

ED Provider Notes**ED Triage Notes by Sara Regan, RN at 12/02/20 1254**

Author: Sara Regan, RN
Filed: 12/02/20 1256
Status: Signed

Service: —
Date of Service: 12/02/20 1254
Editor: Sara Regan, RN (Registered Nurse)

Author Type: Registered Nurse
Creation Time: 12/02/20 1254

Pt presents to ED for a physical screen. Mom reports she is going through a divorce and the father is physically and sexually abusing the pt. DCF and police are involved. Pt has also been seen in Yale for the same,

No travel in the past 30 days
No contact with anyone with s/sx of COVID

Electronically signed by Sara Regan, RN at 12/02/20 1256

ED Provider Notes by Alexis Veith, PA at 12/02/20 1259

Author: Alexis Veith, PA
Filed: 12/03/20 2133
Status: Addendum

Service: —
Date of Service: 12/02/20 1259
Editor: Alexis Veith, PA (Physician Assistant)
Related Notes: Original Note by Alexis Veith, PA (Physician Assistant) filed at 12/02/20 1926
Cosigner: Henry Chicaiza, MD at 12/04/20 0934

Author Type: Physician Assistant
Creation Time: 12/02/20 1259

HISTORY:**Chief Complaint**

Patient presents with

- Physical Screening

Matthew C Ambrose is a 13 y.o. adopted male generally healthy here with ADHD and social anxiety disorder here with Mom and siblings for physical screening. Mom picked up the kids from school yesterday due to safety concerns and was advised by her legal team to bring them to the ED to have everything "redocumented". Kids have been living with Dad for the past 7 months.

Pt attends Polson School in Madison, CT, 8th grade. He likes school. He states he does not have concerns about his body. When asked if anything is hurting or bothering him, he says "not physically no". When asked to explain what he means, he replies "I've just been going through a lot for the past 220 days, that's the time I've been with my Dad". Pt states right now he lives with his Mom, but previously was living with his Dad, sister Mia and younger brother Sawyer. When asked if patient feels safe at home with Dad, he replies no. When asked if he feels safe at home with Mom, he reports yes, denies having concerns about going home with Mom. When he is asked to tell us more about why he does not feel safe with Dad, he explains a few months ago, in September, we went to a different hospital. A DCF worker came to talked to us and "it almost seemed like he didn't listen to us slash didn't really care what we had to say. I know his job is to work with children but the way he worked with us didn't seem like that's how his patients should be treated". Pt explained that he "was saying we would go into foster care and he was joking around with Dad and stuff". Pt denies any type of abuse towards himself from anyone else. He says he is aware that Mia has been touched, "he will grab her thigh and squeeze" and Mia has told him about such as well. He describes witnessing Dad grabbing, hugging, and kissing Sawyer in a way that seems "over excessive" and "a little weird".

Pt screens positive on ASQ screen - He reports having intermittent thoughts of wishing he was Dad over the

Printed on 12/21/20 12:40 PM

ED Provider Notes (continued)

ED Provider Notes by Alexis Veith, PA at 12/02/20 1259 (continued)

past few months. He denies plan and intent, but states "I think my thoughts would get worse if I was told I had to go home with Dad".

Mom reports this has been ongoing for several months now. She has hired a private investigator Manuel Gomez - (347) 867-6242 - who has arrived to ED to see if he can help with any evidence collection. Mom states she and the kids are fearful of Dad and the kids have told her Dad threatens them. Mom reports she has filed with police department, Detective Degoursey with Madison Police Department is assigned to her case. Mom adds that the DCF worker who was assigned to their case knew pt's Dad, and was therefore biased. His name is Thomas Thomas Villanueva, and she is asking that he not be involved in the future.

Past Medical History:

Diagnosis

Date

- Attention deficit hyperactivity disorder (ADHD)
- Social anxiety disorder

History reviewed. No pertinent surgical history.

No family history on file.

Social History

Tobacco Use

- Smoking status:

Not on file

Substance Use Topics

- Alcohol use:
- Drug use:

Not on file

Not on file

Review of Systems

Constitutional: Negative for activity change, chills and fever.

HENT: Negative for congestion and sore throat.

Eyes: Negative for visual disturbance.

Respiratory: Negative for cough and shortness of breath.

Cardiovascular: Negative for chest pain and palpitations.

Gastrointestinal: Negative for abdominal pain.

Genitourinary: Negative for scrotal swelling and testicular pain.

