSURED ROTSTEIN.M.D./JACK ADDRESS 1236 MASON

COUNTY CODE 08

- (1) SURGERY CODE: 19 SPECIALITY: PSYCHIATRY INCLUDING CHILD CODE: 1
- (2) DATE OF INCIDENT: 03/21/83
- (3) DATE SUBMITTED FOR MEDIATION: N/A
- (4) DISPOSITION OF MEDIATION: N/A
- (5) DATE OF SUIT: N ON E

(9) DIRECTED VERDICT (1)

- DISPOSITION OF INCIDENT (CHECK ONE): (6)
 - (1) FINAL JUDGEMENT (2) SETTLEMENT FINAL DISPOSITION NOT RESULTING IN PAYMENT ON BEHALF OF THE INSURED
- DATE AND AMOUNT OF JUDGEMENT OR SETTLEMENT:
 - A. PRIMARY INDEMNITY \$.00 C. EXCESS INDEMNITY N / A R. PRIMARY DEFENSE \$453.7 D. EXCESS DEFENSE N / A
- (3) SUMMARY JUDGEMENT (1) FOR PLAINTIFF (2) FOR DEFENDENT
- YES (2) X ND (10) TRIAL (1)
- (11) DATE AND REASON FOR FINAL DISPOSITON, IF NO SETTLEMENT OR JUDGEMENT : 08/09/84

PATIENT ADMITTED BY DR. GILLESPY FOR PERF OF A MYELOGRAM. AFTER MYELOGRAM WAS DONE PATIENT STARTING ACTING FUNNY SO INSURED WAS CALLED IN ON CONSULT. BEFORE INSURED GOT TO PATIENTS ROOM SHE STARTED HAVING A SEIZURE. SEIZURE WAS STOPPED BUT PATIENT NEVER WOKE UP. INSURED EXAMINED PATIENT. IT WAS REVELAED PATIENT HAD LOW SODIUM WHICH PROBABLY CAUSED SEIZURE. BLOOD SAMPLES TAKEN REVEALING PATIENT HAD HERPES. PATIENT YET TO WAKE UP.

FORM NO. DI4-303 PAGE 1 - AMENDED (2-84) PREPARED BY

FOR PLAINTIFF (2) FOR DEFENDENT