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UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

Ahmadou Sankara #3491502709
1818 Hazen St Queens, Ny 11370

A New Complaint
filed Dec 24th 2015
Attached 4 papers

AMENDED
COMPLAINT

under the Civil Rights Act,
42 U.S.C. § 1983

(In the space above enter the full name(s) of the plaintiff(s).)

-against-

Police officer Liam O'Hara shield #20203
who arrested me without probable cause in
March 6, 2015 on 132st between 8th and 7th Ave
201 W 132st. He then took me to the precinct and
claimed that my iPhone 6 plus was stolen property.
He also alleged that my license was taken along
with my 3 credit cards in which possessed my name

Jury Trial: Yes No
(check one)

15 Civ. 7761 ~~PKC~~ (PKC)

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

I. Parties in this complaint:

A. List your name, identification number, and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff's Name Ahmadou Sankara
ID# 3491502709
Current Institution _____
Address 18-18 Hazen St East Elmhurst Ny 11370

B. List all defendants' names, positions, places of employment, and the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1 Name Police officer Liam O'Hara Shield # 20203
Where Currently Employed _____
Address New York City Police Dept. 33 precinct
2207 Amsterdam Ave Ny Ny 10039

Defendant No. 2 Name Detective Brian Kesterer Shield # _____
Where Currently Employed Ny Ny Police Dept. 33rd precinct
Address 2201 Amsterdam AVE Ny Ny 10039

Defendant No. 3 Name Rebecca Dunnan Assistant D.A. Shield # _____
Where Currently Employed _____
Address Hogan place, Ny Ny 10013

Who did what?

Defendant No. 4 Name MARCIA SECKLER LARAL AID Shield # _____
Where Currently Employed 49 THOMAS STREET
Address NY NY 10013

Defendant No. 5 Name KIRA TRYVES 180R Shield # _____
Where Currently Employed 253 BROADWAY 2 FLOOR
Address NY NY 10007

II. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

- A. In what institution did the events giving rise to your claim(s) occur?
132st between 7th and 8th AVE 201 West 132nd street in front of 7th AVE
- B. Where in the institution did the events giving rise to your claim(s) occur?

- C. What date and approximate time did the events giving rise to your claim(s) occur?
March 6th 2015 10:50 PM

What happened to you?

D. Facts: Police officer Liam O'Hara arrested the plaintiff and had a probable cause. The plaintiff was sitting in his car between two cars when the officer approached the plaintiff to step out of the car. The officer then accused the plaintiff of having a stolen iPhone 6 plus

ON MARCH 6th 2015 THE N.Y.C POLICE OFFICER APPROACHED ME WHEN I WAS IN PARKING SPACE BETWEEN TWO CARS WHEN THE ENGINE WAS OFF. THIS OFFICER VIOLATED MY UNITED STATES RIGHT BECAUSE HE DIDN'T HAVE PROBABLE CAUSE TO SEARCH THE CAR. HE ALSO DIDN'T HAVE PROBABLE CAUSE TO SEARCH MY WALLET. THE ADDRESS 201 W. 132ST BETWEEN 7th AVE AND 8th AVE. 201 W. 132ST IS CLOSER TO 7th AVE. THIS OFFICER LIED SAYING I WAS PARKED IN FRONT OF THE CHURCH. THE POLICE OFFICER ARREST SHEET SAID I WAS PARKED IN 201 W. 132ST. THIS IS THE CORRECT ADDRESS THAT I WAS PARKED IN FRONT OF. AFTER MY ARREST THIS OFFICER GOES TO TESTIFY IN THE GRAND JURY THAT MY LICENSE WAS FORGERY LICENSE. THIS OFFICER HAS A COMPUTER INSIDE THE CAR AND ALSO HE HAS A CELL PHONE TO CALL TO T.N. MEMPHIS TO VERIFY IF MY LICENSE WAS LEGIT HE NEVER DONE THAT. THIS OFFICER VIOLATED MY UNITED STATES RIGHT. YOU CAN'T BREAK THE LAW TO FIX THE LAW. ON MY RAP SHEET FROM ALBANY THIS OFFICER SHIELD NUMBER WAS 9466. AT THE GRAND JURY THE SAME OFFICER SHIELD NUMBER WAS 20203. IN TRIAL THE SAME OFFICER SHIELD NUMBER WAS 4408 THIS OFFICER KEEP LYING BY HAVING DIFFERENT SHIELD NUMBER GIVING TO THE COURT RECORD.