Musculoskeletal: Negative for gait problem and joint swelling.

Skin: Negative for rash and wound.

Allergic/Immunologic: Negative.

Neurological: Negative for dizziness and headaches.

Psychiatric/Behavioral: Positive for dysphoric mood. Negative for self-injury. The patient is nervous/anxious.

All other systems reviewed and are negative.

ED Provider Notes (continued)

ED Provider Notes by Alexis Velth, PA at 12/02/20 1259 (continued)

PHYSICAL EXAM:

BP 128/58 (BP Location: Left arm, Patient Position: Sitting) | Pulse 86 | Temp 37.1 °C (98.8 °F) (Temporal) |
Resp 16 | Ht 157.5 cm (5' 2") | Wt 57.5 kg (126 lb 12.2 oz) | SpO2 100% | BMI 23.19 kg/m²

Physical Exam

Vitals signs and nursing note reviewed. Exam conducted with a chaperone present.

Constitutional:

General: He is not in acute distress.

Appearance: Normal appearance. He is normal weight. He is not ill-appearing or diaphoretic.

HENT:

Head: Normocephalic and atraumatic.

Right Ear: Tympanic membrane, ear canal and external ear normal.

Left Ear: Tympanic membrane, ear canal and external ear normal.

Nose: Nose normal.

Mouth/Throat:

Mouth: Mucous membranes are moist.

Pharynx: Oropharynx is clear.

Eyes:

Extraocular Movements: Extraocular movements intact.

Pupils: Pupils are equal, round, and reactive to light.

Neck:

Musculoskeletal: Normal range of motion and neck supple.

Cardiovascular:

Rate and Rhythm: Normal rate and regular rhythm.

Heart sounds: No murmur.

Pulmonary:

Effort: Pulmonary effort is normal. No respiratory distress.

Breath sounds: Normal breath sounds.

Abdominal:

General: Abdomen is flat. Bowel sounds are normal. There is no distension.

Palpations: Abdomen is soft. There is no mass.

Tenderness: There is no abdominal tenderness.

Genitourinary:

Penis: Normal.

Scrotum/Testes: Normal.

Musculoskeletal: Normal range of motion.

General: No swelling or deformity.

Skin:

General: Skin is warm and dry.

Capillary Refill: Capillary refill takes less than 2 seconds.

Coloration: Skin is not pale.

Findings: No bruising or rash.

Neurological:

General: No focal deficit present.

Mental Status: He is alert and oriented to person, place, and time.

Coordination: Coordination normal.

Gait: Gait normal.

ED Provider Notes (continued)

ED Provider Notes by Alexis Veith, PA at 12/02/20 1259 (continued)

Comments: Cranial Nerves II-XII grossly intact

Psychiatric:

Comments: Well groomed, good eye contact

Normal speech, good insight

Intermittent thoughts of wishing to be dead, worries he will have SI if returned to Dad

Denies HI, AH/VH

No SIB

ED COURSE:

MDM

Number of Diagnoses or Management Options

Encounter for medical screening examination:

Diagnosis management comments: 13 y.o. adopted male generally healthy here with ADHD and social anxiety disorder here with Mom and siblings for physical screening. Pt is endorsing feeling unsafe in Dad's presence, his passive SI and admits he is worried his SI will worsen if he is told to return with Dad. FBSE with chaperone present is unremarkable, no evidence of injury. Pt denies somatic complaints.

I have spent over 60 minutes in discussion with pt, Mom, as well as DCF and SCAN.

Discussed with Sarah Dean, SCAN. Reviewed HPI and normal examination, do not need to ask complete history of family discord. DCF 136 must be filed and review safety plan with DCF. Can offer STI testing for all patients.

Mom denies wanting STI testing, including HIV and syphilis. She states "I don't have concern about penetration".

Filed DCF 136 with Tara Fitch, report faxed to Middletown office. I have requested DCF come to ED tonight to help safety plan and determine disposition and legal matters (as both Mom and Dad have lawyers involved). DCF declined but they will respond within 72 hours and safety plan per DCF is discharge to Mom only, if there is any new concern of risk or safety, Mom and children need to call police/911.

