



### International Medical Liability Indemnity (Insurance) Form

Since 2012, medical liability insurance is required by the Fiji Ministry of Health. The Mission at Natuvu Creek will process your enrollment through International Helpers (Guernsey Trust) and forward fees on your behalf. Enrollment will occur following the submission of documents, above. Please allow 30 days for enrollment and processing. *Only medical practitioners need liability insurance. Students do not need to obtain medical liability insurance.*

**Select Class:**

Class (1)

Physician – No Surgery, Chiropractor, Dentist, Registered Nurse, Nurse Practitioner, Pharmacist, Physician Assistant, Physical Therapist, Dental Hygienist, Various Medical technicians – X-ray, CT, Surgical, etc.

Class (2)

Physician – Minor Surgery, Podiatry, Emergency Medicine, Oral Surgeon, Nurse Anesthetist, Radiation Therapist.

Class 3)

Specialists providing surgical procedures, highly skilled search and rescue, Physician – major surgery, Ophthalmology, Urology, Cardiac Surgery, Otolaryngology, General Surgery, Anesthesiology, Obstetrics-Gynecology, Plastic Surgery, Thoracic Surgery, Vascular Surgery, Orthopedic Surgery, Neurosurgery, and all others.

GROUP NAME OR GROUP LEADER: \_\_\_\_\_

NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_  
Mo /Day / Year

AREA OF PRACTICE: \_\_\_\_\_

LICENSE #: \_\_\_\_\_ LICENSE COUNTRY/STATE: \_\_\_\_\_

DEA#: \_\_\_\_\_

**YES** - I certify that the person on this enrolment is licensed and in good standing with the appropriate licensing authority, and has current Medical Professional Liability in force. I further certify that any retired Practitioners listed on this enrolment had Professional Liability coverage in place at the time of retirement

**Submit this completed form to the Mission at Natuvu Creek via upload link or to [janet@natuvu.org](mailto:janet@natuvu.org)**

**International Helpers (Guernsey) Trust**  
c/o RIL Administrators