

HOURS Monday - Friday 9 am - 5 pm 601 North Flamingo Road # 203 Pembroke Pines, Florida 33028 P. 954. 607.3811 F. 954.885. 2213 http://www.bennyesquenazimd.com info@afemcare.com

RECEIPT OF NOTICE TO OBSTETRIC PATIENT

i have been furnished information in the form of a Brochure prepared by the Florida Birth-Related Neurological Injury Compensation Association (NICA), pursuant to Section 766.316, Florida Statutes, by Benny Esquenazi, M.D. of Advanced Female Care, and have been advised that Dr. Esquenazi is a participating physician in that program, wherein certain limited compensation is available in the event that certain types of qualifying neurological injuries may occur during labor, delivery or resuscitation in a hospital. For specifics on the program, I understand that I can contact the Florida Birth-Related Neurological Injury Compensation Association, PO Box 14567, Tallahassee, Florida 32317-4567 (800) 398-2129.

I specifically acknowledge that I have received a copy of the Brochure prepared by NICA.

DATED this:
Signature of Patient
Printed Name of Patient
Social Security No.
Attested by Staff Member of Office
DATE: