

PRIMARY CARRIER
COMPANY CODE 04160 (FLORIDA CERTIFICATE OF AUTHORITY NUMBER)

COMPANY NAME FLORIDA PHYSICIANS INSURANCE RECIPROCAL
POLICY NUMBER 8401 - 14444

EXCESS CARRIER
COMPANY CODE (FLORIDA CERTIFICATE OF AUTHORITY NUMBER)

COMPANY NAME
POLICY NUMBER

CALENDER YEAR CLAIM CLOSED 84

INSURED GONZALEZ-CARBO, M.D./RAFAEL
ADDRESS 715 SOUTHWEST 59TH AVENUE COUNTY CODE 01

- (1) SURGERY CODE: 19 SPECIALITY: PSYCHIATRY - INCLUDING CHILD - CODE: 1
- (2) DATE OF INCIDENT: 02/17/84
- (3) DATE SUBMITTED FOR MEDIATION: N / A
- (4) DISPOSITION OF MEDIATION: N / A
- (5) DATE OF SUIT: NONE
- (6) DISPOSITION OF INCIDENT (CHECK ONE):
 (1) FINAL JUDGEMENT (2) SETTLEMENT
 (3) FINAL DISPOSITION NOT RESULTING IN PAYMENT ON BEHALF OF THE INSURED
- (7) DATE AND AMOUNT OF JUDGEMENT OR SETTLEMENT:
 A. PRIMARY INDEMNITY \$.00 C. EXCESS INDEMNITY N / A
 B. PRIMARY DEFENSE \$.00 D. EXCESS DEFENSE N / A
- (8) SUMMARY JUDGEMENT (1) FOR PLAINTIFF (2) FOR DEFENDENT
- (9) DIRECTED VERDICT (1) FOR PLAINTIFF (2) FOR DEFENDENT
- (10) TRIAL (1) YES (2) X NO
- (11) DATE AND REASON FOR FINAL DISPOSITION, IF NO SETTLEMENT OR JUDGEMENT :
 06/05/84
 N/C

INSURED HAS BEEN TREATING PATIENT SINCE 1970 FOR PSYCHOTIC DEPRESSION WHICH REQUIRED SHOCK THERAPY APPROXIMATELY A YEAR AGO. PATIENT WAS HAVING MANY PERSONAL PROBLEMS AND DAUGHTER CAME FROM PUERTO RICO AND TOOK HER BACK WITH HER. AN INTERNIST THERE ASSUMED PATIENT'S CARE AND SPOKE TO INSURED ABOUT CASE. NOW AN ATTY IS REQUESTING RECORDS AND INSURED FEELS LITIGATION WILL OCCUR FOR POSSIBLE MATERIAL GAIN.

PREPARED BY 