

AFFIDAVIT OF CUSTODIAN OF MEDICAL RECORDS

C2

Patient

76-00-65

Medical Record Number

I, Jana M. Gallemore, RHIA in response to subpoena duces, tecum, copy hereto attached, dated 5/27/09, relating to subject records, make oath that I am a duly authorized custodian of subject records and have authority to certify such records; that such records were prepared by personnel of the hospital, or by staff physicians, or by persons under their control, in the ordinary course of business, at or near the time of the act, condition, or event reported therein; and that

X the attached is a true, complete and correct copy of all the subject records described in the subpoena.

the attached, is being only a part of the records described in the subpoena, is a true, complete and correct copy of all the described records which Nashville General Hospital has on subject patient.

after a thorough search, no such described records on subject patient can be found.

This affidavit with attached copy of subject medical records is submitted in lieu of personal appearance as so authorized under Public Act No. 158 enacted by the Tennessee legislature in 1977.

The cost to furnish the copies of these medical records is:

Number of Images 7 @ = \$
Number of Images @ = \$
Number of Images @ = \$
TOTAL \$

Melissa Cantrell, RHIA FOR
Jana Gallemore, RHIA
Director, Health Information Management

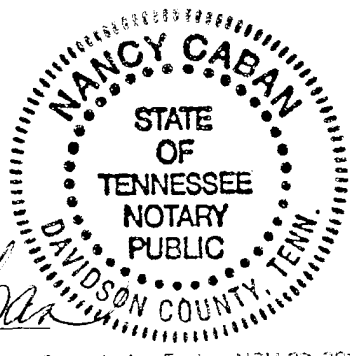
May 27, 2009
Date

State of Tennessee
County of Davidson

Sworn and subscribed before me this 1 day of June 2009.

My commission expires:
11-22-2010

Nancy Caban
Notary Public



My Commission Expires NOV 22, 2010

760065

Circuit Criminal Court Montgomery County Clarksville Tennessee	GRAND JURY SUBPOENA	Case Number 40900440
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State of Tennessee vs. Timothy Guilfoxy

To Any Lawful Officer of Said County:

Under penalty prescribed by law, you are commanded to summon:

Our Kids
 Custodian of Records
 Nashville, TN.
 Fax 615-341-4919

1-29-09
 9:00 AM

to send personally before the Criminal Court Grand Jury of Montgomery County, at the Courts Center 4th floor, Room 417, in Clarksville, Tennessee, on ASAP at 8:00 a.m./p.m. before the Grand Jury then and there to testify in behalf of the State of Tennessee in this matter:

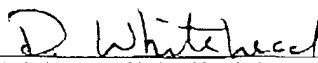
and bring the following:

Duces Tecum:

Furnish certified copies of all records re: the care and treatment of C2 and C3 on or about 3-29-09. Please send records to Assistant District Arthur F. Bieber, Assistant District Attorney, 101 N. 3rd St., Clarksville, TN, 37040 o/b/o Detective Ginger Fitting

4-7-09

Issued: MAY 20 2009


 Clerk / Deputy Clerk - Circuit Court

OFFICER'S RETURN: Came hand this date and executed by:

- Delivering the within subpoena to the witness named herein _____
- Unable to serve because _____

Date: _____

By: _____
 Officer, Title

ATTORNEY'S RETURN OF SERVICE:

Attorney's Name, Address and Telephone Number

Designee's Name, Address and Telephone Number

I certify that on the date indicated below I served a copy of this subpoena on the witness _____, by _____.

Date: _____

Signature of Attorney/Designee

760065

Rec'd 5/27/09

Circuit Criminal Court Montgomery County Clarksville Tennessee	GRAND JURY SUBPOENA	Case Number
State of Tennessee vs. <u>Timothy Guilfoxy</u>		

To Any Lawful Officer of Said County:

Under penalty prescribed by law, you are commanded to summon:

Our Kids
 Custodian of Records
 Nashville, TN.
 Fax 615-341-4919

Rec'd OKC- EA
 on 5/26/09
 forwarded to
 MNGH

to send personally before the Criminal Court Grand Jury of Montgomery County, at the Courts Center 4th floor, Room 417, in Clarksville, Tennessee, on ASAP at 8:00 a.m./p.m. before the Grand Jury then and there to testify in behalf of the State of Tennessee in this matter:

and bring the following:

