

GENTLE TOUCH MEDICAL PC

9708 Seaview Ave., Brooklyn, NY 11236
Tel: (347) 702 - 5161 Fax: (718) 444 - 1898

Encounter Physician: Rimma Pozdnyakova, MD

Encounter Date: 03/02/2013

Patient Name: Ms. Margaret Malek **DOB:** 10/29/2014 **Age:** 3 Year(s) **Sex:** Female
Birth weight: Born by the CS secondary to the breech presentation.
Chief Complaint: well visit

HISTORY OF PRESENT ILLNESS: • **Well Visit:** no complaints. Child is doing well. Wants to give vaccination in the gluteal area.

MEDICAL, SOCIAL & FAMILY HISTORY:

Past Medical History: Denies chronic medical problems or chronic diseases.

Past Surgical History:

Family Medical History: Non-contributory.

Social/ Family Situation: Stays home with the mother.

Nutrition/ Diet: Eating balanced diet, no food allergies.

Elimination: soft stool daily, no constipation.

Sleep: Gets at least 10 hours of sleep daily.

Poisoning/ Toxic exposure: Denies second hand smoking, no history of the elevated Lead level or exposure to lead.

DEVELOPMENTAL ASSESSMENT:

Fine Motor Milestones: Builds a tower of 6 cubes. Washes and dries hands. Kicks a ball.

Gross Motor Milestones: Begins to run. Throws and kicks a ball. Able to stand on tiptoes.

Cognitive Milestones: Finds things even when hidden under 2 or 3 covers. Begins to sort shapes and colors.

Completes sentences and rhymes in familiar books. Plays simple make-believe games.

Social/ Emotional Milestones: Imitates others, especially adults and older children. Parallel play with other children.

Shows more and more independence. Shows defiant behavior, doing what adult says not to do. Has the child made eye

contact Does the child point on something or pay attention when you point on something Give child small cup make him

pretend he/she drink from it Can the child build a tower of briks

Language/ Communication Milestones: PROVIDER DO CHAT SCREEN Has the child made eye contact with the

examiner Get child response when you point on the object in the room Imaginary play participation,like drinking from

from the cup. Pointing to the object like the light in the room. Can the child build tower of bricks ? Screening is negative

REVIEW OF SYSTEMS:

. (WNL) except as noted, (WNL) except as noted, (WNL) except as noted, (WNL) except as noted, (WNL) except as

noted, (WNL) except as noted,

Cardiovascular: (WNL) except as noted,

Constitutional: (WNL) except as noted,

Ears, Nose, Throat: (WNL) except as noted,

Endocrine (WNL) except as noted, (WNL) except as noted,

Eyes: (WNL) except as noted,

Gastrointestinal: (WNL) except as noted,

Genitourinary: (WNL) except as noted, (WNL) except as noted, (WNL) except as noted, (WNL) except as noted, (WNL)

except as noted, (WNL) except as noted, (WNL) except as noted, (WNL) except as noted, (WNL) except as noted,

Immune/Lymph (WNL) except as noted,

Musculoskeletal: (WNL) except as noted,

Neurology: (WNL) except as noted,

Psychiatric: (WNL) except as noted,

Respiratory: (WNL) except as noted,

Skin: (WNL) except as noted, (WNL) except as noted, (WNL) except as noted, (WNL) except as noted, (WNL) except as

noted, (WNL) except as noted,

CURRENT ALLERGIES:

No Known Allergies

6/24/2019

MARGARET MALEK, DOB: 10/29/2014, Date: 3/2/2018. Phys: RIMMA POZDNYAKOVA Generated by Medgen E.H.R.



PHYSICAL EXAMINATION:

Vital Signs: Pulse: 82 /min; Resp: 22 bpm; Temp: 97.4F; Weight: 32lb; Height: 37in; BMI: 16.4 kg/m²;

GENERAL APPEARANCE: No acute distress. Well child, active, alert and appears age appropriate.