F/u with SCAN:

Tuesday the 15th, 9:30 am
85 seymour street, suite 511
860 837 5890

Currently there is no acute concern for suicide risk, based on what pt is telling us here in ED, if he were to be discharged home. I did tell Mom about the concerns regarding his positive screening, she began to cry and demonstrated understanding of returning to ED if he were to endorse worsening depression or acute SI. Safe for discharge home with Mom and siblings, DCF to follow as well as SCAN

ED Provider Notes (continued)**ED Provider Notes by Alexis Veith, PA at 12/02/20 1259 (continued)**

7:24 PM

Dad calls ED threatening Amber Alert if we don't give him information. Contacted RISK, advised to tell Dad the children were seen here, they have been discharged and therefore I cannot give out further medical information. Per RISK, I have informed Dad the children were examined and medically cleared, but due to descriptions made by children, DCF 136 was filed and per DCF safety plan is home with Mom and DCF will follow within 72 hours. Any further questions or concerns should be directed to DCF and/or local police department. Dad demonstrates understanding.

Alexis Veith, PA
12/02/20 1926

Alexis Veith, PA
12/03/20 2133

Electronically signed by Henry Chicaiza, MD at 12/04/20 0934

All Results

No results found

Discharge Orders (720h ago, onward)

None

ED Prescriptions

None

Follow-up Information

None

Disclaimer

This report is intended to be a summary of relevant information abstracted from the patient's encounter. Additional information may be available upon request by contacting the Health Information Management Department - 860-837-5780

ED Arrival Information

Expected	Arrival	Acuity	Means of Arrival	Escorted By	Service	Admission Type
-	12/3/2020 13:35	Urgent	Car	Foster Parent	Emergency Medicine	Emergency

Chief Complaint

Complaint	Comment
Social Service Issue	

Diagnosis

Diagnosis	Comment
High risk social situation	

Allergies (Review Complete on: 12/03/20)

No Known Allergies

ED Dismissal

Date/Time	Event	User	Comments
12/03/20 1816	Patient discharged	GIL, MONICA	

ED Disposition

ED Disposition	Comment
Discharge	Matthew C Ambrose discharge to home/self care.

Current Medications

Prior to admission medications have not been reviewed during this visit

ED Provider Notes**ED Triage Notes by Karen Cone, RN at 12/03/20 1342**Author: Karen Cone, RN
Filed: 12/03/20 1344
Status: SignedService: —
Date of Service: 12/03/20 1342
Editor: Karen Cone, RN (Registered Nurse)Author Type: Registered Nurse
Creation Time: 12/03/20 1342

Arrives with designated family friend for concern for safety at home. Child seen in ED yesterday for evaluation of physical/emotional abuse. Children were staying with family friend (as directed by DCF last night). Today, bio father called family friend to indicate that he was coming to get the kids. No covid concerns. No travel.

Electronically signed by Karen Cone, RN at 12/03/20 1344

ED Attestation by Michele McKee, MD at 12/03/20 1428Author: Michele McKee, MD
Filed: 12/03/20 1644
Status: SignedService: —
Date of Service: 12/03/20 1428
Editor: Michele McKee, MD (Physician)Author Type: Physician
Creation Time: 12/03/20 1428

I discussed and saw and examined the patient with the npp. I agree with the history, physical exam, medications and plan of care as documented with the following exceptions: see below..

13 yo male, one of three siblings, seen here yesterday and placed with a family friend for a safety plan. We are told the father called this family friend and was threatening while he indicated his plan to go to the house to get his children. Given concerns for the children's safety, they have been brought to our location.

Blood pressure 117/58, pulse 78, temperature 36.7 °C (98.1 °F), temperature source Temporal, resp. rate (!) 18, height 160 cm (5' 2.99"), weight 56.7 kg (125 lb), SpO2 100 %.

MDM**Number of Diagnoses or Management Options**

Diagnosis management comments: Suspected child abuse (verbal)
Behavioral Health Disorder

Risk of Complications, Morbidity, and/or Mortality

Presenting problems: moderate
Management options: moderate

Patient Progress

Patient progress: stable

SW is seeing this patient and the two other siblings for a safety plan/placement. The information we have is that the allegations the mother has made are unfounded and father is en route for placement. Will confirm with SW and DCF an appropriate placement plan for all three siblings.

