

9101

MALPRACTICE REPORT

INSR: Sebastian, T.
ADDRESS: Tallahassee, Fla
SPECIALTY: MD (Hosp)
POLICY #: 711-62-58-001

D/L: 3/23/76

DATE SUIT FILED: —

DATE OF SETTLEMENT 4/15/78

AMT: \$

EXPENSE: \$500.00

DATE CLOSED 4/15/78

SUMMARY OF OCCURENCE Claimant committed suicide next day
after visit to insured.

Clmt: Conrad Odom