

IN THE _____ COURT OF _____ (County),
_____ (State)

(Name of Plaintiff)

PLAINTIFF

V.

CAUSE NO. _____

(Name of Defendants)

DEFENDANTS

COMPLAINT

COMES NOW _____ (Name of Plaintiff), Plaintiff in the above-styled and numbered cause, by and through his attorney, and files this his Complaint against Defendant **[State whether Defendant is in United States or a State (name of state) and give name of prison and whether or not it is a state or federal prison]** _____, hereinafter called **Correctional Institute**, and Defendant _____ (Name of Defendant Nurse), hereinafter called **Nurse**, and in support thereof would show unto the Court the following matters and facts:

I. Plaintiff is an adult resident citizen of _____ (city, county, state), and at all times during the occurrences described below, was an inmate at **Correctional Institute**.

II. Defendant _____ (name of nurse), hereinafter called **Defendant Nurse**, is an adult resident citizen of _____ (city, county, state).

III. At all times mentioned, Defendant, **(the United States of America or State of (Name of State))** _____, operated the Correctional Institute, a _____ (state or federal) prison located at _____ (street address, city, county, state, zip code).

IV. This action arises under the **(either the Federal Tort Claims Act, Sections 2671 through 2680 of Title 28 of the United States Code or the State's Tort Claims act – cite section of State's Code)** _____. This Court is vested with jurisdiction pursuant to **(Section 1346(b) of Title 28 of the United States Code)** _____.

V. On _____ (date of admission), Plaintiff was admitted as a patient to the infirmary of the **Correctional Institute** due to **(describe symptoms or illness)** _____.
_____.

VI. At all times mentioned, **Nurse** was a contract employee working at said infirmary, and was under the direct supervision and control of the **Correctional Institute** regarding her day to day duties.

VII. *Plaintiff* had been prescribed the medication _____
(**name**) for _____
(**reason**) by _____ (**name of physician**) on or about
_____ (**date**). *Plaintiff* was to receive this medication
_____ (**how often**). It was *Nurse's* responsibility and duty to
administer this medication; however she negligently failed to do so.

VIII. As a direct and proximate result of the negligence of **Nurse**, *Plaintiff* suffered
(**describe**) _____
_____.

IX. As a direct and proximate result of the negligence of **Nurse**, *Plaintiff* also
suffered (**describe**) _____
_____.

X. As a further direct and proximate result of the said negligence of **Nurse**, *Plaintiff*
will incur substantial medical and hospital expenses after release from incarceration in a
sum exceeding \$_____.

(If under Federal Tort Claims Act or if State Claims Act so Requires):

XI. On _____ (**date of claim**), *Plaintiff* submitted a claim
of \$ _____ (**dollar amount**) to _____
(**name of federal agency**).

XII. By _____ (**date of pending claim**) the _____
_____ (**name of federal agency**) had neither accepted
nor rejected the claim and, pursuant to 28 U.S.C.A. § 2675(a), *Plaintiff* elects to consider
the failure to act as a final denial of the claim.

WHEREFORE, *Plaintiff* requests judgment against *Defendant*:

1. In the amount of \$_____, as damages;
2. Awarding *Plaintiff* the costs of this action; and
3. Granting *Plaintiff* such other and further relief as the Court deems just and proper.

Respectfully Submitted,

Name of Plaintiff

By: _____
Name of Attorney

Bar No. _____

Of Counsel:

Attorney for *Plaintiff*

Post Office Box _____

(City, State, Zip Code)

Telephone: _____