

**Section 5(4) – record of hospital in-patient**

To the managers of *(name and address of hospital)*

*(PRINT full name of the patient)*

It appears to me that –

- (a) this patient, who is receiving treatment for mental disorder as an in-patient of this hospital, is suffering from mental disorder to such a degree that it is necessary for the patient's health or safety or for the protection of others for this patient to be immediately restrained from leaving the hospital;

AND

- (b) it is not practicable to secure the immediate attendance of a registered medical practitioner or an approved clinician (who is not a registered medical practitioner) for the purpose of furnishing a report under section 5(2) of the Mental Health Act 1983.

I am *(PRINT full name)*

a nurse registered –

*(Delete whichever do not apply)*

- (a) in Sub-Part 1 of the register, whose entry includes an entry to indicate the nurse's field of practice is mental health nursing;
- (b) in Sub-Part 2 of the register, whose entry includes an entry to indicate the nurse's field of practice is mental health nursing;
- (c) in Sub-Part 1 of the register, whose entry includes an entry to indicate the nurse's field of practice is learning disabilities nursing;
- (d) in Sub-Part 2 of the register, whose entry includes an entry to indicate the nurse's field of practice is learning disabilities nursing.

Signed

Date

/ /

Time

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