SKIN: No cyanosis, ecchymosis, jaundice, lesions, petechiae or rash. Normal turgor, warm and dry.

HEAD: Normal size and shape. No evidence of trauma.

EYES: Pupils equal, round, reactive to light and accommodation. Corneal light reflex bilaterally. EOM intact, red reflex normal bilaterally. Fundi WNL.

EARS: Normal position and morphology. TMs flat, gray, translucent, mobile with no discharge.

NOSE: Nasal turbinates WNL. Normal mucosa without erythema or pallor. Patent and clear with no discharge.

MOUTH/ THROAT/ PALATE: No erythema, exudates or ulcerations. Palate is complete. Tonsils small and non-inflamed bilaterally.

TEETH: Normal dentition.

NECK/ SPINE: Clavicle normal with no fracture. Spine is straight with no lesions.

HEART: Normal apical impulse. Regular rate and rhythm. No murmurs, gallops, or rubs. Normal S1 and S2.

CHEST/ LUNGS: Clear to auscultation bilaterally with good air entry. No wheezes, crackles, rales, rhonchi, or retractions.

ABDOMEN: Soft, non-distended and non-tender. Bowel sounds normal.

GENITALIA: Normal external genitalia without lesions or discharge.

EXTREMITIES: 2+ distal pulses throughout. There is no clubbing, cyanosis or edema of the extremities.

ANUS/ RECTUM: No irritation or masses noted.

NEUROLOGICAL: No focal deficit and normal motor. Normal reflexes and tone. Appropriate for age.

CURRENT DIAGNOSIS:

ENCOUNTER FOR ROUTINE CHILD HEALTH EXAMINATION WITHOUT ABNORMAL FINDINGS

ANTICIPATORY GUIDANCE:

DIET/ NUTRITION: Discussed dietary habits. Discussed limiting snacks. Avoid excessive fat, sodium, salt or sugar. Fluoride supplementation in areas without fluoridated water. Advised to decrease fat content of milk to low-fat milk.

SAFETY/ INJURY PREVENTION: Advised to keep objects such as plastic bags, balloons and durable toys with small parts from child. Encouraged to limit time in the sun and minimize exposure during periods of high temperature.

Encouraged to use sunscreen with at least a minimum SPF 15. Provided age specific counseling including water, bike and sports safety, neighborhood safety, gun safety at home and at friends' homes and poison control.

PHYSICAL ACTIVITY: Encouraged opportunities for physical activity and discussed how parents can also be role models for this.

ORAL CARE: Advised regular dental clinic visit. Encouraged brushing with soft toothbrush/cloth and water.

SLEEP HABITS: Discouraged co-sleeping unless culturally desired. Encouraged proper sleep amounts, about 12-14 hours.

MEDIA EXPOSURE: Discouraged placement of computer and TV in bedroom. Discussed age appropriate screen time, including TV, computer and mobile electronic devices such as handheld video games and cellphones. Counselor on impact of screen time as a risk factor for overweight status, low school performance and violent behavior.

ALCOHOL & SUBSTANCE ABUSE: Discussed any family history of alcohol intake, substance abuse and tobacco use. Counselor parents about the potential harmful effects of alcohol, substance abuse and smoking on fetal and child health.

FAMILY & PEER RELATIONSHIP: Discussed reserving time alone with child and showing affection. Advised to promote interaction with other children. Encouraged parents to find time for themselves and maybe enlisting help of a babysitter. Encouraged to spend time with siblings too, if any.

CAR SAFETY: Discussed never leaving child unattended to in car for any reason. Discussed use of safety belts and child safety seats. Counselor parents against driving under the influence of alcohol or drugs. Encouraged the use of bicycle helmets.

ASSESSMENT & PLAN:

• **Encounter For Routine Child Health Examination Without Abnormal Findings:** Father wants vaccination administered in the gluteal area, vaccinations were administered in the lateral gluteal muscle. Father refused blood work today, will do next visit.

