

State of New York
Court of Appeals



BEFORE: HON. SHIRLEY TROUTMAN,
Associate Judge

THE PEOPLE OF THE STATE OF NEW YORK,

-against-

Respondent,

**ORDER
DENYING
LEAVE**

CURTIS VAN STUYVESANT,

Appellant.


Appellant having applied for leave to appeal to this Court pursuant to Criminal Procedure Law § 460.20 from an order in the above-captioned case;*

UPON the papers filed and due deliberation, it is

ORDERED that the application is denied.

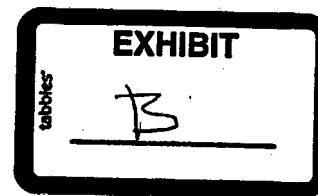
Dated: 5/27/2025

at Buffalo, New York


SHIRLEY TROUTMAN
Associate Judge

*Description of Order: Order of the Appellate Division, First Department, entered January 23, 2025, denying appellant's application for a writ of error coram nobis.

State of New York Court of Appeals



BEFORE: HON. SHIRLEY TROUTMAN,
Associate Judge

THE PEOPLE OF THE STATE OF NEW YORK,

Respondent,

-against-

**ORDER
DENYING
RECONSIDERATION**

CURTIS VAN STUYVESANT,

Appellant.

Appellant having moved for reconsideration in the above-captioned case of an application for leave to appeal denied by order dated May 27, 2025;

UPON the papers filed and due deliberation, it is

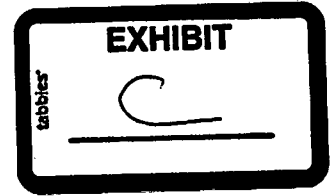
ORDERED that the motion for reconsideration is denied.

Dated:

10/27/2025


SHIRLEY TROUTMAN
Associate Judge

Supreme Court of the State of New York
Appellate Division, First Judicial Department



Present – Hon. Troy K. Webber,
David Friedman
Manuel J. Mendez
Martin Shulman,

Justice Presiding,

Justices.

The People of the State of New York,
Respondent,

Motion No. **2024-05683**

Ind. No. 5291/1998

Case No. 2024-06912

-against-

Curtis Van Stuyvesant,
Defendant-Appellant.

A decision and order of this Court having been entered on September 19, 2002, unanimously affirming a judgment of the Supreme Court, New York County (Stackhouse, J.), rendered on or about July 6, 1999, and an order entered on or about January 12, 2000 which denied his CPL 440 motion (*People v Van Stuyvesant*, 297 AD2d 559 [1st Dept 2002], lv denied 99 NY2d 586 [2003]),

And defendant-appellant, pro se, having moved, in the nature of a writ of error coram nobis, for a review of his claim of ineffective assistance of appellate counsel, to change the venue of the proceeding and for a default judgment,

Now, upon reading and filing the papers with respect to the motion, and due deliberation having been had thereon,

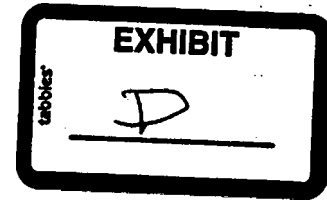
It is ordered that said application is denied.

ENTERED: January 23, 2025

Susanna Molina Rojas
Clerk of the Court



Commission for the Blind



ANDREW M. CUOMO
Governor

SHEILA J. POOLE
Acting Commissioner

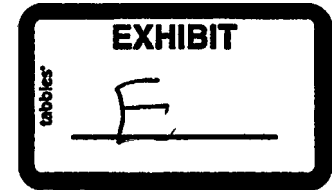
Verification of Legal Blindness

Name: Mr. Curtis Van Stuyvesant
Address: 308 West 94th St. #435 New York, NY 10025

NYSCB Registration No. CF# 182496

The above named person is registered as legally blind with the Commission for the Blind in accordance with New York State law, Section 8704.

Signature: <i>Nathaniel Beyer</i>
Title: Assistant Commissioner
Date: 05/01/2019



Hiba Sayed, MD
NYU LANGONE AMBULATORY CARE WEST SIDE
355 WEST 52ND STREET
NEW YORK NY 10019-6239
Phone: 646-754-2100
Fax: 646-754-2585

November 6, 2025

Patient: **Mr. Curtis C. Van Stuyvesant**

To Whom It May Concern,

I am writing on behalf of my patient, Curtis C. Van Stuyvesant, to request an increase in authorized home care hours. He is currently approved for 21 hours per week, which has proven insufficient to meet his daily functional, medical, and safety needs. Based on my clinical evaluation, I am requesting an increase to 8 hours per day, 7 days per week (56 hours weekly).

Medical Background

Curtis C. Van Stuyvesant is diagnosed with legal blindness, resulting in extremely limited visual functioning. This condition significantly impairs his ability to perform essential activities of daily living (ADLs) and instrumental activities of daily living (IADLs). Additionally, he has multiple chronic medical issues, including:

Anxiety

Spondylosis of lumbar region without myelopathy or radiculopathy

IBS (irritable bowel syndrome)

Gastroesophageal reflux disease

Malignant neoplasm of prostate

Legal blindness

Vitamin D deficiency

Claw hand due to intrinsic minus deformity

Cubital tunnel syndrome, bilateral

Chronic venous insufficiency

NASH (nonalcoholic steatohepatitis)

Essential hypertension

Primary hypogonadism in male

Uncomplicated degenerative myopia of both eyes

Epiretinal membrane (ERM) of left eye

Asteroid hyalosis of right eye

Meibomian gland dysfunction

Moderate recurrent major depression

Posttraumatic stress disorder

Hyperlipidemia

Chronic dyspnea

Sleep apnea

MGUS (monoclonal gammopathy of unknown significance)

History of prostate cancer

These conditions collectively contribute to substantial functional limitations and

increased vulnerability to injury, falls, medication errors, and inability to manage routine health tasks independently.

Functional Limitations & Safety Concerns

Due to his legal blindness and comorbid medical conditions, the patient has significant difficulty with:

- Safe mobility within the home, increasing fall risk
- Meal preparation and safe handling of food/kitchen appliances
- Medication administration, including identifying correct medications
- Personal hygiene and bathing, requiring assistance to prevent injury
- Household tasks, such as cleaning, laundry, and organization
- Attending medical appointments, monitoring symptoms, and managing follow-up care
- Emergency identification and response, as he cannot visually assess hazards

He lives alone, without informal caregivers who can consistently provide support.

Without adequate home care hours, he is at high risk for avoidable injury, malnutrition, medication mismanagement, and preventable hospitalization.

Medical Necessity for Increased Hours

Based on my clinical judgment, 8 hours per day of home care is medically necessary to ensure his safety, maintain functional abilities, and prevent complications. Increasing his service hours will allow caregivers to:

- Assist with ADLs and personal care
- Provide safe support for mobility
- Ensure accurate medication administration
- Prepare meals and monitor nutritional intake
- Assist with housekeeping and essential IADLs
- Reduce risk of falls, injuries, and emergency room visits
- Support overall health management and disease monitoring

Given his significant impairments and lack of visual function, the current 21 hours/week is insufficient and does not meet the level of care required for him to live safely and independently in the community.

I strongly recommend approval of 56 hours per week (8 hours/day, 7 days/week) of home care services. This increase is essential to maintain his health, prevent further decline, and ensure his continued ability to remain safely at home.

Should you require additional documentation, medical records, or clarification, please contact me directly at 646-754-2100.

Sincerely,

A handwritten signature in black ink, appearing to read "Hibe Sayed" followed by a dash and "MD". The signature is fluid and cursive.

Hibe Sayed, MD