ON MARCH 11th 2015 THE Lawyer waive
 my GRAND JURY right. THEN she came to me
 saying that I was indicted. I told her
 How did I get indicted when my license
 is legit when I came back to Kiker's
 Island I go to the Law Library, I
 Give my Booking Case number to The Law
 Library Civilian, I Found out that I
 never had got indicted. THIS indictment
 is IN PART F 000000000. I never got
 indicted by the Grand Jury. This indictment
 ON 03-30-2015 By The GRAND JURY was
 MISCELLANEOUS NO type. I Requested the
 indictment which was The original Copy
 of The Foreman Seal Signature Stamp.
 They denied me. These papers AND I
 posted my BAIL Bond. THE D.A never
 presented THE Bond to the Judge. SHE
 The D.A. Violated my UNITED STATES rights.
 Because I'm NOT A Flight Risk, I'm NOT
 on parole, probation either. I also don't have
 ANY WARRANTS. I made a Complaint to
 THE BAIL Bondsman that my Cousin who posted
 BAIL- He has A Garage AND He has A BANK
 ACCOUNT TOO. He Also has A Legal INCOME.
 THE BAIL Bondsman SAID I'm Already out
 on BAIL. My Cousin got the paper proof
 To let me out. I'm wondering why I'm
 NOT Released. THE D.A. Violated my
 UNITED STATES RIGHT

ON MAY 7th 2015 THE D. A. MOVED MY CASE FROM CRIMINAL COURT TO SUPREME COURT. I WAS INDICTED MISCELLANEOUS NO-TYPE ON ONE ~~RE~~ COUNT I WAS INDICTED ON POSSESSION OF FORGED INSTRUMENT IN THE 2ND DEGREE. ON THE 3 COUNTS NOT AN ARREST CHARGE, ARRAIGNMENT CHARGE. WHEN THE D. A. FOUND OUT THAT MY LICENSE WAS LEGIT, SHE PROSECUTED ME WITH THE 3 COUNTS THAT I WASN'T INDICTED FOR. YOU CAN LOOK AT MY PAPER WORK THAT I SUBMITTED TO THE CIVIL COURT, AND SEE WHAT I'M SAYING. I PUT THE 190.50 TO DISMISS THE INDICTMENT. THEY NEVER ANSWERED MY MOTION. THE LEGAL AID LAWYER SUBMITTED ON MAY 19th 2015 NOTICE OF OMNIBUS MOTION. THE COURT PART 61 SUPREME COURT NEVER ANSWERED MY MOTION. THE LAWYER VIOLATED MY RIGHTS BECAUSE SHE NEVER TOOK MY STATEMENT. SHE MADE ~~ME~~ MISTAKE ON MY NOTICE OF OMNIBUS MOTION. SHE SAID THAT I WAS DRIVING AND SHE CORRECTED HERSELF TO THE COURT MINUTES SAYING THAT I WAS SITTING IN THE VEHICLE IN THE PARKING SPOT. SHE VIOLATED MY UNITED STATES RIGHT BY NOT TAKING MY STATEMENT. SHE NEVER VERIFIED MY LICENSE BEFORE THE GRAND JURY. SHE SAID THE D. A. SAID MY LICENSE WAS FALSE. SHE WAS WORKING WITH THE D. A.

THE Judge changed my Lawyer to AN
 18.B lawyer. THE 18.B lawyer said to me
 that He will go see the Judge and the D.A. to
 see WHY AM I still in Jail - Because I was
 CHARGED with ONLY ONE COUNT. MY license is
 LEGIT why AM I IN JAIL. MY NEXT COURT
 date. SHE: MY 18.B lawyer never SHOWS UP TO
 COURT. ANOTHER 18.B lawyer came to me saying
 that He came to represent me and that they
 work in the same LAW FIRM. THAT lawyer
 advised me to Plea Guilty and take time served
 for what I did. I didn't do nothing so
 why should I take time served. ON MY NEXT
 COURT date they changed my COURT PART 61
 TO PART 77 Alaker Supreme Court. I started
 PRE-TRIAL. The Judge Denied my lawyer for
 the evidence PHOTOGRAPH ~~of~~ address and the
 D.A. bring the PHOTOGRAPH of Charge: saying
 THAT THE Police said that I was parked in
 front of Church. This officer has lied the correct
 address is 201 W. 132ST. This is the address that
 the Police officer used in His arrest sheet. 201
 W. 132ST. THE D.A. has no evidence against
 me ON THIS TRIAL. MY lawyer was working with
 THE D.A. to put me down. MY lawyer did
 not give me a chance to testify on my behalf.
 THIS lawyer violated my UNITED STATES rights.
 THE JURY questioned and answered every thing
 behind my BACK. when I was called to come
 to the COURT ROOM the jury was already in the
 JURY ROOM. They called the jury to come
 deliver the verdict. This wasn't suppose to
 happen. when I came BACK for sentencing on
 December 9th 2015 The Judge sentenced me to
 seven years. I didn't do nothing they don't
 have no evidence AGAINST me. I submitted notice
 OF MOTION to set aside verdict CPL 330.30 THE JURY
 never answered my MOTION.

