

Florida Office of Insurance Regulation Medical Malpractice Closed Claims Report

Department File Number :	M200643620
Claim Number :	551 01 833877
Date Submitted :	12/21/2006

Insurer Information

Insurer Name		Coverage Type	
CHICAGO INSURANCE COMPANY		Primary	
Insurer FEIN	Professional License Number		
36-6042949			
Insurer Contact Information			
Type	First Name	MI	Last Name
Individual	Ruby		Thompson
Street Address			
33 West Monroe			
City		State	Zip
Chicago		IL	60603
Phone	Ext	Fax	E-Mail Address
(312) 456 - 5227		(312) 577 - 9507	rthomps2@ffic.com

Insured Information

Type	First Name	MI	Last Name
Individual	Mark		Agresti
Insurer Type	Street Address of Practice		
Licensed	2151 45th Street, Suite 207		
City	State	Zip Code	County
West Palm Beach	FL	33407	Palm Beach
Policy Number	Per Claim Policy Limits		Aggregate Policy Limits
PSP 300982	\$1,000,000		\$3,000,000
Profession or Business		Other Profession or Business	
Medical Doctor			
License Number	Specialty Code & Classification		Certification Number
ME60460	Psychiatry - All Other		

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Injured Person Information			
First Name	MI	Last Name	Date of Birth
Street Address		Gender	County where Injury Occurred
City		M	Palm Beach
		State	Zip Code
Location where injury occurred		Other location where injury occurred	
Physician's Office			
Name of Institution		Code	
Location of Institutional Injury		Other Location of Institutional Injury	
Other		doctor's office	
Date of Occurrence		Date Reported to Insurer	
2/8/2001		10/7/2002	

Diagnostic Information
<p>Final Diagnosis For Which Treatment Was Sought Including Patient's Actual Condition Patient sought treatment for hallucinations</p> <p>Operation, Diagnostic, Or Treatment Procedure Rendered Causing The Injury Patient informed insured that he had taken Risperdal in the past and insured continued the prescription, patient complained that he did not like the way the drug made him feel so the insured changed prescription to Zoloft.</p> <p>Diagnostic Code : 340</p> <p>Misdiagnosis Made, If Any, Of Patient's Actual Condition *NR</p> <p>Principal Injury Giving Rise To The Claim Patient died. Cause of death was listed as Acute Heroin toxicity. However the forensic investigator noted in his report that the patient's mother was convinced that the patient had committed suicide because he could no longer take the symptoms associated with tardive dyskinesia(neurological syndrome caused by the long term use of neuroleptic drugs). Plaintiff alleges insured improperly prescribed Risperdal.</p> <p>Severity Of Injury Permanent: Death.</p>

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Legal Information	
Date of Suit	Circuit Court Case Number
10/16/2003	2003CA011108
County Suit Filed in	Date of Final Disposition
Palm Beach	12/18/2006
Other Defendants Involved in this Claim	
Thys, Serge Columbia Hospital	
Stage of Legal System at which Settlement was Reached or Award Made	
More than 90 days, after suit filed and prior to or during the course of mandatory settlement conference.	
Final Method of Claim Disposition	
No Payment Made	
Court Decision	Other
Other	dismissed with prejudice
Arbitration	
Claim not subject to Arbitration.	
Date of Payment	

Financial Information	
Was there a settlement Resulting in payment to the Plaintiff?	No
Indemnity Paid by Insurer on behalf of Insured	\$0
Loss Adjust Expense Paid to Defense Counsel	\$21,218
All Other Loss Adjustment Expense Paid	\$10,791
Injured Person's Total Non-Economic Loss	\$0
Deductible	\$0
<u>Injured Person's Total Economic Loss</u>	
	<u>Incurred to Date</u>
Medical Expense	\$0
Wage Loss	\$0
Other Expenses	\$0
Safety Management Steps Taken by Insured to Make Similar Occurrence Less Likely	
none	

Updates
No updates found.