

**APPLICATION FOR INVOLUNTARY ADMISSION
ON CERTIFICATE OF A DIRECTOR OF COMMUNITY
SERVICES OR DESIGNEE
Section 9.37 Mental Hygiene law**

Patient's Name (Last, First, M.I.)

"C" No:

Sex: Date of Birth:

Address:

I. GENERAL PROVISIONS FOR INVOLUNTARY ADMISSION ON CERTIFICATE OF A DCS OR DESIGNEE

A. Standard for Admission

If, in the opinion of a Director of Community Services (DCS) or an examining physician duly designated by him or her, a person has a mental illness for which immediate inpatient care and treatment in a hospital is appropriate and which is likely to result in serious harm to the person or others, the person may be admitted to a hospital providing such care and treatment, upon the certificate of the DCS or designee accompanied by an application for admission of the person.

"Likely to result in serious harm" means:

- A substantial risk of physical harm to the person as manifested by threats of or attempts at suicide or serious bodily harm or other conduct demonstrating that the person is dangerous to himself or herself (*"other conduct" shall include the person's refusal or inability to meet his or her essential need for food, shelter, clothing, or health care, provided that such refusal or inability is likely to result in serious harm if there is not immediate hospitalization*), or
- A substantial risk of physical harm to other persons as manifested by homicidal or other violent behavior by which others are placed in reasonable fear of serious physical harm.

B. Application and Certification

The application made by the DCS or his or her designee must be supported and accompanied by a Certificate of Examination by Director of Community Services or Designee (Form 475A), except under the circumstances described in the next paragraph.

In counties with a population of less than 200,000, a DCS who is not a physician but who is a licensed psychologist or a licensed clinical social worker may apply for admission of a person without a medical examination by a designated examining physician, if:

- A hospital approved by the State Commissioner of Mental Health to admit patients pursuant to Section 9.39 of the Mental Hygiene law is not located within 30 miles of the person;
- The DCS has made a reasonable effort to locate a designated examining physician but such a designee is not immediately available; and
- The DCS's application is supported by a Certificate of Observation by Director of Community Services (Form 475B) which states that after personal observation of the person, the DCS reasonably believes that the person may have a mental illness which is likely to result in serious harm to himself or herself or others and that inpatient care and treatment in a hospital may be appropriate.

Examining physicians designated by the DCS must be approved by the State Commissioner of Mental Health. A person is disqualified from acting as an examining physician if:

- he or she is not licensed to practice medicine in New York State,
- he or she is a relative of the person certified to be in need of hospitalization,
- he or she is a manager, trustee, visitor, proprietor, officer, director, or stockholder of the hospital to which it is proposed to admit such person, or has any financial interest in such hospital other than receipt of fees, privileges or compensation for treating or examining patients in such hospital, or
- he or she is on the staff of a proprietary hospital to which it is proposed to admit such person.

C. Custody and Transport

After completing the application, the DCS or his or her designee is empowered to take into custody, detain, transport, and provide temporary care for the person. Upon request of the DCS or designee, it shall be the legal duty of peace officers, acting pursuant to their special duties, or police officers to take into custody and transport the person as directed by such DCS or designee. Alternatively, the DCS or designee may request that an ambulance service provide transportation.

D. Hospital Evaluation

If a person is to be admitted on the basis of Form 475A (Certificate of Examination by Director of Community Services or Designee), the need for immediate hospitalization must be confirmed by a staff physician of the hospital prior to admission.

If a person is to be admitted on the basis of Form 475B (Certificate of Observation by Director of Community Services), a staff physician must certify upon examination of the person prior to admission that the person has a mental illness for which immediate inpatient care and treatment in a hospital is appropriate and which is likely to result in serious harm to the person or others. The need for hospitalization must then be confirmed by another staff physician within twenty-four hours after admission, using Form 475C (Examination within 24 hours).

Following admission, the patient may be involuntarily retained beyond 72 hours (excluding Sundays and holidays) only if he or she is examined by another physician who is a staff psychiatrist, and Form 475D (Examination within 72 Hours) is completed.

