

# Form HO 11

## Regulation 4(1)(f)

### Mental Health Act 1983 section 4 - medical recommendation for emergency admission for assessment

#### THIS FORM IS TO BE USED ONLY FOR AN EMERGENCY APPLICATION

(full name and address of medical practitioner)

I

a registered medical practitioner, recommend that

(full name and address of patient)

be admitted to a hospital for assessment in accordance with Part 2 of the Mental Health Act 1983.

(date and time)

I last examined this patient on

at

(\* delete if not applicable)

\* I had previous acquaintance with the patient before I conducted that examination.

\* I am approved under section 12 of the Act as having special experience in the diagnosis or treatment of mental disorder.

I am of the opinion

- (a) that this patient is suffering from mental disorder of a nature or degree which warrants the patient's detention in a hospital for assessment for at least a limited period

AND

- (b) that this patient ought to be so detained

- (i) in the interests of the patient's own health  
(ii) in the interests of the patient's own safety  
(iii) with a view to the protection of other persons

AND

(delete the indents not applicable)

Please turn over

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- (c) it is of urgent necessity for the patient to be admitted and detained under section 2 of the Act.

**My reasons for this opinion are:**

*(your reasons should cover (a), (b) and (c) above. As part of them describe the patient's symptoms and behaviour and explain how those symptoms and behaviour lead you to your opinion; also explain why the patient ought to be admitted to hospital urgently and why informal admission is not appropriate)*

**Compliance with the provisions of Part 2 of the Act relating to applications under section 2 would involve undesirable delay, because**

*(say approximately how long you think it would take to obtain a second medical recommendation and what risk such a delay would pose to the patient or to other people)*

**Signed:** .....

**Date:** ..... **Time:** .....