Electronically signed by Michele McKee, MD at 12/03/20 1644

ED Provider Notes by Sarah C. Orlando, PA at 12/03/20 1453

ED Arrival Information

Expected	Arrival	Acuity	Means of Arrival	Escorted By	Service	Admission Type
-	12/2/2020 12:34	Urgent	Car	Mother	Emergency Medicine	Emergency

Chief Complaint

Complaint	Comment
Physical Screening	

Diagnosis

Diagnosis	Comment
Encounter for medical screening examination	

Allergies (Review Complete on: 12/03/20)

No Known Allergies

ED Dismissal

Date/Time	Event	User	Comments
12/02/20 1718	Patient discharged	BASTEDO, CRYSTAL	

ED Disposition

ED Disposition	Comment
Discharge	Matthew C Ambrose discharge to home/self care.

Current Medications

Prior to admission medications have not been reviewed during this visit

ED Provider Notes (continued)

ED Provider Notes by Sarah C. Orlando, PA at 12/03/20 1453 (continued)

Author: Sarah C. Orlando, PA

Service: —

Author Type: Physician Assistant

Filed: 12/03/20 1654

Date of Service: 12/03/20 1453

Creation Time: 12/03/20 1453

Status: Signed

Editor: Sarah C. Orlando, PA (Physician Assistant)

Cosigner: Michele McKee, MD at 12/03/20 1727

HISTORY:

Chief Complaint

Patient presents with

- Social Service Issue

13 y/o m p/w family friend and siblings c/o social discord. Pt reports that he was in this ED last night. Yesterday was the first day pt had seen his mother since the court placed pt and siblings with father 8 months ago. Pt was brought to this ED yesterday by his mother after making allegations that his father is mean, yells all the time, and touches siblings inappropriately. Pt and siblings were placed by DCF with a family friend (Michelle Pawlina), arrived at 3am today to her home. Michelle reports that this afternoon pt's father started texting her and saying he was coming to her home to pick up his children. Michelle reports she did not know what to do, states the children told her they were instructed to return to the ED if they felt unsafe so she brought them back to this ED. Pt denies medical complaints. Reports he doesn't want to go back with his father, states if he has to return to his father he will try to kill himself. Pt reports he doesn't know what he will do to kill himself "but there's a good chance I'll do it."

Wish to be Dead (Past Month): yes

Suicidal Thoughts (Past Month): yes

Suicidal Thoughts with Method (without Specific Plan or Intent to Act) (Past Month): no

Suicidal Intent (without Specific Plan) (Past Month): no

Suicide Intent with Specific Plan (Past Month): no

Suicide Behavior (Past Month): no

Past Medical History:

Diagnosis

Date

- Attention deficit hyperactivity disorder (ADHD)
- Social anxiety disorder

No past surgical history on file.

No family history on file.

Social History

Tobacco Use

- Smoking status:

Not on file

Substance Use Topics

- Alcohol use:

Not on file

- Drug use:

Not on file

Printed on 12/21/20 12:40 PM

ED Provider Notes (continued)

ED Provider Notes by Sarah C. Orlando, PA at 12/03/20 1453 (continued)

Review of Systems

Constitutional: Negative for activity change, appetite change, chills and fever.

HENT: Negative for congestion, ear pain, rhinorrhea and sore throat.

Respiratory: Negative for cough, shortness of breath and wheezing.

Cardiovascular: Negative for chest pain.

Gastrointestinal: Negative for abdominal pain, diarrhea and vomiting.

Musculoskeletal: Negative for back pain.

Skin: Negative for rash.

Neurological: Negative for dizziness and headaches.

PHYSICAL EXAM:

BP 117/58 (BP Location: Right arm, Patient Position: Sitting) | Pulse 78 | Temp 36.7 °C (98.1 °F) (Temporal) |
Resp (!) 18 | Ht 160 cm (5' 2.99") | Wt 56.7 kg (125 lb) | SpO2 100% | BMI 22.15 kg/m²

Physical Exam

Vitals signs and nursing note reviewed.

Constitutional:

General: He is not in acute distress.

Appearance: Normal appearance. He is not toxic-appearing or diaphoretic.

HENT:

Head: Normocephalic and atraumatic.

Nose: Nose normal. No congestion or rhinorrhea.

Mouth/Throat:

Mouth: Mucous membranes are moist.

Eyes:

Conjunctiva/sclera: Conjunctivae normal.

Neck:

Musculoskeletal: Normal range of motion and neck supple. No muscular tenderness.

Pulmonary:

Effort: Pulmonary effort is normal.

Musculoskeletal: Normal range of motion.

Skin:

General: Skin is warm.

Findings: No rash.

Neurological:

General: No focal deficit present.

Mental Status: He is alert and oriented to person, place, and time.