Duces Tecum:

Furnish certified copies of all records re: the care and treatment of **C2** and **C3** on or about ~~3-29~~ ⁴⁻⁷⁻⁰⁹. Please send records to Assistant District Arthur F. Bieber, Assistant District Attorney, 101 N. 3rd St., Clarksville, TN, 37040 o/b/o Detective Ginger Fitting

Issued: MAY 20 2009

D Whitehead
 Clerk / Deputy Clerk • Circuit Court

OFFICER'S RETURN: Came hand this date and executed by:

Delivering the within subpoena to the witness named herein _____

Unable to serve because _____

Date: _____ By: _____
Officer, Title

ATTORNEY'S RETURN OF SERVICE:

Attorney's Name, Address and Telephone Number	Designee's Name, Address and Telephone Number
_____	_____
_____	_____
_____	_____

I certify that on the date indicated below I served a copy of this subpoena on the witness _____ by _____

Date: _____

Signature of Attorney/Designee _____

(Handwritten initials)

27898093

METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY



METROPOLITAN NASHVILLE GENERAL HOSPITAL
1818 ALBION STREET
NASHVILLE, TENNESSEE 37208

NOTIFICATION OF FORENSIC MEDICAL EVALUATION PROCEDURES

C2

DATE _____
PACCT: 09 110 00336
PATIENT NAME _____ MRUN: 76-00-65 CHART NUMBER _____
DOS: 4/21/2009
DATE OF BIRTH _____ LOC: OKC BY IM/HG AGE _____ SEX _____

I understand that the above named child, who is in my custody, is being evaluated by the OUR KIDS staff for the purpose of examining the health status of the child, including documentation of physical problems or injuries. This may include photodocumentation or x-rays of physical findings.

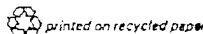
I understand that the child will receive a complete physical exam, including inspection of the child's genitalia. This examination may be performed with the use of a colposcope and pictures of relevant physical findings may be taken for documentation and teaching purposes. These pictures will not include the child's name but will include a number for identification.

I understand that the medical evaluation may include laboratory tests for pregnancy, sexually transmitted diseases, bleeding disorders, or other tests as necessary.

I understand that the information from the medical evaluation will, in accordance with the Tennessee law, be shared with the county Child Protection Investigative Team (Department of Children's Services, police, and the district attorney).

Jennifer Astle
Signature
Joe Martin
Witness

Mother
Relationship





Nashville General Hospital at Meharry

▶ Metropolitan Nashville Hospital Authority



1804 Hayes Street
Nashville, TN 37203

NAME: C2

UNIT#: 760065

ACCT#: 0911000336

DOB: 02/26/99

MOTHER: Jennifer Astle

COUNTY: Davidson

DCS WORKER: Shayla Dix

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

REFERRAL HISTORY:

C2 is a 10-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 C2 disclosed in her forensic interview digital-genital contact and digital-genital penetration with pain by a family friend, Timothy Guilfooy. It is reported that the contact occurred multiple times and that the last contact possibly occurred in February 2009.

PRESENTING HISTORY:

C2 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 Guilfooy, 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. Guilfooy 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. Guilfooy anywhere on his body. Ms. Astle reports that she believes the contact occurred with C1 and C2 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. Guilfooy was renting the residence to the family. Ms. Astle reports that Mr. Guilfooy 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. Guilfooy

1818 Albion Street ♦ Nashville, Tennessee 37208

T: 615-341-4000 ♦ F: 615-341-4493

we care for YOU. for life.

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:

C2 willingly joined me for questioning. She did not appear to be in any acute distress. C2 is a 10-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 C2. The need to ask questions for the purpose of medical diagnosis and treatment was reviewed. Limits of confidentiality were also reviewed, and C2 demonstrated understanding of the explanations provided to her.

Regarding general health status, C2 identified Dr. Tygart in Chattanooga as her primary care physician. C2 reported she currently has a cold and that her throat hurts. She reported she takes no medication. C2 denied any problems with headaches, earaches, or sleeping. She reported she has some trouble breathing when she coughs. There is no history of prolonged periods of sadness, thoughts of self-harm, suicidal ideation, broken bones, or recent hospitalizations. C2 reported she had surgery on her heart when she was 1 week old and was hospitalized for that. She reported she received stitches to her chin at 4-5 years of age from a bicycle accident. C2 denied any complications with urination or defecation.