Upon arrival at the precinct the officer charged the plaintiff with seven ~~five~~ different charges. As you can see on my Arrest info sheet The grand Jury dismissed six of the charges. The plaintiff was charged with one count of forged instrument with a drivers licence. The grand jury never charged the plaintiff on 03/30/15 of three counts of credit card forged. When the P.A. found out the plaintiffs license was legit they charged the plaintiff with the three counts of credit card forged that the grand jury never charged the plaintiff with. The DA followed her own rules. The DA took the plaintiff to trial with charges that the plaintiff didnt get charged with at grand jury. Bail was also posted and the DA never presented bail to the Judge. Detective Brian Kesteror had an ID scanner indicated the plaintiff Drivers license was a fake which he testified at the grand jury. Nypd never issued the ID scanner this Det Kesteror had his own personal ID scanner. The arresting officer who is officer Liam O'Hara, shield # 20203 during the arrest process used another officers shield number # 9466 on march 6th 2015 32 precinct. Look at all the documents that the Plaintiff submits. No evidence was presented at trial. The bank testified that all three cards where legit. no fraud! the accounts are still open

Was anyone else involved?

Who else saw what happened?

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received.

The claimant was subjected to personal and physical injuries, an unlawful seizure, false arrest and imprisonment, malice prosecution, abuse of process, negligence, intentional and negligent infliction of emotional distress, harassment, unconstitutional conditions of confinement and to a deprivation of his constitutional civil and common law rights. As a result of the officers actions, claimant experienced personal physical and emotional injuries pain and suffering, fear and invasion of privacy, psychological pain, emotional distress, mental anguish, embarrassment and humiliation.

IV. Exhaustion of Administrative Remedies:

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted." Administrative remedies are also known as grievance procedures.

A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?
 Yes No

If YES, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).

B. Does the jail, prison or other correctional facility where your claim(s) arose have a grievance procedure?

Yes No Do Not Know

C. Does the grievance procedure at the jail, prison or other correctional facility where your claim(s) arose cover some or all of your claim(s)?

Yes No Do Not Know

If YES, which claim(s)?

D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose?

Yes No

If NO, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

Yes No

E. If you did file a grievance, about the events described in this complaint, where did you file the grievance?

Anna M. Cross AMKC C95

1. Which claim(s) in this complaint did you grieve?

-forged license, forged credit cards and a stolen iphone. All are false allegations

2. What was the result, if any?

no Reply

3. What steps, if any, did you take to appeal that decision? Describe all efforts to appeal to the highest level of the grievance process.

N/A

F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here:

N/A

2. If you did not file a grievance but informed any officials of your claim, state who you informed, when and how, and their response, if any:

311, Prisoners Rights, and grievance processes.

G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.

Plaintive was arrested in ~~lot~~ 201 W 132st in front of 7th AVE. the police officers statement said the plaintive was at 201 W 132st the officer came to car and lied and stated that the plaintive was parked in front of a church which was located in the middle of the block

Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.

V. **Relief:**

State what you want the Court to do for you (including the amount of monetary compensation, if any, that you are seeking and the basis for such amount). I want my case dismissed and a compensation of 50 million dollars for unlawful seizure false arrest and imprisonment.

\$ 50,000,000.00

On
these
claims

VI. Previous lawsuits:

A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

Yes ___ No

B. If your answer to A is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another sheet of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff _____
Defendants _____

2. Court (if federal court, name the district; if state court, name the county) _____

3. Docket or Index number _____

4. Name of Judge assigned to your case _____

5. Approximate date of filing lawsuit _____

6. Is the case still pending? Yes ___ No ___
If NO, give the approximate date of disposition _____

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) _____

On
other
claims

C. Have you filed other lawsuits in state or federal court otherwise relating to your imprisonment?

Yes ___ No

D. If your answer to C is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff _____
Defendants _____

2. Court (if federal court, name the district; if state court, name the county) _____

3. Docket or Index number _____

4. Name of Judge assigned to your case _____

5. Approximate date of filing lawsuit _____

6. Is the case still pending? Yes ___ No
 If NO, give the approximate date of disposition _____
7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) _____

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 24 day of DEC, 2015

Signature of Plaintiff

Inmate Number

Institution Address

AHMADU SANVABA
3491502700
181 HAZEN STREET
ELMHURST NY 11370

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint and provide their inmate numbers and addresses.

I declare under penalty of perjury that on this 24 day of DEC, 2015 I am delivering this complaint to prison authorities to be mailed to the *Pro Se* Office of the United States District Court for the Southern District of New York.

