

CARE4 MODULE NAME: PCS and EDM

Patients and Form 1 Application by Physician for Psychiatric Assessment

Overview:

A Form 1 is a legal tool completed by a physician that **allows a person to be detained at a hospital for up to 72 hours so that their mental health can be examined**. A person may subsequently be admitted as a voluntary or involuntary psychiatric patient OR sent home at any time before 72 hours has passed

Workflow:

- Physician signs paper copy of the Form 1 for the patient (print from external links) and documents same in their patient note
- The patient must be given Form 42 which notifies them that they have been formed
- The paper copy of the Form 1 must stay with the patient's chart at all times during the 72 hours
- Physicians are responsible for reviewing the patient prior to the completion of the 72 hours
- Care providers add the Forms intervention to the patient's worklist
- The MHA (Mental Health Act) Forms intervention is to be used in **both** ED and Inpatient Care Areas

MHA Forms

MHA Forms	
MHA Forms	<input type="radio"/> Not on MHA Form <input type="radio"/> Form 1 Application for Psychiatric Assessment Expires after 72 hours <input type="radio"/> Form 2 Order for Examination Expires once patient has been assessed by Physician in hospital <input type="radio"/> Form 3 Certificate of Involuntary Admission Expires after 2 weeks <input type="radio"/> Form 4 Certificate of Renewal 1st expires after 1 month 2nd expires after 2 months 3rd expires after 3 months <input type="radio"/> Form 5 Change to Voluntary Status
Form Expiry Date	
Form Expiry Time	
MHA Additional Forms	<input type="checkbox"/> Form 33 Incapacity <input type="checkbox"/> Form 47 Violation of CTO <input type="checkbox"/> Form 21 Certificate of Incapacity to Manage Property
Community Treatment Order Prior to Admission	<input type="radio"/> Yes <input type="radio"/> No
Appeal to Consent and Capacity Board	<input type="radio"/> Yes <input type="radio"/> No
Date of Consent and Capacity Hearing	
Additional Mental Health Forms	
Psychiatric Patient Advocacy Office(PPAO) Notification	<input type="radio"/> Yes <input type="radio"/> No Comment: