



Argonaut Insurance Company

9200 S. Dadeland Blvd., Suite 400, Miami, Florida 33156

88

File # 83 M 004779

Primary Carrier ARGONAUT INSURANCE COMPANY

Policy Number GL-83-294-600916

Excess Carrier UNKNOWN

Policy Number UNKNOWN

Insured CHARLES DUGGAN, M.D.

Address 2600 BROADWAY, WEST PALM BEACH, FL 33407

Specialty DERMATOLOGIST

Date of incident 11-13-73

Date of Suit NONE

MEDICAL MEDIATION PANEL 05-26-76

Disposition of incident:

Date CLOSED 02-09-77

Settlement \$ Ø

Defense Cost \$ 1,997.75

Summary Judgement N/A

Directed Verdict N/A

Let out by the jury N/A

Reason for final disposition, if no settlement.

CASE WAS IN MEDIATION - NOT RE-FILED IN CURCUIT COURT. CASE CLOSED WITHOUT PAYMENT.

Summary of occurrence which created claim.

INSURED PERFORMED SURGICAL REMOVAL OF KELOID SCARS FORM CLMNTS STERNUM. SUIT ALLEGES HE AGGRAVATED CONDITION.