



FELLOWS, AMERICAN COLLEGE OF OBSTETRICIANS AND GYNECOLOGISTS DIPLOMATES, AMERICAN BOARD OF OBSTETRICS AND GYNECOLOGY

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Paola Bordoni, D.O.
Dana Homer, M.D.

We are pleased to inform you that this practice is part of the state run program known as NICA, (Neurological Injury Compensation Association).

Notice to obstetrics patient
(See Section 766.316, Florida Statutes)

I have been furnished information by Thomas J. Dimino, M.D., Maria Victoria Lopez-Beecham, M.D., Luis P. Leyva, Jr., M.D., Ilya S. Johnson, M.D., Manal S. Antoun, M.D., Ana R. Hernandez, M.D., Paola Bordoni, D.O., and Dana Homer, M.D. prepared by the Florida Birth-Related Neurological Injury Compensation Association (NICA), and have been advised that Thomas J. Dimino, M.D., Maria Victoria Lopez-Beecham, M.D., Luis P. Leyva, Jr., M.D., Ilya S. Johnson, M.D., Manal S. Antoun, M.D., Ana R. Hernandez, M.D., Paola Bordoni, D.O., and Dana Homer, M.D. are participating physicians in the program, wherein certain limited compensation is available in the event certain neurological injury may occur during labor, delivery or resuscitation. For specific on the program I understand I can contact the Florida Birth-Related Neurological Injury Compensation Association, P.O. Box 14567, Tallahassee Florida 32317-4567, 1-800-398-2129.

I further acknowledge that I have received a copy of the brochure prepared by NICA.

Dated this _____ day of _____, 20____.

Signature of Patient

Attest:

Printed Name of Patient

Physician or Nurse Signature

Social Security No.

Date