Signature of Plaintiff:

SANVABA AHMADU

I will send the amended complaint as soon as possible
SANKARA V. Doc Officers ETAL ISKV 470

SANHARA V. DOC OFFICER ET AL

(3) → 4

Officer M. Brown ^{15CV8470} never bring my legal work to me. when I came back from court on OCT 1, 2015. I then went to the Law Library on OCT 2, 2015 when I came back from the Law library the officer that saved my food gave me the food which was lunch. when I ate the food and after I finished 15 minutes later I started to get chest pains - and ~~my throat~~ have throat complications then I told the officer to call medical for me because I'm having chest pains and throat complications. Then officer Williams denied me medical attention. Then officer Francise who escorts inmates to get their medication saw me throwing up automatically takes to get medical help. when I get to medical the doctor prescribed me anti-biotics. Also he gives me two anti-biotics on the spot. All of these problems transpired since ~~the~~ T.G. removed Captain Plaska from C-95 AMKC Building. I refused to go back to my original housing area which was 17-west-A side. where officer Williams who denied me medical attention from the start. They moved me to 18 west B-side. At my new housing area I was O.K. I then call 311 to report the

SANKARA V. DOL OFFICER 1 → 2

IS CV 247011 FLDAL

ON AUGUST 29, 2015 AFTER 9:00 AM. I WAS GOING TO GET MY MEDICATION. WHEN I WAS ON MY WAY BACK FROM GETTING MY MEDICATION, CAPTAIN PLASKA ALONG WITH ABOUT FIVE OTHER OFFICERS ESCORTED MYSELF AND OTHER INMATES TO THE GYM. WHEN WE GOT TO THE GYM WE WERE TOLD BY THE OFFICERS TO STRIP OFF OUR CLOTHES AND DURING THE STRIP SEARCH ONE OF THE OFFICERS TOLD US TO SQUAT AND COUGH. ~~AS I WAS SQUATTING AND COUGHED~~ ONE OF THE D.O.C OFFICERS INSERTED HIS FINGER UP INTO MY RECTUM. THEN HE SAID THAT THEY WERE LOOKING FOR DRUGS. I ASKED CAPTAIN PLASKA WHY IS THE OFFICER VIOLATING MY RIGHTS? THEN CAPTAIN PLASKA LOOKED THE OTHER WAY AS IF HE DIDN'T KNOW WHAT WAS GOING ON. THEN CAPTAIN PLASKA STATED "WE ARE LOOKING FOR WEAPONS." FIRST ONE OF THE OFFICERS SAID "WE ARE LOOKING FOR DRUGS." THEN WHEN THE OFFICER VIOLATED MY RIGHTS BY INSERTING HIS FINGER INTO MY RECTUM ~~THE SITUATION CHANGED~~ THEN ~~THE~~ CAPTAIN PLASKA SAID THAT "WE ARE LOOKING FOR WEAPONS." THEN I TOLD CAPTAIN PLASKA I'M GOING TO CALL 311 AND REPORT WHAT JUST HAPPENED. I ALSO HAVE PEOPLE WHO ARE WITNESSES THAT SEEN WHAT HAPPENED TO ME. THEY TOO WERE TREATED THE SAME WAY. ONE OF THESE PEOPLE NAMES IS DONNELL MURDOUGH HIS B.C. 441-15-01 173. THE SECOND PERSON NAME IS EL DEY.

NEX →

SANKARA V. DOOR OFFICER ET AL

(5) → 6

OFFICER MONTRE ^{15CV470} was my witness, that I was throwing up AND DOCTOR ALI DENIED ME ANTI-BIOTICS. WHEN I CAME BACK ON OCT 28th 2015 TO MY HOUSING AREA FROM THE LAW LIBRARY I WAS AFRAID TO EAT THE FOOD THEY WERE SERVING. I CALLED PRISONERS RIGHTS AND I REPORTED THE FOOD POISONING INCIDENT. I WAS HAVING STILL A LOT OF CHEST PAINS, I WAS COUGHING I WAS VERY SICK AND THE PRISONERS RIGHTS SAVED MY LIFE. THEY SENT AN E-MAIL TO MEDICAL AND THE MEDICAL CALLED ME OCT 31ST 2015 EARLY IN THE MORNING. I WAS VERY SICK AND THEN THE DOCTOR PRESCRIBED ME AZITHROMYCIN TABLET 250MG 2 TABLETS ON THE FIRST DAY. THEN I HAD TO START SUDAFED TABLET 30MG. THEN I HAD TO TAKE GUAFENESIN TABLET 200MG THE DOCTOR TOOK MY BLOOD WORK. HE THEN TOOK CHEST X-RAY AND EKG WHEN HE DID THIS THE RESULTS CAME BACK FOR THE CHEST DISCOMFORT - 786.59 AND THE RESULT FOR THE BLOOD QUESTIONABLE FOOD POISONING. ON AUGUST 29th 2015 INCIDENT I PUT THE CLAIM FOR WHAT HAPPENED ON AUGUST 29th 2015 I PUT THE CLAIM IN ON SEPTEMBER 18th 2015 I RECEIVED CLAIM NO: 2015 P1028549 ON OCT 13th 2015 I RECEIVED ANOTHER CLAIM NUMBER WHICH WAS THE SAME CLAIM NUMBER BUT IT WAS A DISALLOWANCE - OVER 90 DAYS.



