

Superior Court of Washington
County of _____

In re the Detention of: _____ Respondent	Case No. _____ Findings, Conclusions, and Order Authorizing Administration of Anti- Psychotic Medications (ORAUMED)
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Hearing

The court held a hearing on the petition to administer anti-psychotic medications filed by
 Western State Hospital Eastern State Hospital _____.

At the hearing:

Respondent appeared in person by video

and was represented by _____

Respondent waived their appearance through counsel

Separate appearance waiver has been filed.

Respondent orally waived their appearance through defense counsel, and the court accepts this waiver.

G.A.L. appeared in person by video waived appearance

G.A.L. waived Respondent's appearance

Witness _____ appeared in person by video or
 under CR 43 by telephone _____

Witness _____ appeared in person by video or
 under CR 43 by telephone _____

Agreed Order

The court considered the documents filed for this hearing, testimony of witnesses, relevant court records, and argument of counsel.

Findings of Fact. The court makes the following Findings of Fact:

The court finds by clear, cogent, and convincing evidence that:

1. **Notice:** The Respondent was provided all notice and statements of rights relative to the petition, and that petition was filed on _____.
2. **Consent to treatment**
 The Respondent did not consent to treatment with anti-psychotic medications.
3. **Medication Rights**
 The Respondent was advised of the right to refuse medication 24 hours prior to the hearing on this petition and those rights were respected.
 Anti-psychotic medications were administered 24 hours prior to this hearing over the refusal of the Respondent under circumstances which constituted an emergency.
4. **Reasons for the Use of Anti-psychotic Medication.** The Petitioner/s have a compelling interest in administering anti-psychotic medication to the Respondent because failure to medicate: (check all that apply):
 may result in a likelihood of serious harm.
 may result in substantial deterioration.
 may substantially prolong the length of involuntary commitment.

There is no less intrusive course of treatment than medication in the best interest of Respondent.

Explain:

5. **Medically acceptable alternative treatment is unavailable.** Anti-Psychotic medication is necessary and effective treatment for the Respondent, as evidenced by Respondent's prognosis with and without the treatment. Medically acceptable alternative forms of treatment are not available, have not been successful, or are not likely to be effective because:

6. **Rational Decision.** The Respondent would consent to being treated with anti-psychotic medication if the Respondent were capable of making a rational and informed decision concerning treatment, and this court is substituting its *judgment for that of the Respondent*.
7. **Agreed Order.** Respondent, after consultation with counsel, agrees to the entry of this order.

8. **Other:** _____
_____.

Conclusions of Law. The court makes the following Conclusions of Law:

9. **Jurisdiction:** The court has jurisdiction over the person and subject matter of this cause. The Petition to Administer Anti-Psychotic Medication was filed in a timely manner.

10. The Respondent may be involuntarily treated with anti-psychotic medication and side effect medication at clinically appropriate levels over his/her objections and over his/her express refusal for the period of the current involuntary treatment order, and any interim period during which he/she is awaiting trial or hearing on a new petition for involuntary treatment or involuntary medication.

11. **Other :** _____.

Order. The court orders that:

12. **Anti-psychotic Medication.** The petitioner and the hospital and/or other treatment providers are authorized to administer:

[] Anti-psychotic medications as requested in the petition; or

[] _____
_____.

and side effect medications at clinically appropriate levels to the Respondent over his/her objections and over his/her express refusal.

13. **Duration.** Anti-psychotic medication is authorized for the period of the current involuntary treatment order, and any interim period during which the Respondent is awaiting trial or hearing on a new petition for involuntary treatment or involuntary medication.

14. **Other.** _____.

Dated: _____

Judge / Commissioner

Approved as to form

Approved as to form

Attorney for Petitioner DPA/AAG

Attorney for Respondent

WSBA No. _____

WSBA No. _____

Respondent

Interpreter certifies that he/she has reviewed this order with Respondent

Interpreter