

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

COMPANY NAME FLORIDA PHYSICIANS INSURANCE RECIPROCAL
POLICY NUMBER 8301 - 09109

EXCESS CARRIER
COMPANY CODE (FLORIDA CERTIFICATE OF AUTHORITY NUMBER)

COMPANY NAME
POLICY NUMBER

CALENDER YEAR CLAIM CLOSED 84

INSURED BERNSTEIN, M.D./STUART P.
ADDRESS 80 BONNIE LOCH COURT

COUNTY CODE 07

(1) SURGERY CODE: 19 SPECIALITY: PSYCHIATRY - INCLUDING CHILD - CODE: 1

(2) DATE OF INCIDENT: 11/30/83

(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 :
01/27/84

N/C

PT WAS SEEN BY INSD FOR DEPRESSION & DRUG ABUSE. PT WAS HOSPITALIZED 1-83 FOR A DRUG OVERDOSE. PT WAS LAST SEEN BY INSD 7-82 & WAS TRANSFERRED TO THE CARE OF DR. TOM FISHER. ON 6-16-83, PT TALKED OF SUICIDE WITH DR. FISHER AND BROUGHT A GUN WITH HER. ON 6-18-83 PT SHOT HERSELF. NOW ATTY HAS BEEN CHECKING AROUND TO SEE WHY PT WAS NOT ON ANY MEDICATIONS(MOOD ELEVATORS).