SANKARA, AHMADOU

NYSID: 11802841J BookCase: 3491502709
 Facility Code: AMKC Housing Area: W17LA
 45 Y old Male, DOB: 07/18/1970
 2350 DAVIDSON AVE, BX, NY-10468

Insurance: Self Pay

Appointment Facility: Anna M. Kross Correctional Facility

09/03/2015

Appointment Provider: Theodora T Kay-Njemanze, MD

Current Medications

Omeprazole 20 mg Capsule Delayed Release 1 tab Daily, stop date 09/18/2015
 Reyataz 300 MG Capsule 1 tab Daily, stop date 10/19/2015
 Truvada 200-300 MG Tablet 1 tab Daily, stop date 10/19/2015
 Norvir 100 mg Tablet 1 tab Daily, stop date 10/19/2015
 Diphenhydramine HCl 25 MG Capsule 1 cap At Bedtime, stop date 09/19/2015
 Remeron 15 MG Tablet 1 tab At Bedtime, stop date 09/19/2015
 Multiple Vitamin APP Tablet 1 tab Daily, stop date 11/24/2015
 Metamucil 30.9 % Powder 1 packet Daily, stop date 09/11/2015

Past Medical History

2012- s/p GSW to abdomen. Lincoln Hospital
 Heartburn
 Heartburn
 Adjustment disorder with mixed anxiety and depressed mood
 Mood disorder NOS
 Diagnosis deferred
 Gastritis, unspecified, without mention of hemorrhage
 Abnormal findings NEC
 Bronchitis, not specified as acute or chronic
 Insomnia
 Drug addiction NOS
 Allergy, unspecified
 BMI 27.0-27.9, ADULT
 MENTAL DISOR NOS OTH DIS
 Diagnosis deferred

Allergies

Sustiva: dizziness: Side Effects

Reason for Appointment

1. Injury # 1500

History of Present Illness

Notes:

Pt seen for above injury, pt stated that on August 29th 2015 he felt he was sexually abused and rights were violated when he was asked to strip search in the gym and during which a rectal search was performed. Pt stated he felt uncomfortable and reported his case by calling 311 and prison rights advocate on 9/1/2015. pt denied any bleeding/diff having a bowel movement or bowel incontinence.

TEMPLATES:

Rikers Injury Report

Injury Report:

General

Injury Report #: 1500
 Event Location: Recreation space
 Intentionality: Unintentional
 Cause: other (specify)
 Verified Injury: Injury by history only
 Did the patient have a blow to the head? No
 Did the patient ever lose consciousness? No
 Was the patient ever dazed and confused after injury? No

VISIT COMPLEXITY SCALE:

NON-INTAKE ACUITY

Non-Intake Acuity Scale 2: Complicated sick call (problem requiring diagnostic evaluation, documented history, physical exam, specified follow up) OR One chronic condition addressed with components specified in (3)

Vital Signs

		BP	
104/69	09/03/2015 01:12:38 AM	Theodora Kay-Njemanze	
		Pulse	
62	09/03/2015 01:12:38 AM	Theodora Kay-Njemanze	

Patient: SANKARA, AHMADOU DOB: 07/18/1970 Progress Note: Theodora T Kay-Njemanze, MD 09/03/2015

Note generated by eClinicalWorks EMR/PM Software (www.eClinicalWorks.com)

**SANKARA, AHMADOU**

NYSID: 11802841J BookCase: 3491502709
 Facility Code: AMKC Housing Area: W17LA
 45 Y old Male, DOB: 07/18/1970
 2350 DAVIDSON AVE, BX, NY-10468

Insurance: Self Pay

Appointment Facility: Anna M. Cross Correctional Facility

09/03/2015

Appointment Provider: Roman Trojanowski, LCSW

Current Medications

Omeprazole 20 mg Capsule Delayed Release 1 tab Daily, stop date 09/18/2015
 Reyataz 300 MG Capsule 1 tab Daily, stop date 10/19/2015
 Truvada 200-300 MG Tablet 1 tab Daily, stop date 10/19/2015
 Norvir 100 mg Tablet 1 tab Daily, stop date 10/19/2015
 DiphenhydrAMINE HCl 25 MG Capsule 1 cap At Bedtime, stop date 09/19/2015
 Remeron 15 MG Tablet 1 tab At Bedtime, stop date 09/19/2015
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Past Medical History

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 Insomnia
 Drug addiction NOS
 Allergy, unspecified
 BMI 27.0-27.9, ADULT
 MENTAL DISOR NOS OTH DIS
 Diagnosis deferred

Allergies

Sustiva: dizziness: Side Effects

Reason for Appointment

1. MH Clinicians Progress Note

History of Present IllnessTEMPLATES:**MH CLINICIANS PROGRESS NOTE**SUBJECTIVE:

Subjective

= Patient states, "Something happened in the gym on the 29 th."

