NAME: C1 MOTHER: Jennifer Astle UNIT#: 760066 COUNTY: Davidson

ACCT#: 0911000339 DCS WORKER: Shayla Dix

DOB: 05/22/00

DATE SEEN: 04/21/09 (Montgomery County Child Advocacy Center)

REFERRAL HISTORY:

Astle is an 8-year-old female referred to Our Kids Center on 4/3/09 by Miranda Parker of Montgomery County Department of Children's Services. Ms. Parker reports that C1 disclosed in her forensic interview digital-genital contact by a family friend, Timothy Guilfoy. It is reported that the last contact occurred around February 2009.

PRESENTING HISTORY:

C1 is accompanied to the clinic today by her mother, Jennifer Astle. Ms. Astle reports that in March 2009, she found out that her three daughters had been sexually abused. Ms. Astle reports that she found out because her youngest daughter, C1 , told her grandfather about the contact that was occurring. Ms. Astle reports that the grandfather told her that C1 reported to him that a family friend Tim Guilfoy, 25 years of age, was touching them. Ms. Astle reports that upon learning of the disclosure, she went to pick up the girls from school and talked separately to each girl and learned that the contact had been ongoing since before May 2008. Ms. Astle reports that all three girls told her that they would wake up to find Mr. Guilfoy touching their breasts, vaginas, and bottoms and that he penetrated their vaginas with his finger. Ms. Astle reports that it is her understanding that the girls did not have to touch Mr. Guilfoy anywhere on his body. Ms. Astle reports that she believes the contact occurred with C1 mostly when the family went camping. Ms. Astle reports that the girls were afraid to tell her about the contact because they were afraid they would lose their home if they told, as Mr. Guilfoy was renting the residence to the family. Ms. Astle reports that Mr. Guilfoy did not start touching C3 until September 2008 when the family moved to their new residence in Clarksville. Ms. Astle reports the family previously had been living in Nashville when the contact occurred to her two younger daughters. For this reason, the case has been transferred to Davidson County. Ms. Astle reports that Mr. Guilfoy currently resides in St. Louis due to posting bond after being arrested on six counts of

child rape. Ms. Astle reports that the girls had forensic interviews around March 23 at the Montgomery County Child Advocacy Center and that their disclosures were consistent with what they told her and their grandfather. Ms. Astle reports that C2 is having difficulty in school, but that C3 and C1 both have been doing pretty well. Ms. Astle reports she believes C2 experienced the sexual contact more frequently than her sisters and that she had been subjected to the contact for a longer period of time. She reports that none of the girls has had any behavioral problems. She denies previous concerns of sexual abuse of any of the girls.

MEDICAL HISTORY FROM CHILD:

C1 willingly joined me for questioning. She did not appear to be in any acute distress. C1 is an 8-year-old Caucasian female. She was dressed appropriately and appeared her stated age. Her speech was clear. Language and cognitive skills appeared, grossly, average for her age. Thought process and content appeared normal. No disorders of perception were noted.

Explanations regarding the nature and purpose of the exam were provided to C1. The need to ask questions for the purpose of medical diagnosis and treatment was reviewed. Limits of confidentiality were also reviewed, and C1. demonstrated understanding of the explanations provided to her.

Regarding general health status, C1 reported no current aches or pains and that she takes no medication. She denied any problems with headaches, earaches, or breathing. C1 reported she sometimes has difficulty sleeping. There is no history of prolonged periods of sadness, thoughts of self-harm, suicidal ideation, broken bones, stitches, or hospitalizations. C1 denied any complications with urination or defecation.

Upon asking C1 to identify the parts of her body she considers private. C1 indicated butt, boobies, and tootie. When asked what she does with her tootie when she reported "pee." When asked if anyone has ever touched her goes to the restroom.C1 on her private parts.C1 reported, "Yes." When asked who had touched her private parts,C1 reported, "A guy named Tim." When asked where he touched her, C1 reported, "My butt and tootie." When asked what he touched her butt and tootie with, reported, "His hands." When asked if his hands touched her tootie on the inside. outside, or bothC1 reported "outside." When asked if his hands touched her butt on the inside, outside, or both C1 reported "outside." When asked if any other part of Mr. Guilfoy's body touched her body. C1 reported "no." When asked if any other part of her body touched Mr. Guilfoy's body, C1 reported "no." When asked if the

contact occurred one time or more than one time, C1 reported, "More than one time." When asked if she remembered the first time, C1 reported, "It was in our old house in Nashville. I was around 6 or 7 years old." When asked if she remember the last time Mr. Guilfoy touched her, reported, "No, because he hasn't done it at my new house, and we have been at my new house a long time. He did it a lot at my old house, though." When asked if anyone else has ever touched her private parts, C1 reported "no." When asked if she had any other worries or concerns today related to her health, C1 reported "no."