Age specific anticipatory guidance and vaccine information were discussed and reviewed with parent/guardian. Injury prevention and health promotion issues also discussed. Parent/guardian verbalizes understanding of plan for patient.

6/24/2019

MARGARET MALEK, DOB: 10/29/2014, Date: 3/2/2018, Phys: RIMMA POZDNYAKOVA Generated by Medgen E-H

CURRENT MEDICATION(S):

PRESCRIBED MEDICATION:

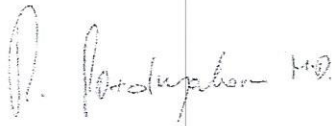
PROCEDURES:

PREV CARE VISIT NEW 1-4 YRS
HEP A VAC PED/ADOL 2DOSE INTRAMU
IPV IMMUNIZ POLIOMYELITIS VACCINE
ADMIN IMMUNE SHOT/VACCINE <18YRS

Follow up in 1 month(s)

Follow up
Refused blood work today.

^RISKFACTORS^
^PCARE^



Electronically signed by Rimma Pozdnyakova, MD on 3/2/2018
Diplomate American Board of Pediatrics

Family Services
Progress Notes

*****WARNING*****
CONFIDENTIAL INFORMATION
AUTHORIZED PERSONNEL ONLY

Case Name: Ingoglia, Margaret

Case ID: 26871553

of the student population is drawn. Park Side Preparatory Academy is a welcoming environment a located in a "new build" building with art displaying the cultural heritage of its user ship. Students at the Park Side Preparatory wear a formal uniform as a means distinguish them from the others school in the building and in the general community

For all casework contacts:

Observation and assessment of all family participants/current child safety: (Include parent (caretaker) – child interaction, describe conversation with child (when age-appropriate)

Observation and assessment of other adults in the home/frequenting visiting the home if applicable: (Describe observations of adult interaction with child(ren)/conversation with child (when age-appropriate)

Narrative/Discussion:

11 MIN IN
4 MINUTES!
MINUTES FAULT?
SO WITH WASNT THIS A
PROBLEM W/ MET

On Marginal date (CP) H. Simpson made an unannounced visit to the 655 Parkside Avenue Brooklyn, NY 11266 the Park Side Preparatory Academy middle school, school of subject child Joe Palomino. Ms. Valentine Guidance Counselor related that "Joe" has a history of "poor attendance" and correspondingly "poor academic performance and prowess". Ms. Valentine related that for example, "Joe" since the beginning of the academic year has attended school 3 days in the month of September, 5 days in the month of October, 2 days in the month of November and at up until December 17 the date of CP visit has attended school only once in the month of December. (Please see case record) Ms. Valentine related that "Joe's" poor attendance and tardiness (on days he is present in school) compounds his learning deficits and he is noted to functional academically well below his current grade level. Joe is currently enrolled in the 7th grade though 14 yrs. old owing to his being "left back". It is interesting to note that at the time of CP's visit (12/17/18) Joe was absent.

EDUCATIONAL NEGLECT CASE!!

Ms. Valentine related that she believed "Joe" to have "cognitive developmental delays" and his functional academic age in her estimate could be as low as 3-4 grades but is unsure as "Joe" has not attended school on a consistent basis to allow testing or full exploration of his academic functioning. "Joe" however is noted on days that he does attend to present no "behavioral management" issues in that he is "very complainant" though this "compliance" is attributed to his cognitive delays and poor social and emotional functioning, Joe being "easily led". In terms of cognitive functioning Ms. Valentine suggested that "Joe" has noted challenges in the areas of attention memory, working memory, judgment, evaluation, exhibits poor reasoning though coherent, poor decision making and problem solving skills. 'Joe' is noted to prefer to "play based learning" as when he does attends school participating in a 7th grade class in which levels of literacy are needed are beyond his current academic scope.

Name: Ingoglia, Margaret

Case ID: 26871553

an ERC was requested for this family "to adequately plan and discuss next steps for the family. In the past month October-November 2018, Ms. Ingoglia had five SCR made against her for CHN Joe and Margaret".

