FORM 27

CERTIFICATE OF ATTENDING PSYCHIATRIST (Mental Health Act, R.S.N.B. 1973, c.M-10, s.30.3(2)(a))

I.		. of	
(Name of Attending Psychiatrist)		(Address)
am the	e attending psychiatrist of		
		(Name of Patient)	
an inv	oluntary patient detained in	(Name of Psychiatric I	Facility)
		(Traine of 1 Sycinative 1	i wenity)
I am s	seeking an order authorizing the g	giving of specified psyc	chiatric treatment without consent to
the pa	tient who has reached the age of si	ixteen years.	
T.,	oninion the notions		
ın my	opinion, the patient		
(Chec	k one)		
[]	is not mentally competent to g	give or refuse to give	consent in relation to the specified
	psychiatric treatment.		
r 1	is montally commetant to sive		ancount in moletion to the enerified
[]] is mentally competent to give or refuse to give consent in relation to the sp psychiatric treatment but refuses to give such consent.		
	psychiatric treatment out reluges	to give buen consenu	
	• •	-	s certificate relates is not mentally
_		sent in relation to the s	specified psychiatric treatment are as
follow	'S :		
Dated	this day of	, 20	
			Signature of Attending Psychiatrist