Jaha Martin, LCSW

MEDICAL HISTORY:

medical history today is provided by her mother, Jennifer Astle, who reports that C1 and her sisters C2 and C3 are at the Montgomery County Child Advocacy Center for an Our Kids evaluation due to concerns of possible sexual abuse. Specifically, the girls have reported digital-genital contact/penetration as well as digital-breasts contact and rubbing of their buttocks by a 25-year-old adult male friend of the family, Tim Guilfoy. The last contact the girls had with Mr. Guilfoy was in early March 2009. None of the girls has any physical complaints, and there have been no previous concerns of sexual abuse.

In regard to the remainder of C1; medical history, Ms. Astle reports C1 was the 7-lb., 13-oz. product of a term gestation by scheduled C-section in Titusville, FL. The pregnancy was without complications, and C1 had a normal birth and nursery course. C1 has had no hospitalizations, surgeries, serious illnesses, or broken bones. She is taking no medication and has no known drug allergies. C1 is in 3rd grade at Liberty Elementary School where she is "doing pretty good." The family moved to Tennessee in the Fall of 2008 and Ms. Astle is attempting to obtain a primary care provider through TennCare at this time.

There is no history of genital trauma, exposure to sexually explicit materials, prior concerns of sexual abuse, urinary tract infections, chronic diarrhea or constipation, blood in the urine or stool, or recent history of painful or hard bowel movements. The remainder of the review of systems is negative and documented in the medical history questionnaire. Family history is significant for cancer and cardiac disease on the maternal side of the family.

PHYSICAL EXAMINATION:

is an alert, well-developed, well-nourished, Caucasian female child who is cooperative and engaging during the physical examination. Present for the exam is Ms. Astle.

Head: normocephalic and atraumatic.

Eyes: pupils are equal, round, and reactive to light and accommodation, EOMI.

Ears: TMs are gray and translucent with visible landmarks.

Nares: patent without discharge.

Throat: moist mucous membranes without exudate, lesions, or erythema.

Neck: supple without lymphadenopathy.

Chest: clear to auscultation bilaterally; breasts are Tanner Stage I. Cardio: regular rate and rhythm without murmur, rub, or gallop.

Abdomen: soft, nontender, and nondistended with normal bowel sounds and no

hepatosplenomegaly or masses.

Extremities: warm and well perfused without clubbing, cyanosis, or edema.

Skin: smooth, without significant lesions or rashes.

Neurological: grossly intact.

Anogenital Exam: The colposcope is used to aid in the examination, and colposcopic digital images are obtained of the anogenital areas. The genital exam is accomplished with in the supine frogleg position where she is noted to be Tanner Stage I. The posterior fourchette and fossa navicularis are unremarkable and atraumatic as are the labia majora, minora, and clitoris. Forward labial traction is used to visualize the internal structures where she is noted to have an unestrogenized hymen, which is smooth and without tears or clefts and with at least 2mm-3mm of tissue in the posterior pole. No discharge is present. A small amount of smegma is noted between the labia majora and minora, especially prominent on the left.

The anal exam is accomplished with C1 in the supine knee-chest position. The anal exam reveals normal rugae with positive wink and tone. There are no tags, tears, fissures, or other lesions noted in the anal area.

Hollye Gallion, APRN, BC-PNP

IMPRESSION:

- 1. Medicolegal evaluation following concerns of sexual abuse.
- 2. Medical history from the child today describing digital-genital contact and digital-anal contact.
- 3. Physical examination, which is within normal limits for the anogenital portion of the exam. A normal exam neither confirms nor rules out the possibility of sexual contact.

RECOMMENDATIONS:

- 1. A copy of this report is to be sent to Davidson County Department of Children's Services in care of Shayla Dix.
- 2. Ms. Astle is encouraged to seek counseling services for Jasmine to aid in the concerns of sexual abuse. Information is shared with Ms. Astle for the Rape and Sexual Assault Center to aid in this effort.
- 3. Family is encouraged to call with any questions or concerns.

Hollye Gallion, APRN, BC-PNP
Jaha Martin, LCSW