

Travelers

771184

FINAL DISPOSITION OF MALPRACTICE CLAIM  
(To be completed on all medical malpractice claims)

(Please type)

FILE NUMBER: 486 IR J84 9885 N

INSURED: Wilson C. Rippey MD Tampa, Fl.

INSURED'S SPECIALTY: Psychiatry

DATE OF OCCURRENCE: 7-23-73

IF SUIT, DATE FILED: 3-12-76

DATE AND AMOUNT OF PAID JUDGMENT: None

DATE AND AMOUNT OF SETTLEMENT: None

PAID ALLOCATED LOSS ADJUSTMENT EXPENSE \$8168.65

IF OTHER THAN JUDGMENT OR SETTLEMENT,  
DATE AND REASON FOR FINAL DISPOSITION:

SUMMARY OF FACTS WHICH CREATED THE CLAIM:

Insured treated plaintiff for mental disorder. It was alleged that the insured improperly used four way restraints on plaintiff and gave improper medication

A summary judgement for the defense was granted.