INVOLUNTARY (9.27) aka 2PC Papers:

There are 3 Forms, 2 of which MUST to be completed:

1. **The Application**: The form has two sections:

PART A: Can be completed by a family member, hospital or nursing administrator and several other options exist. People who can legally compete this are **listed on the opposite side** of this sheet. It does not have to be completed by a physician, though it can be. It CANNOT be completed by a line clinician in the ED or hospital. All sections/blanks MUST be filled out. This includes the name of the hospital, which would be the hospital/campus where the inpatient unit is located. DO NOT put the name of the hospital the patient is at currently, unless the patient is being admitted to an inpatient unit at the same facility.

PART B: This will be completed by the psychiatrist at the receiving facility /inpatient unit. If there is a psychiatrist who has examined the patient at the sending site, he/she may complete this section, **sign**, **date and time**

- 2. The Certificates: Can be completed by any physician regardless of specialty who is licensed in the State of New York, including a licensed trainee. There MUST be a brief narrative, stating the reason for admission. A line or two describing symptoms is sufficient. It is useful to state that patient cannot or will not consent to voluntary admission and presents an imminent risk, or cannot take care of their own essential needs. All sections MUST be completed including date and time
- **3. Status and Rights:** This form will be completed at the receiving site.

VOLUNTARY (9.09, 9.13, 9.23):

1. Application:

Part A must be competed and signed and dated **by the patient.** A reason, no matter how brief, must be stated.

Part B must be signed, dated and timed by the physician admitting the patient.

This part can be completed by any licensed physician (including a licensed trainee) or a Nurse Practitioner.

Part C on the opposite page is for minors (less than 18Y). This should NOT be used for adults Part D also applies only to minors and is not needed for adults

2. Status and Rights:

Patient must sign this form, as well as the physician. The number of the MHLS office can be filled in at the receiving site.