ED COURSE:

ED Provider Notes (continued)

ED Provider Notes by Sarah C. Orlando, PA at 12/03/20 1453 (continued)

MDM

Number of Diagnoses or Management Options

Diagnosis management comments: 13 y/o with complex family discord including allegations of abuse. Pt has been living with her father for months with limited contact by mother. Pt seen yesterday in this ED due to allegations, pt was placed by DCF with a family friend. Phone call from DCF caseworker Stacey Faulk. Per Stacey, bio mom has made repeated allegations regarding sexual abuse of children by their bio father, these have been investigated by DCF and found to be unsubstantiated. Pt and siblings have a guardian-ad-litem who met with the judge yesterday and again today. Stacey reports pt and siblings are to be returned to their father today per the judge's order. Pt and siblings are all reporting that they will kill themselves if they have to go with their father. Plan for social work eval. No medical complaints at this time. medically cleared.

Sarah C. Orlando, PA
12/03/20 1654

Electronically signed by Michele McKee, MD at 12/03/20 1727

Consult Notewriter Note by Samantha Burgos, LCSW at 12/03/20 1816

Author: Samantha Burgos, LCSW
Filed: 12/03/20 1830
Status: Signed

Service: Case Management
Date of Service: 12/03/20 1816
Editor: Samantha Burgos, LCSW (Family Support Clinician)

Author Type: Family Support Clinician
Creation Time: 12/03/20 1827

TW spoke to DCF Worker Stacey Faulk at 203-537-4379 who reported dad has sole legal and physical custody of the children. Stacey reports today a judge court ordered kids to "immediately" return to father by the end of the night after a dispute that occurred last night. Children were taken by the mother and brought to a hotel room which father was not aware of. Police department was involved and kids a 136 was filed due to alleged sexual abuse made by Sawyer and his older sister against father. DCF became involved and pt was sent with family friend (Michelle) for the night. Children received a text stating father was coming to pick them up and then began to state "they did not feel safe and asked to be sent to the ED" Upon arrival pt's reporting they wanted to harm them self's and would "kill them selves if they had to return to father's home".

Provided SSW consult as requested by APP Sarah Orlando. Interviewed Sawyer separately from his siblings. Matthew reports "dad is sexually abusing Sawyer and touching Mia. Matthew reports he "has seen dad squeezing pt's inner thigh but has not seen dad touch Sawyer". He reports "Sawyer told me but didn't tell me how". When asked when the events occurred pt stated recently but could not recall date/time or details of the mentioned incident. Matthew denied being touched inappropriately by father. Pt reporting he see's Dr. Bill Horn for therapy. Pt reported he did tell his DCF worker as well. Pt reporting more negative feelings towards father and wanting to live with his mother. Pt reported he did make a suicidal statement but denies any plan. Pt reporting intent a 3/4 out of 10. Pt denying he would hurt his self upon return to father's home and understood the court ordered pt and his siblings to return home. Pt reporting "he misses mom" and is "fearful of dad's reaction to today's event". Pt able to contract for safety at this time and is in agreement with going home. Pt reporting no HI/SIB/AH/VH.

ED Provider Notes (continued)

Consult Notewriter Note by Samantha Burgos, LCSW at 12/03/20 1816 (continued)

Consulted with APP Sarah Orlando who agreed to discharge pt's home to father with EMPS follow up. Children to continue with OP therapy.

Father arrived to ED and expressed concerns and frustrations with pt and her siblings. Father gave paperwork to show case he has sole legal and physical custody as ordered by the court and GAL. Father reporting a similar event occurring in 09/2020 at YALE with similar accusations in which kids were discharged to him as well. Discussed with father children's report and concern with pt's mental health. Discussed pt's did not need a higher level of care however, needing to continue OP therapy. Father in agreement and TW offered EMPS follow up to the home. Father was receptive.

Electronically signed by Samantha Burgos, LCSW at 12/03/20 1830

All Results

No results found

Discharge Orders (720h ago, onward)

None

ED Prescriptions

None

Follow-up Information

Follow up With
Jonathan Sollinger,
MD

Specialties

Details

Why

Contact Info
1563 POST RD,
EAST
Westport CT 06880
203-319-3939

Disclaimer

This report is intended to be a summary of relevant information abstracted from the patient's encounter. Additional information may be available upon request by contacting the Health Information Management Department - 860-837-5780

END OF REPORT