

STATE OF NEW YORK

SUPREME COURT COUNTY OF [Insert County]

[Insert Caption]

NOTICE OF AVAILABILITY

Index No: [Insert]

Plaintiff,

RJI NO.: [Insert]

vs.

Defendants.

SIRS:

PLEASE TAKE NOTICE, that pursuant to the Rules governing physical examinations and exchange of medical information, [Insert Name of Plaintiff], the infant plaintiff in this action, will be available for a physical examination to be held in [Insert County Name] County not less than thirty (30) nor more than sixty (60) days after service of this notice.

PLEASE TAKE FURTHER NOTICE, that pursuant to 22 N.Y.C.R.R. § 202.17, upon your failure to submit to the undersigned the name of your examining physician within five (5) days from the date of service hereof, you shall be deemed to have waived your right to a physical examination.

PLEASE TAKE FURTHER NOTICE, that following said examination, unless a copy of the examining physician's report is forwarded to the undersigned within forty-five (45) days of said examination, you shall be precluded at trial from offering the testimony of said physician.

DATED: [Insert Date]

[Name of Attorney]
[Name of Law Firm]
Attorneys for Plaintiffs
[Address]
[Telephone Number]