

# Patient's consent form

Mental Health (Compulsory Assessment and Treatment) Act 1992  
Section 34, 34A and 34D



**This form can be used** to record the patient's consent under section 34D(2) of the Mental Health Act 1992 – A patient can consent to an application under section 34 or 34A for extension of their compulsory treatment order, to be determined by the court without an examination of the patient and formal hearing. Consent from patient must be given on the advice of a solicitor; and provided in writing to the court and the Director of Area Mental Health Services.

## Patient's details

Full name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Date of birth     \_\_\_ / \_\_\_ / \_\_\_

Current compulsory \* **community / inpatient (\* *select one*)** treatment order expires on: \_\_\_ / \_\_\_ / \_\_\_

## Patient's consent

By signing this document, I confirm that:

- I understand that the responsible clinician has applied for an extension of the compulsory treatment order for a further \* **six (6) / twelve (12) (\* *select one*)** months.
- I consent to the determination of the application to extend the order without a judge examining me and a formal hearing.
- I have been given advice by my lawyer and have had the opportunity to ask questions.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

## Solicitor's details

Full name \_\_\_\_\_

Name of Law Firm / Practice and address \_\_\_\_\_

Contact                                      Phone #                                      Email  
\_\_\_\_\_

I confirm that I have advised the patient regarding their consent which includes:

- What it means to have the patient's application determined without examination.
- What is the process and likely outcome of having the application determined without a formal hearing.
- That the patient does not need to consent.
- That the patient can withdraw their consent at any time before the application is determined.
- The length of time that the order will be extended for if the application is granted.
- That treatment will continue until the end of the specified period unless the patient is released from compulsory status before that time.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_