Pt reports he was inappropriately touched on 8-29-15 at approx 8 to 9 am. Pt reports he was directed by DOC to go to gym for search. Pt was asked to remove clothing. Pt reports Capt Palrshy and additional C. O. staff emebers were in the AMKC gym. Pt reports that one CO who pt can not ID by name of face inserted his finger into pts rectum during search. Pt reports feeling traumatized. , Pt reports good compliance without adverse side effects., Pt request to continue medications, Pt coping well., Pt interacts w/o incident in MH clinic, Pt denies any SI HI AH VH PI, Pt wants to continue w MH tx, Pt does not pose an imminent risk to himself or others at this time. , Chart Reviewed. MHP consulted with MD who examined pt on this incident and who ref pt to MH eval.

Last TPR done 8-24-15. Last psych med review 8-22-15

RE-REFERRAL REMINDER:

Re-Referral Reminder **RE-REFERRAL TO DISCHARGE PLANNING SHOULD HAPPEN IF - Change in the client's status that will impact their discharge plan: Homelessness, SMI status, hospital return, sentencing, civil commitment, and/or desire to accept an entitlement service or any discharge planning service that was previously declined.**

MENTAL HEALTH -- CURRENT AND HX:

Mental Health -- Current and Hx

Mental Health Hx? (If yes, describe in Notes field) *Yes sexual abuse trauma on 8-29-15*Current suicidal ideation/plan? *No*Remove client from BradH Cohort [has been treated less than 3 times]? *No /*Does client need further treatment for mental illness? *Yes /***Examination**

Patient: SANKARA, AHMADOU DOB: 07/18/1970 Progress Note: Roman Trojanowski,
 LCSW 09/03/2015

Note generated by eClinicalWorks EMR/PM Software (www.eClinicalWorks.com)



SANKARA, AHMADOU

NYSID: 11802841J BookCase: 3491502709
 Facility Code: AMKC Housing Area: W18UB
 45 Y old Male, DOB: 07/18/1970
 2350 DAVIDSON AVE, BX, NY-10468

Insurance: Self Pay

Appointment Facility: Anna M. Kross Correctional Facility

Appointment Provider: Rashid Mian, MD

10/27/2015

Current Medications

Multiple Vitamin APP Tablet 1 tab Daily, stop date 11/24/2015
 Zantac 150 MG Tablet 2 tabs in am, stop date 11/17/2015
 Metamucil 30.9 % Powder 1 packet Daily, stop date 11/01/2015
 Truvada 200-300 MG Tablet 1 tab Daily, stop date 12/13/2015
 Norvir 100 mg Tablet 1 tab Daily, stop date 12/13/2015
 Reyataz 300 MG Capsule 1 tab Daily, stop date 12/13/2015
 Remeron 15 MG Tablet 1 tab At Bedtime, stop date 11/19/2015
 Alum & Mag Hydroxide-Simeth 400-400-40 MG/5ML Suspension 30cc ,stat 30cc Every 12 Hours, stop date 11/10/2015

Past Medical History

2012- s/p GSW to abdomen. Lincoln Hospital
 Heartburn
 Heartburn
 Adjustment disorder with mixed anxiety and depressed mood
 Mood disorder NOS
 Diagnosis deferred
 Gastritis, unspecified, without mention of hemorrhage
 Abnormal findings NEC
 Bronchitis, not specified as acute or chronic
 Insomnia
 Drug addiction NOS
 Allergy, unspecified
 BMI 27.0-27.9, ADULT
 MENTAL DISOR NOS OTH DIS
 Diagnosis deferred

Allergies

Sustiva: dizziness: Side Effects

Reason for Appointment

1. Medication follow-up
 2. Seen in housing area he went to see medical doctor because had chest paone however alsoi states that he vomitted after eating food thinks the food was contaminated.states he goes to law library for long time and his food is saved when he eats the food he becomes sick.However no cardiac problems were found and he was given medications for GERD.States he is muslim amd prays long time in morning.States he is sleeping only few hours and get up vey early and then cant sleep states his medications was decreased by the last doctor and since then he has more sleeping problems.Also admit that he is illegal and is working on his case.

History of Present Illness

TEMPLATES:

PSYCHIATRY - MEDICATION REEVALUATION

SUBJECTIVE:

Subjective
 = Patient states, "I want my medications back I am not sleeping."

BRIEF SUMMARY ASSESSMENT AND PLAN:

Brief Summary Assessment and Plan
 Brief Summary Assessment and Plan (describe in Notes field):
 45 year old African male who report insomnia since his medicatios were changed he wants to go back previous medications.He appears to be paranoid about his food and does vomitting after eating and ends up seeing medical doctor for chest pain.Will adjust the medications and patiernt counseled about ythe food,encouraged to stay in his house at the time of food delivery.

