

EMERGENCY ADMISSION
Section 9.39 Mental Hygiene Law

Patient's Name (Last, First, M.I.) "C" No.
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.....
Sex Date of Birth

Facility Name Unit/Ward No.

I. General Provisions for Emergency Admission

- A. In order for a person to be admitted to a hospital according to Section 9.39 of the Mental Hygiene Law, all the following requirements must be met:
- The hospital must be approved by the Commissioner of Mental Health to receive and retain patients according to this Section;
 - The person must be alleged to have a mental illness for which immediate observation, care, and treatment in a hospital is appropriate and which is likely to result in serious harm to himself or herself or others. "Likelihood to result in serious harm" means:
 - a substantial risk of physical harm to the person as manifested by threats of or attempts at suicide or serious bodily harm or other conduct demonstrating that the person is dangerous to himself or herself ("other conduct" shall include the person's refusal or inability to meet his or her essential need for food, shelter, clothing, or health care, provided that such refusal or inability is likely to result in serious harm if there is not immediate hospitalization), or
 - a substantial risk of physical harm to other persons as manifested by homicidal or other violent behavior by which others are placed in reasonable fear of serious physical harm.
 - A staff physician of the admitting hospital must examine the person and find that the person meets the standard for admission under this Section. The physician then completes this Form, OMH 474, Emergency Admissions.
- B. A person who is alleged or appears to be mentally ill may be taken into custody, transported, or removed to a hospital approved to accept emergency admissions, according to the following sections of the Mental Hygiene Law:
- Section 9.41 - Powers of Certain Peace Officers and Police Officers, Form OMH 474A/476A, I
 - Section 9.43 - Powers of Courts - Form OMH 465, Civil Order for Removal to Hospital
 - Section 9.45 - Powers of Directors of Community Services, Form OMH 474A/476A, II
 - Section 9.55 - Powers of Qualified Psychiatrists, Form OMH 474A/476A, III
 - Section 9.57 - Powers of Emergency Room Physicians, Form OMH 474A/476A, IV

C. On admission, the person will be given a written notice of status and rights as a patient admitted according to MHL Section 9.39. This notice will also be given to the Mental Hygiene Legal Service and up to three other persons designated by the person admitted.

If a person admitted according to this Section is to be retained in the hospital for more than 48 hours, another physician, who is a member of the psychiatric staff of the hospital, must examine the person and confirm the admitting physician's findings by completing page 2 of this form (OMH 474).

Within 15 days of admission, if it is determined that the person is not in need of involuntary care and treatment, s/he shall be discharged unless s/he is suitable and agrees to remain as a voluntary patient. If the person is in need of continued inpatient care and treatment, and is not suitable or will not agree to remain as a voluntary patient, s/he may be retained beyond 15 days only by completion of an application and two medical examinations as required for admission according to MHL Section 9.27 - Involuntary Admission on Medical Certification.

II. Record of Admission

A. The above-named person was brought to this hospital by:

Name		Title/Badge No. (as appropriate)		Address		Phone	
Relationship to Person		Address of Person		Time of arrival at hospital:		<input type="checkbox"/> A.M. <input type="checkbox"/> P.M.	
				MONTH	DAY	YEAR	HOUR MINUTE

B. Circumstances which led to the person being brought to this hospital: (If applicable) Person was taken into custody, transported, or removed to this hospital in accordance with MHL Section _____

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C. I HAVE EXAMINED THE ABOVE-NAMED PERSON PRIOR TO ADMISSION AND FIND THERE IS REASONABLE CAUSE TO BELIEVE THAT THE PERSON HAS A MENTAL ILLNESS FOR WHICH IMMEDIATE OBSERVATION, CARE AND TREATMENT IN A MENTAL HOSPITAL IS APPROPRIATE AND WHICH IS LIKELY TO RESULT IN SERIOUS HARM TO HIMSELF OR HERSELF OR OTHERS.

Physician's Signature

MONTH	DAY	YEAR	HOUR	MINUTE	<input type="checkbox"/> A.M. <input type="checkbox"/> P.M.
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III. Examination to Confirm Need for Extension of Emergency Admission Beyond 48 Hours

A. Pertinent and Significant Factors in Patient's Medical and Psychiatric History:

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B. Physical Condition (Including any special test reports):

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C. Mental Condition: The conduct of the patient (including statements made to me by others) has been:

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D. The patient shows the following psychiatric signs and symptoms:

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E. Does the patient show a tendency to cause serious harm to him/herself? Yes No to others? Yes No

If yes, explain: _____

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F. Mental diagnosis (if determined): _____

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IV. Psychiatrist's Confirmation

I have personally observed and examined _____ on:

MONTH	DAY	YEAR	HOUR	MINUTE	

 A.M. P.M.
(Patient's Name)

Based on such examination and the case history, I hereby confirm that there is reasonable cause to believe that the patient has a mental illness for which immediate care and treatment in a hospital is appropriate and which is likely to result in serious harm to himself or herself or others. The facts stated and information contained herein are true to the best of my knowledge and belief.

I am on the psychiatric staff of _____ Hospital. _____
(Signature)