

**SUPPLEMENTAL CLAIMS INFORMATION**

**If reporting more than one claim, please photocopy this form, and complete a separate form for each. Attach additional sheets if needed for adequate explanation. All questions must be answered or marked Not Applicable (N/A).**

- 1. Patient's name: \_\_\_\_\_
- 2. Date reported to insurance company: \_\_\_\_\_
- 3. Name of Insurance Company: \_\_\_\_\_
- 4. Date of incident and your treatment: \_\_\_\_\_
- 5. Allegations: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. What is the present condition of the patient? \_\_\_\_\_  
\_\_\_\_\_

7. Did you in any way alter, embellish, delete, change, and/or destroy any records, medical or otherwise, or were allegations made that you did so, pertaining to this claim? ..... YES NO

8. Status of claim (check applicable answer):

- Suit threatened, no action taken
- Suit filed but dropped by claimant
- Summary judgment in your favor
  
- Suit settled out of court
  - a. Date claim paid: \_\_\_\_\_
  - b. Amount paid: \$ \_\_\_\_\_
  - c. Did you want to settle this claim?  YES  NO

- Court outcome in your favor:
  - Jury verdict
  - Directed verdict
  
- Court outcome in favor of plaintiff:
  - Jury verdict
  - Directed verdict
- Amt. of loss payment:  
\$ \_\_\_\_\_

- Unresolved/Open Claim:
  - Awaiting mediation
  - Awaiting court action
  
- Reserve Amount:  
\$ \_\_\_\_\_

9. Name and address of the attorney assigned to your case: \_\_\_\_\_  
\_\_\_\_\_

10. To your knowledge, was any settlement paid by another party involved (i.e., your P.A., P.C., partners, employees, etc.)? ..... YES NO

If "yes", amount was \$ \_\_\_\_\_

11. Explain, in detail, what action(s) you have taken to prevent recurrence of this type of claim: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Name (Printed):** \_\_\_\_\_

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- Court outcome in your favor:
- Jury verdict
  - Directed verdict

- Court outcome in favor of plaintiff:
- Jury verdict
  - Directed verdict
- Amt. of loss payment:  
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- Unresolved/Open Claim:
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Reserve Amount:  
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- Jury verdict
  - Directed verdict

- Court outcome in favor of plaintiff:
- Jury verdict
  - Directed verdict
- Amt. of loss payment:  
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