Examination

OBJECTIVE:

Objective:
 = ., Pt is A+OX3, No reported perceptual disturbannces. No suicidal or homicidal ideation reported c/o insomnia and anxiety

MENTAL STATUS:

Appearance:

= Chronological Age

Patient: SANKARA, AHMADOU DOB: 07/18/1970 Progress Note: Rashid Mian, MD 10/27/2015
 Note generated by eClinicalWorks EMR/PM Software (www.eClinicalWorks.com)

Pharmacy

2. Upper respiratory disease NOS

Start Azithromycin Tablet, 250 MG, 2 tablets on the first day, then 1 tablet daily for 4 days, Orally, As Directed, 5 days, Pharmacy

Start DiphenhydrAMINE HCl Capsule, 25 MG, 1 cap, Orally, at AM, 7 days, Pharmacy

Start Ibuprofen Tablet, 400 MG, 2 tabs, Orally, Twice a Day, 5 days, Pharmacy

more likely upper URI. Will start emperic treatment due to his chrinic medical condition. Advise RTC if he has more fever, cough, chill.

Appointment Provider: Joon Park, MD



Electronically signed by Joon Park MD on 10/02/2015 at 05:25 PM EDT

Sign off status: Completed

Anna M. Kross Correctional Facility
18-18 Hazen Street
East Elmhurst, NY 11370
Tel: 718-546-3550
Fax:

Patient: SANKARA, AHMADOU DOB: 07/18/1970 Progress Note: Joon Park, MD 10/02/2015

Note generated by eClinicalWorks EMR/PM Software (www.eClinicalWorks.com)



SANKARA, AHMADOU

NYSID: 11802841J BookCase: 3491502709
 Facility Code: AMKC Housing Area: W18UB
 45 Y old Male, DOB: 07/18/1970
 2350 DAVIDSON AVE, BX, NY-10468

Insurance: Self Pay

Appointment Facility: Anna M. Cross Correctional Facility

10/31/2015

Appointment Provider: Joon Park, MD

Current Medications

Remeron 30 mg Tablet 30 mg At Bedtime, stop date 11/03/2015
 Benadryl 50 mg Capsule 50 mg At Bedtime, stop date 11/03/2015
 Multiple Vitamin APP Tablet 1 tab Daily, stop date 11/24/2015
 Zantac 150 MG Tablet 2 tabs in am, stop date 11/17/2015
 Metamucil 30.9 % Powder 1 packet Daily, stop date 11/01/2015
 Truvada 200-300 MG Tablet 1 tab Daily, stop date 12/13/2015
 Norvir 100 mg Tablet 1 tab Daily, stop date 12/13/2015
 Reyataz 300 MG Capsule 1 tab Daily, stop date 12/13/2015
 Alum & Mag Hydroxide-Simeth 400-400-40 MG/5ML Suspension 30cc ,stat 30cc Every 12 Hours, stop date 11/10/2015

Past Medical History

2012- s/p GSW to abdomen. Lincoln Hospital
 Heartburn
 Heartburn
 Adjustment disorder with mixed anxiety and depressed mood
 Mood disorder NOS
 Diagnosis deferred
 Gastritis, unspecified, without mention of hemorrhage
 Abnormal findings NEC
 Bronchitis, not specified as acute or chronic
 Insomnia
 Drug addiction NOS
 Allergy, unspecified
 BMI 27.0-27.9,ADULT
 MENTAL DISOR NOS OTH DIS
 Diagnosis deferred

Allergies

Sustiva: dizziness: Side Effects

Reason for Appointment

1. responses to complain

History of Present Illness

Notes:

cough, upper respiratory infection
 reated chest discomfort, epigatric area, worsening with food intake, movement. No radiation pain,
 Questionable food poisoning 3-4 days ago, but, symptoms resolved.

VISIT COMPLEXITY SCALE:

NON-INTAKE ACUITY

Non-Intake Acuity Scale 4: Three or more Chronic Conditions addressed as in (3) OR Emergency response in the facility OR acutely ill patients requiring phone consultation with Urgi, specialist, phone call to community provider

Vital Signs

	BP	
136/84	10/31/2015 07:35:39 PM	Joon Park
	Pulse	
88	10/31/2015 07:35:39 PM	Joon Park
	RR	
16	10/31/2015 07:35:39 PM	Joon Park
	Temp	
98.8	10/31/2015 07:51:37 PM	Joon Park
	SaO2	
99	10/31/2015 07:51:37 PM	Joon Park

Examination

General Examination:

GENERAL APPEARANCE: no acute distress.
 HEART: RATE:-, regular, RHYTHM:-, regular.
 LUNGS: clear to auscultation bilaterally.
 ABDOMEN: soft, mild epigatrci pain with palpation/ND, BS present.

