## STATE OF NORTH CAROLINA Department of Health and Human Services Division of Mental Health, Developmental Disabilities, and Substance Abuse Services County File # **EXAMINATION AND RECOMMENDATION TO DETERMINE** Film # Client Record #\_\_\_\_ NECESSITY FOR INVOLUNTARY COMMITMENT Name of Respondent: DOB Race M.S. Age Address (Street, Box Number, City, State, Zip (use facility address after 1 year in County: facility): Phone: Legally Responsible Person Next of Kin (Name and Address) Relationship: Phone: Petitioner (Name and address) Relationship: Phone \_\_\_\_, 20\_\_\_ at \_\_\_ \_\_ o'clock \_\_\_.M. at \_ The above-named respondent was examined on OR, I examined the respondent via telemedicine technology on M. Included in the examination was an assessment of the respondent's: $\Box$ (1) current and previous mental illness or mental retardation including, if available, previous treatment history; (2) dangerousness to self or others as defined in G.S. 122C-3 (11\*); (3) ability to survive safely without inpatient commitment, including the availability of supervision from family, friends, or others; and (4) capacity to make an informed decision concerning treatment. $\Box$ (1) current and previous substance abuse including, if available, previous treatment history; and (2) dangerousness to himself or others as defined in G.S. 122C-3 (11\*). The following findings and recommendations are made based on this examination. For telemedicine evaluations only: I certify to a reasonable degree of medical certainty that the results of the examination via telemedicine were the same as if I had been personally present with the respondent OR The respondent needs to be taken to a facility for a face to face evaluation. (\*Statutory Definitions are on reverse side) **SECTION I - CRITERIA FOR COMMITMENT Inpatient.** It is my opinion that the respondent is: ☐ mentally ill; ☐ dangerous to self; ☐ dangerous to others (1st Exam – Physician or Psychologist) ☐ in addition to being mentally ill is also mentally retarded (2<sup>nd</sup> Exam – Physician only) none of the above Outpatient. It is my opinion that: ☐ the respondent is mentally ill ☐ the respondent is capable of surviving safely in the community with available supervision (Physician or Psychologist) based upon the respondent's treatment history, the respondent is in need of treatment in order to prevent further disability or deterioration which would predictably result in dangerousness as defined by G.S. 122C-3 (11\*) the respondent's current mental status or the nature of his illness limits or negates his/her ability to make an informed decision to seek treatment voluntarily or comply with

## SECTION II – DESCRIPTION OF FINDINGS

none of above

**Substance Abuse.** It is my opinion that the respondent is:

(1st Exam - Physician or Psychologist; 2nd Exam - If 1st

exam done by Physician, 2<sup>nd</sup> exam may be done by Qual. Prof.)

recommended treatment

Clear description of findings (findings for each criterion checked above in Section I must be described):

over

☐ a substance abuser

none of the above

☐ dangerous to himself or others

Impression/Diagnosis:

SECTION III - RECOMMENDATION FOR DISPOSITION	
□ Inpatient Commitment for days (respondent must be mentally ill <b>and</b> dangerous to self or others) □ Outpatient Commitment (respondent must meet <b>ALL</b> of the first four criteria outlined in Section I, <b>Outpatient</b> ) Proposed Outpatient Treatment Center or Physician: (Name)	
LME notified of appointment: (Name of LME and date)	
□ Other (Specify)	
M.D. Physician Signature	This is to certify that this is a true and exact copy of the Examination and Recommendation for Involuntary Commitment
Signature/Title – Eligible Psychologist/Qualified Professional	Original Signature – Record Custodian
Print Name of Examiner	Title
Address or Facility	Address or Facility
City and State	Date
Telephone Number	NOTE: Only copies to be introduced as evidence need to be certified

DECOMMENDATION FOR DISPOSITION

CC: Clerk of Superior Court where petition was initiated (initial hearing only)

Clerk of Superior Court where 24-hour facility is located or where outpatient treatment is supervised

Respondent or Respondent's Attorney and State's Attorneys, when applicable

Proposed Outpatient Treatment Center or Physician (Outpatient Commitment); Area Program / Physician (Substance Abuse Commitment) NOTE: If it cannot be reasonably anticipated that the clerk will receive the copies within 48 hours of the time that it was signed, the physician or eligible psychologist/qualified professional shall communicate his findings to the clerk by telephone.
\*STATUTORY DEFINITIONS

"Dangerous to self". Within the relevant past: (a) the individual has acted in such a way as to show: (1) that he would be unable without care, supervision, and the continued assistance of others not otherwise available, to exercise self-control, judgment, and discretion in the conduct of his daily responsibilities and social relations or to satisfy his need for nourishment, personal or medical care, shelter, or self-protection and safety; and (2) that there is a reasonable probability of his suffering serious physical debilitation within the near future unless adequate treatment is given. A showing of behavior that is grossly irrational, of actions that the individual is unable to control, of behavior that is grossly inappropriate to the situation, or of other evidence of severely impaired insight and judgment shall create a **prima facie** inference that the individual is unable to care for himself; or (b) the individual has attempted suicide or threatened suicide and that there is a reasonable probability of suicide unless adequate treatment is given; or (c) the individual has mutilated himself or attempted to mutilate himself and that there is a reasonable probability of serious self-mutilation unless adequate treatment is given. NOTE: Previous episodes of dangerousness to self, when applicable, may be considered when determining reasonable probability of physical debilitation, suicide, or self-mutilation.

"Dangerous to others". Within the relevant past, the individual has inflicted or attempted to inflict or threatened to inflict serious bodily harm on another, or has acted in such a way as to create a substantial risk of serious bodily harm to another, or has engaged in extreme destruction of property; and that there is a reasonable probability that this conduct will be repeated. Previous episodes of dangerousness to others, when applicable, may be considered when determining reasonable probability of future dangerous conduct.

"Mental illness: (a) when applied to an adult, an illness which so lessens the capacity of the individual to use self-control, judgment, and discretion in the conduct of his affairs and social relations as to make it necessary or advisable for him to be under treatment, care, supervision, guidance or control; and (b) when applied to a minor, a mental condition, other than mental retardation alone, that so lessens or impairs the youth's capacity to exercise age adequate self-control and judgment in

the conduct of his activities and social relationships so that he is in need of treatment.

"Substance abuser". An individual who engages in the pathological use or abuse of alcohol or other drugs in a way or to a degree that produces an impairment in personal, social, or occupational functioning. Substance abuse may include a pattern of tolerance and withdrawal.