4 Assessment of Family

- Describe Safety/Risk Assessment discussed/identified during the conference (include family's view and any concerns impacting the children).

The concerns noted for the family included:

9) There were five recent new calls to the State Central Registry made against the mom between October 28th and November 23rd. Ms. Ingoglia believes that Mr. Malek is using the child welfare system to abuse her since the calls appear to coincide with his supervised visitation;

10) Joe is not attending school regularly; _____

11) He is enrolled in a school far from the family's shelter;

12) Joe is still awaiting mental health services; *! SERLEN HAS SAID JOE IS ENROLLED IN SERVICES!*

13) Minnie doesn't have any structure at home. She is allowed to remain up all night and her behavior serves as an excuse for the family not following through with tasks such as appointments and attending school; *SCAREGOAT*

14) There are concerns about the mom's cognitive ability; *SO HOW COME PESS DON'T MARRY WITH ME?*

15) As per progress notes, Joe only attended 3 days of school in September, 5 days in October, and 2 days in November. He missed 17 days of school for December; *HE WOULD COME TO VISITATION W. MARGARET.*

16) When not in school, Joe is not receiving his IEP services;

17) Joe was held back twice; *NOT WITH ME!*

18) The mom needs child care for Minnie; and

19) The is not receiving any child support.

IN FARA OFFENSE + CUSTODY PETITIONS IS EVIDENCE OF E-MAIL LETTERS I WROTE TO GOBAS OF JOE NOT GOING TO SCHOOL THAT SHE IGNORED.

- Strengths Identified at the Conference (include family capacity, internal & external resources that can support action plan).

The strengths identified for this family were:

20) Ms. Ingoglia took Joe to his mental health intake appointment;

21) She reports that she feels the family is safe in their current shelter;

22) Joe can be a helpful boy;

23) She reports that her family is learning to share what they have in the small space;

24) The mom filed an application for housing;

25) She wants to learn how to use a computer;

26) The family might benefit from YAI or OPWDD services;



David A. Hansell
Commissioner

COURT REPORT

William Fletcher, LCSW
Deputy Commissioner

Rodney Jackson, LCSW
Assistant Commissioner

Child Welfare Programs
Division of Child Protection

Brooklyn Borough Office
Main East Office
1274 Bedford Avenue
Brooklyn, New York, 11216

(718) - tel
(718) - fax

Name of Case:	Ingoglia, Margaret
Date:	November 14 th , 2019
Docket Number:	NN-19411-18 NN-19410-18
Judge:	Honoring Judge Jacequiline Williams
Subject Child	Margaret Malek
Dates of Birth (DOB):	10/29/2014 Joe Palomino 03/15/2004
Respondent (& DOB):	Robert Malek 04/06/1969
Petitioner (& DOB):	

Brooklyn Family Court
330 Jay Street
Brooklyn, NY 11201

Presiding Honorable Judge Jacqueline Williams,

In accordance with Brooklyn Family Court directives, NYC Children's Services hereby submits the following report regarding the assessment of the family:

On October 02nd, 2019, CPS received a subsequent SCR report regarding concerns of child Margaret that she has a bruise on her neck. CPS did not observe a bruise on her neck during the supervised visit and the BF did not mention anything to CPS. The next day there was no bruise when Margaret was seen. Child Joe denied being physically disciplined. The mother explained that at times she has used a stern voice in the morning to ensure the children are awake and prepare for school. No marks or bruises were observed on neither child. This case was unfounded.

On November 5th, 2019 CPS received a subsequent SCR report regarding concerns of child Margaret and Joe feeling ill. During a supervised visit, Child Margaret disclosed to BF that she has thrown up in the home with BM recently. The mother admitted allowing Margaret to get as

many helpings as she pleases to cake and candy for her birthday.

