



**EMERGENCY TRANSPORTATION FOR IMMEDIATE  
SCREENING**

Date:	Time:
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Individual's Name:	Case/Incident/Event No:
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Address (Street, City, County, State, Zip Code):	Date Of Birth:	Race:
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Place Of Contact:	Primary Language:	Sex: Gender Id:
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Name Of Person Reporting Individual's Condition to Undersigned:

Nearest Relative (Name):	Relationship:
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Address (Street, City, County, State, Zip Code):	Phone
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Pursuant to the provisions of SECTION 27-65-107, C.R.S. as amended, the individual was taken into protective custody by the undersigned and transported for an immediate screening at (name of facility):

The undersigned has probable cause to believe the individual is experiencing a behavioral health crisis or is gravely disabled and, as a result, without professional intervention the individual may be a danger to the person's self or others. Signs and/or symptoms consistent with this probable cause is/are:

*(Empty space for symptoms)*

Check if restraint intervention used during transport       By checking this box, I acknowledge I advised the individual of their rights during this transportation hold. (M-0.51)

Examples may include: *Feelings of paranoia    Agitated    Non sensical speech    Bizarre Complaints    Confusion*  
*Hearing Voices    Seeing Things    Homicidal Thoughts    Suicidal Thoughts*

Individuals Or Pets the Individual Is Responsible For (names/locations):

SIGNATURE:	TITLE:	BADGE/CERTIFICATION NO.:
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*This Emergency Transportation Hold must not last longer than 14 hours, except that when a person is transported to an emergency medical facility the involuntary transportation hold expires upon the facility receiving the individual for screening by an intervening professional. The intervening professional must screen the individual immediately when received by the facility. If an intervening professional is not immediately available, the individual must be screened within eight (8) hours after the individual's arrival to the facility, per Section 27-65-107(3)(a)-(b), 4(a)(I), C.R.S.*

**NOTICE TO INDIVIDUAL:** Section 27-65-107(1)(a), C.R.S., authorizes your immediate transport to an outpatient mental health facility, a designated facility, or other clinically appropriate facility. If such facilities are not available, you may be taken to an emergency medical services facility.

Required Distribution:     Facility  
   Respondent  
   Res. Record