If no request for a court hearing is made, the hospital director may retain the patient for up to 60 days from the date of admission without taking other action.

If the hospital director determines that the condition of the patient requires hospitalization beyond 60 days:

- The patient may remain as a voluntary or informal patient if he or she is willing and suitable for such status.
- If the patient is unwilling or not suitable to remain as a voluntary or informal patient, the director must apply, before the end of the 60 day period, for a court order authorizing continued retention of the patient. The director must also inform the patient, the Mental Hygiene Legal Service, and others who received the original notice of the patient's commitment, that said director is applying for a court order, to give them the opportunity to request a hearing before the court, if they so desire.

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II. GENERAL INFORMATION

A. Mental Hygiene Legal Service

The Mental Hygiene Legal Service is an agency of the New York State Supreme Court which provides protective legal services, advice and assistance, including representation, to all patients admitted to psychiatric facilities. Patients are entitled to be informed of their rights regarding hospitalization and treatment, and have a right to a court hearing, to be presented by a lawyer, and to seek independent medical opinion.

There is a Mental Hygiene Legal Service office in many psychiatric hospitals. Where there is no office at the hospital, a representative of the Service visits periodically and frequently. Any patient or anyone in his or her behalf may see or communicate with a representative of the Service by telephoning or writing directly to the office of the Service or by requesting someone on the staff of the patient's ward to make such arrangements for him or her. The Mental Health Hygiene Legal Service representative for this hospital may be reached at: _____

B. Reimbursement

The patient is legally responsible for payment for the cost of care. Additionally responsible are the patient's spouse and in some cases parents of a patient under the age of 21. Also legally responsible are the committee, guardian, or trustee of a trust fund established for the support of the patient, or any fiduciary or payee of funds for patient.

Charges may be waived or reduced when there is inability to pay. Any person who applies for a waiver or reduction of charges must cooperate in a financial investigation to determine ability to pay.

STATE AND FEDERAL LAWS prohibit discrimination based on race, creed, color, national origin, age, sex or disability.

PART A		APPLICATION FOR ADMISSION									
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I hereby request that _____ be admitted to _____.

(Name of person)(Name of Hospital)

This request is made due to behavior and/or specific acts described below:

Under the penalty of perjury, I attest that the information supplied on this application is true to the best of my knowledge and belief.

Signature of Director of Community Services or Designee						Official Title					
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Address						DATE					
						MONTH		DAY		YEAR	

PART B		CUSTODY TRANSPORT OF THE PERSON ALLEGED TO BE MENTALLY ILL (OPTIONAL)									
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I hereby direct, under the Mental Hygiene Law, that the peace/police officers of _____ take the above-named person into custody and transport him/her to the above-named hospital.

(Department/Location)

-or-

I hereby request, under the Mental Hygiene Law, that _____ transport the above-named person to the above-named hospital.

(Name of Ambulance Service)

Physician's Signature						DATE			TIME			<input type="checkbox"/> A.M. <input type="checkbox"/> P.M.
						MONTH	DAY	YEAR	HOUR	MINUTE		

PART C		PHYSICIAN'S CONFIRMATION FOR IMMEDIATE HOSPITALIZATION									
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I am a physician on the staff of the above-named hospital providing services for persons with mental illness. I hereby confirm the following (Check one):

☐ That the above named person has been referred upon the application and certification of a **Director of Community Services or Designee** who is a **physician**, and that the above-named person is in need of immediate hospitalization.

☐ That the above named person has been referred upon the application and certification of a **Director of Community Services or Designee** who is a **non-physician**, and that I have examined the above-named person and determined that he or she has a mental illness for which immediate inpatient care and treatment in a mental hospital is appropriate and which is likely to result in serious harm to himself or herself or others.

Physician's Signature						DATE			TIME			<input type="checkbox"/> A.M. <input type="checkbox"/> P.M.
						MONTH	DAY	YEAR	HOUR	MINUTE		