When asked to identify the parts of her body she considers private, C2 became bashful and put her hand over her face. C2 identified chest as she continued to hold her face in her hands and became silent. C2 was asked if she would like to write on a piece of paper the parts of her body she considers private, which she elected to do. C2 wrote "chest (boobs)" and "tutu." Under these words, C2 wrote, "Someone has touched me in a private part." When asked which private part someone touched, C2

reported, "Tutu." When asked what she does with her tutu when she goes to the restroom, C2 reported, "I pee." When asked who had touched her tutu, C2 reported, "Tim Guilfooy." When asked what Mr. Guilfooy touched her tutu with, C2 reported, "His hand." When asked if Mr. Guilfooy touched her tutu on the inside, outside, or both, C2 reported "outside." When asked if any other part of Mr. Guilfooy's body touched her body, C2 reported "no." When asked if any other part of her body touched Mr. Guilfooy's body, C2 reported "no." When asked if the contact occurred one time or more than one time, C2 reported, "The contact occurred more than one time." When asked if she remembered how old she was the first time Mr. Guilfooy touched her, C2 reported, "I was around 5 or 6." When asked how old she was the last time he touched her, C2 reported "9." C2 reported no pain or bleeding associated with the incidents. When asked if anyone else has ever touched her private parts, C2 reported "no." When asked if she had any other worries or concerns today related to her health, C2 reported "no."

Jaha Martin, LCSW

MEDICAL HISTORY:

C2 medical history today is provided by her mother, Jennifer Astle, who reports that C2 and her sisters C3 and C1 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 Guilfooy. The last contact the girls had with Mr. Guilfooy 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 C2 medical history, Ms. Astle reports C2 was the 8-lb., 12½-oz. product of a term gestation by emergency C-section in Titusville, FL. The pregnancy was unremarkable; however, C2 birth was complicated by fetal bradycardia. Upon delivery she was noted to have transposition of the great vessels and underwent cardiac surgery at 1 week of age. She remained in the neonatal intensive care unit for approximately 1 month, but has had no difficulty since that time. She has been followed annually by cardiology. She continues to have a cardiac murmur. C2 was on Zantac for the first 6 months of life but is currently taking no medication and has no known drug allergies. Ms. Astle is seeking a primary care provider for the girls through TennCare at this time. C2 is in 4th grade at Liberty School. She is "not doing well." She received two F's and a D on her most recent report card. Ms. Astle now wonders if the sexual contact has affected C2 academic performance.

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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 cardiac disease and cancer.

PHYSICAL EXAMINATION:

C2 is an alert, well-developed, well-nourished, Caucasian female child who is cooperative but shy during the genital portion of the exam. 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: large midline scar as well as several other small scars to the abdomen and chest as the result of her cardiac surgery; clear to auscultation bilaterally; breasts are Tanner Stage I.
*Cardio: regular rate and rhythm with a grade II-III/VI systolic ejection murmur heard best at the left sternal border that radiates to the axillae.
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: small verrucous lesion on the first digit of the left hand; skin is pink and well perfused; capillary refill brisk.
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 **C2** in the supine lithotomy 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 a high-attaching, unestrogenized hymen with lacy vascularity. There are multiple perihymenal bands as well as periurethral support bands present bilaterally. No discharge is present.

The anal exam is accomplished with **C2** 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.

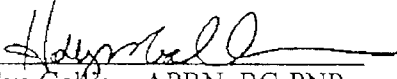
Hollye Gallion, APRN, BC-PNP

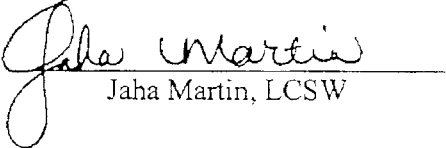
IMPRESSION:

1. Medicolegal evaluation following concerns of sexual abuse.
2. Medical history from the child today describing digital-genital contact.
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.
4. Cardiac murmur. History of congenital heart disease.

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. It is recommended to Ms. Astle to seek counseling services for **C2** 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