Assessments

1. Upper respiratory disease NOS - 478.9
2. GERD - 530.81
3. Chest discomfort - 786.59

Treatment**1. Upper respiratory disease NOS**

Start Azithromycin Tablet, 250 MG, 2 tablets on the first day STAT then 1 tablet daily for 4 days, Orally, As Directed, 5 days, Pharmacy
Start Sudafed Tablet, 30 mg, 1 tab, Orally, Twice a Day, 7 days, Pharmacy

Start Guaifenesin Tablet, 200 MG, 1 tab, Orally, Twice a Day, 7 days, Pharmacy

LAB: CHEM 7 PANEL

LAB: LIVER PROFILE

LAB: CBC w DIFF & PLATELETS

LAB: HELICOBACTER ANTIBODY (G.A.M)

Diagnostic Imaging: Chest PA, Lateral Upright (XRAY)

Responses

1. cough, upper respiratory infection- start 5 days of Azithromycin and decongestant, will obtain chest x ray
2. reateated chest discomfort, epigatric area, worsening with food intake, movement. No radiation pain- Normal EKG, more likey GERD or grastric ulcer. Ordered H. Pylori antibody. Continue Zantac. PPI (omeprozole has major drug interaction with his HAART, not recommanded)
3. Questionable food poisoning 3-4 days ago, but, symptoms resolved- asytmomatic. ordered CBC, and Chemistry. scheduled medical FU in 2 weeks.

2. Chest discomfort

Diagnostic Imaging: EKG (DI)

Addendum:

10/31/2015 08:35 PM Edouard, Mireille > Azithromycin 250 mg x2 tabs given as ordered.- M. Edouard , RN

Appointment Provider: Joon Park, MD



Patient: SANKARA, AHMADOU DOB: 07/18/1970 Progress Note: Joon Park, MD 10/31/2015

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SANKARA, AHMADOU

NYSID: 11802841J BookCase: 3491502709
Facility Code: AMKC Housing Area: W17LA
45 Y old Male, DOB: 07/18/1970
2350 DAVIDSON AVE, BX, NY-10468

Insurance: Self Pay

Appointment Facility: Anna M. Kross Correctional Facility

10/02/2015

Appointment Provider: Joon Park, MD

Current Medications

Reyataz 300 MG Capsule 1 tab Daily, stop date 10/19/2015
Truvada 200-300 MG Tablet 1 tab Daily, stop date 10/19/2015
Norvir 100 mg Tablet 1 tab Daily, stop date 10/19/2015
Multiple Vitamin APP Tablet 1 tab Daily, stop date 11/24/2015
Zantac 150 MG Tablet 2 tabs in am, stop date 11/17/2015
Omeprazole 20 mg Capsule Delayed Release 1 cap Daily, stop date 10/24/2015
DiphenhydrAMINE HCl 25 MG Capsule 1 cap At Bedtime, stop date 10/24/2015
Remeron 15 MG Tablet 1 tab At Bedtime, stop date 10/24/2015

Past Medical History

2012- s/p GSW to abdomen. Lincoln Hospital
Heartburn
Heartburn
Adjustment disorder with mixed anxiety and depressed mood
Mood disorder NOS
Diagnosis deferred
Gastritis, unspecified, without mention of hemorrhage
Abnormal findings NEC
Bronchitis, not specified as acute or chronic
Insomnia
Drug addiction NOS
Allergy, unspecified
BMI 27.0-27.9, ADULT
MENTAL DISOR NOS OTH DIS
Diagnosis deferred

Allergies

Sustiva: dizziness: Side Effects

Reason for Appointment

1. Cold symptoms

History of Present Illness

Notes:

runny nose, cough, sore throat approx 1 week.

VISIT COMPLEXITY SCALE:

NON-INTAKE ACUITY

Non-Intake Acuity Scale 4: Three or more Chronic Conditions addressed as in (3) OR Emergency response in the facility OR acutely ill patients requiring phone consultation with Urgi, specialist, phone call to community provider

Vital Signs

BP	
121/78	10/02/2015 12:07:59 PM Joon Park
Pulse	
87	10/02/2015 12:07:59 PM Joon Park
RR	
16	10/02/2015 12:07:59 PM Joon Park
Temp	
98.8	10/02/2015 12:07:59 PM Joon Park

Examination

General Examination:

GENERAL APPEARANCE: no acute distress.
HEENT: HEAD:-, normocephalic, atraumatic, FUNDI:-, disc not visualized, NOSE:-, clear discharge.
LUNGS: clear to auscultation bilaterally.
ABDOMEN: soft, NT/ND, BS present.

Assessments

1. CONSTIPATION NOS - 564.00
2. Upper respiratory disease NOS - 478.9

Treatment

1. CONSTIPATION NOS

Start Metamucil Powder, 30.9 %, 1 packet, Orally, Daily, 30 days,

LEGAL MAIL

NEW YORK 10007-1312
500 PEARL STREET NEW YORK
UNITED STATES COURTHOUSE
THE DANIEL PATRICK MOYNIHAN

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK
1299 BOIS
Rd & Hyde
CLERK



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