

**Mental Health Act - Form Details**

Form #	DDM Item #	Form Name	Completed by	
MH1977	MH1977	Form 1	Admission Certificate	A Physician (at least 1 Certificate must be completed by a physician on staff at the facility)
MH1978	MH1978	Form 2	Renewal Certificate	A Physician or Psychiatrist (at least 1 Certificate must be completed by a psychiatrist; at least 1 must be by a physician on staff at the facility where detained)
MH1979	MH1979	Form 3	Order to Return a Formal Patient to a Facility	Person at AHS to which this authority has been delegated by Board, usually a physician
MH1980	MH1980	Form 4	Certificate of Transfer into Alberta	Minister of Health or designate
AH1981	AH1981	Form 5	Transfer of Formal Patient to a Jurisdiction Outside Alberta	Minister of Health or designate
MH1982	MH1982	Form 6	Memorandum of Transfer to Another Facility	Person at AHS to which this authority has been delegated by Board, from the sending facility
MH1983	MH1983	Form 7	Information	Informant
MH1984	MH1984	Form 8	Warrant	Judge
MH1985		Form 9	Extension of Warrant	Judge
MH1986	MH1986	Form 10	Statement of Peace Officer on Apprehension	Peace Officer
MH1987	MH1987	Form 11	Certificate of Incompetence to Make Treatment Decisions	Person at AHS to which this authority has been delegated by Board, usually a physician
MH1988	MH1988	Form 12	Application for Review Panel Hearing	Applicant (patient/agent/guardian/physician or, depending on the application, other person)
MH1989	MH1989	Form 13	Notice of Hearing Before Review Panel	Chair of Review Panel
MH1990	MH1990	Form 14	Decision of Review Panel Regarding Mental Incompetence to Make Treatment Decisions	Chair of Review Panel
AH1991	AH1991	Form 15	Decision of Review Panel regarding Treatment	Chair of Review Panel
AH1992	AH1992	Form 16	Decision of Review Panel regarding Transfer back to a Correctional Facility	Chair of Review Panel
MH1993	MH1993	Form 17	Decision of Review Panel Regarding Admission Certificates, Renewal Certificates or Community Treatment Orders	Chair of Review Panel
MH1994	MH1994	Form 18	Decision of Review Panel Regarding Renewal Certificates & Community Treatment Orders (Deemed Application)	Chair of Review Panel
MH2000	N/A	Form 19	Issuance of Community Treatment Order	Part 1 & 2: Physician, Psychiatrist or Designated Physician* (Act requires 2 physicians, one of whom must be a psychiatrist or designated physician); Part 3: Treatment or Care Provider (if treatment/care provided by AHS, signed by person designated by AHS not individual provider); Part 4: Psychiatrist or Physician responsible for supervising CTO; Part 5: Person consenting to CTO or Issuing Psychiatrist
MH2001	N/A	Form 20	Renewal of Community Treatment Order	Part 1 & 2: Physician, Psychiatrist or Designated Physician* (Act requires 2 physicians, one of whom must be a psychiatrist or designated physician); Part 3: Treatment or Care Provider (if treatment/care provided by AHS, signed by person designated by AHS not individual provider); Part 4: Psychiatrist or Physician responsible for supervising CTO; Part 5: Person consenting to CTO or Issuing Psychiatrist

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MH2002	N/A	Form 21 Community Treatment Orders Amendments to Community Treatment Order	A Psychiatrist or Designated Physician*; and depending on the amendment: Supervising Physician or Treatment or Care Provider (or AHS if care provided by AHS)
MH2003	N/A	Form 22 Community Treatment Order Cancellation or Expiry	A Psychiatrist or Designated Physician*
MH2004	N/A	Form 23 Community Treatment Order Apprehension Order	A Psychiatrist or Designated Physician*
MH2005	N/A	Form 24 Community Treatment Order Examination on Apprehension	Physician, Psychiatrist or Designated Physician* (Act requires 2 physicians, 1 must be psychiatrist or designated physician)
MH2006	N/A	Form 25 Community Treatment Order Designation of Physician	Person authorized by Board or AHS; acknowledged by "Designated Physician"
MH2007	N/A	Form 26 Community Treatment Order Written Statement	Issuing Psychiatrist or Designated Physician*
MH2008	N/A	Form 27 Community Treatment Order Non- compliance Report	Treatment or Care Provider

The date in brackets in the Form # column identifies forms that were modified to reflect the 2009/2010 amendments to the *Mental Health Act*

"Issuing Psychiatrist" means the psychiatrist, or the physician designated in accordance with section 9.7 of the Act, who **last** issued, renewed, or amended a CTO. (CTO Reg 1)

\*Designated Physician: **If psychiatrist not available** a physician may be designated under MHA 9.7(1). Designated Physician must consult with a psychiatrist prior to issuing, renewing, amending or canceling a CTO. Designation is for 2 years and may be renewed. Use Form 25 (CTO Reg 5)