

FORM 23 - Application to a Review Board for Inquiry into Whether Routine Clinical Medical Treatment should be Given to Involuntary Patient Without Consent (*Mental Health Act, R.S.N.B. 1973, c.M-10, s.30.1(1)*)



I, _____ of _____
(Name of Attending Psychiatrist) (Address)

being the attending psychiatrist of _____,
(Name of Individual)

an involuntary patient detained at _____,
(Name of Psychiatric Facility)

state that I personally examined the person on the _____ day of _____, 20 ____.

I am of the opinion that the patient suffers from a serious mental illness of such a nature or degree so as to require routine clinical medical treatment.

I applied to a tribunal on _____ for an order authorizing the giving
(Date)

of routine clinical medical treatment to the patient without consent but the tribunal refused to make an order under s.8.11 of the Act authorizing the giving of routine clinical medical treatment to the patient without consent.

I hereby apply to the review board for an inquiry into whether to administer routine clinical medical treatment to the patient without consent.

Dated this _____ day of _____, 20 ____.

(Signature of Attending Psychiatrist)

NOTE: This application is to be accompanied by a statement setting forth the facts and opinions on which the application is based.