NYPD Special Victims Unit has been in contact with the CPS team in reference to complaints made by the BF regarding their investigation into allegations of Margaret being physical abused. In speaking with Lt. Bermudez, there were no findings. The BF has since filed an official complaint with the NYPD Internal Affairs Bureau (IAB)

Supervised Visits:

BF reported that BM do not feed subject children with nutritious foods and always feed the children McDonalds. During visits, SC tells BF that she wants McDonalds and BF gives SC money for her and SC Joe to eat McDonalds after the supervised visit. The father was asked to not give the child Margaret cash money

Both parents have problems re-directing SC. SC have thrown tantrums and begged to get McDonalds and CPS has observed both parents give SC McDonalds after. CPS Jones experience SC crying and hitting BM for McDonalds on November 6th, 2019. BM also reported to CPS Jones as she was conducting a visit and reported that she gives SC whatever she wants.

CPS Adams conducted a supervised visit on November 4th, 2019 and it was reported that BF gave SC milk that he left at the field office that was not stored in a fridge.

During a supervised visit October 24th, 2019 CPS observed SC Margaret eating eggs, and cherry tomatoes out of BF hand. BF was concerned and did not like this behavior but allowed SC to continue to do this. This is not the first time CPS observed SC eating from BF hand one time before. CPS had a conversation with BM who reported that SC likes to act like she's a dog.

CPS tried to schedule three visits a week to make up some of the 500 minutes with adding a day, but each week there has been a cancellation. All visits have been cancelled from BM due to the children being sick or tired and on one occasion, the BM had an appointment to look at an apartment with a housing specialist and did not finish in time to arrive for the supervised visit. In addition, child Margaret's school bus dropped off the child too late for the mother to travel to the boro office for visits. The CPS team spoke with the bus company about ensuring that Margaret arrives home on time.

In speaking with the FSU team recently, the 500 minutes is currently in the process of being made up.

Education:

The children have missed multiple days of school this school. SC Joe has missed 13 days. Both children have IEP's and should be attending school regularly. When one child is sick, BM keeps both the children home from school. One day the children were apart of a fire drill at the shelter at 1am, and BM kept the children home from school due to the children being tired from the fire drill. CPS has had numerous conversations about the importance of school for the children.

CPS and CPS II Ms. Ferguson had numerous conversations with BF to discuss if he has any concerns for SC when he is with her or see anything alarming. CPS now conducts a body check

during each visit while a co-worker is present, as well as take photos of SC.

Medical:

On November 9, 2019, the children reportedly had an updated physical. As per Ms. Ingoglia, child Joe has a follow-up appointment for blood work and she is expecting a referral via mail for Joe to be referred to an endocrinologist. Joe has complained about pain in his legs and weight gain.

The team will follow up with the children's medical provider.

Services:

Ms. Ingoglia and the children continue to receive preventive services from CAMBA. The family's case planner is Ms. Wilson. Ms. Wilson can be reached at (347)461-3055.

The case has been recently re-assigned to the ACS Family Services unit (FSU). The assigned FSU/CPS Ms. Jones can be contacted at (646) 784-1919.


The BF Mr. Malek will be referred to the SCO Fatherhood program for parenting skills classes.

CPS will follow up with the PPRS case planner in regards to referring Ms. Ingoglia to parenting skills classes.

The ACS Early Childhood Consultant recommended Margaret (Minnie) be referred for a neuropsychological assessment. The assessment would assist in assessing Minnie's behavior and brain functioning to assess a child's needs. The consultant recommended CPS reach out to SUNY Downstate Hospital however the facility does not offer the services.

New York City Administration for Children's Services will continue to monitor the health and safety and well-being of subject children. New York City Administration for Children's Services hopes that the information presented in this report will assist the court in deciding the best interest of the subject children

Respectfully submitted,

Ardaisha Hudson		November 6, 2019
Preparer (Print name)	Signature	Date
19 Rogers Ave 273	ardaisha.hudson@acs.nyc.gov	718-245-5975
Address and Unit	E-mail	Telephone
Rashima Ferguson		November 13, 2019
Preparer's Supervisor (Print name)	Signature	Date