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# Florida Office of Insurance Regulation Medical Malpractice Closed Claims Report

Department File Number: M201887193
Claim Number: 4118688580US
Date Submitted: 12/5/2018

**Insurer Information** 

Insurer Name Coverage Type

NATIONAL UNION FIRE INSURANCE CO. OF PITTSBURGH, PA

Primary

Insurer FEIN Professional License Number

25-0687550

**Insurer Contact Information** 

TypeFirst NameMILast NameIndividualcarolynrewell

**Street Address** 

17200 W 119th St

City State Zip
Olathe KS 66061

Phone Ext Fax E-Mail Address

(913) 495 - 4217 carolynranee.ewell@aig.com

**Insured Information** 

TypeFirst NameMILast NameIndividualJohnLieurance

Insurer TypeStreet Address of PracticeLicensed2033 Wood Street #210

CityStateZip CodeCountySarasotaFL34237Sarasota

Policy Number Per Claim Policy Limits Aggregate Policy Limits

019510307 \$100,000 \$300,000

Profession or Business Other Profession or Business

Chiropractic Physician

License Number Specialty Code & Classification Certification Number

CH7524 Surgery - General

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**Injured Person Information** 

First Name MI Last Name Date of Birth

Street Address Gender County where Injury Occurred

F Sarasota
State Zip Code

Location where injury occured Other location where injury occured

Physician's Office

City

**Name of Institution** Code N/A 000000

Location of Institutional Injury Other Location of Institutional Injury

Other Advanced Rejuvenation

Date of Occurrence Date Reported to Insurer

7/1/2016 5/18/2018

#### **Diagnostic Information**

### Final Diagnosis For Which Treatment Was Sought Including Patient's Actual Condition

45 yrs. old, Female, Lawsuit alleging negligent care, treatment and services injuring right hand and pinky finger.

### Operation, Diagnostic, Or Treatment Procedure Rendered Causing The Injury

Chiropractic treatment injured her right hand causing numbness.

#### Diagnostic Code:

### Misdiagnosis Made, If Any, Of Patient's Actual Condition

Plaintiff was told the complication was scleroderma.

#### Principal Injury Giving Rise To The Claim

45 yrs. old, Female, Lawsuit alleging negligent care, treatment and services injuring right hand and pinky finger.

### **Severity Of Injury**

Temporary: Minor - Infections, misset fracture, fall in hospital. Recovery delayed.

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### Florida Office of Insurance Regulation Medical Malpractice Closed Claims Report

Legal Information

Date of Suit Circuit Court Case Number

\*NR

County Suit Filed in Date of Final Disposition

\*NR 12/4/2018

Other Defendants Involved in this Claim

Stage of Legal System at which Settlement was Reached or Award Made

Within the pre-suit period as set forth in 766.106 (more than 90 days before suit is filed).

**Final Method of Claim Disposition** 

Settled by parties

Court Decision Other

No Court Proceedings.

Arbitration

Claim not subject to Arbitration.

**Date of Payment** 

12/5/2018

Financial Information

Was there a settlement Resulting in payment to the Plaintiff?YesIndemnity Paid by Insurer on behalf of Insured\$50,000

Loss Adjust Expense Paid to Defense Counsel \$11,789

All Other Loss Adjustment Expense Paid

Injured Person's Total Non-Economic Loss

\$0

Deductible \$0

Injured Person's Total Economic Loss

<u>Incurred to Date</u> <u>Anticipated</u>

 Medical Expense
 \$0
 \$0

 Wage Loss
 \$0
 \$0

 Other Expenses
 \$0
 \$0

Safety Management Steps Taken by Insured to Make Similar Occurrence Less Likely

N/A

**Updates** 

No updates found.