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**PETITION FOR MENTAL  
HEALTH CRISIS HOLD**

**Use this packet only if the following statements are true:**

- You have probable cause to believe that the proposed patient is in a mental health crisis. That means they have a mental illness that prevents them from managing their own affairs and social relations, or are not fully capable of exercising self-control, judgment, or making decisions, and because of that, are likely to harm themselves or others.
  
- You are (a) An officer authorized to make arrests in the State of Nevada; (b) A physician, physician assistant, psychologist, marriage and family therapist, clinical professional counselor, social worker or registered nurse; (c) The spouse, parent, adult child or legal guardian of a person alleged to be a person in a mental health crisis; or (d) Any other person who has a legitimate interest in a person alleged to be a person in a mental health crisis.

A person in a mental health crisis **does not include** a person whose capacity is diminished by: epilepsy, intellectual disability, dementia, delirium, brief periods of intoxication caused by alcohol or drugs, or dependence upon or addiction to alcohol or drugs, unless a mental illness that can be diagnosed is also present which contributes to their diminished capacity.

**This packet contains the following forms:**

1. Petition for Mental Health Crisis Hold
2. Request for Submission
3. Order for Mental Health Crisis Hold

Resource Center  
1 South Sierra St., Third Floor  
Reno, NV 89501  
775-325-6731  
[www.washoecourts.com](http://www.washoecourts.com)

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## INSTRUCTIONS: STEP 1

### Complete the Petition for Mental Health Crisis Hold:

1) Print your name, address, telephone number, and email. →

2) Print the name of the proposed patient. →

3) Print an "X" in a box to indicate your relationship to the proposed patient. →

4) Complete the form, following the instructions on each page. }

1 Code: 1217  
2 Name: \_\_\_\_\_  
3 Address: \_\_\_\_\_  
4 Telephone: \_\_\_\_\_  
5 Email: \_\_\_\_\_  
6 Self-Represented Litigant

IN THE FA  
OF THE SECOND JUDICIAL DISTRICT COURT OF THE STA  
IN AND FOR THE COUNTY OF WASHO

ADA

In the Matter of: \_\_\_\_\_  
Case No. \_\_\_\_\_  
Dept. No. \_\_\_\_\_

(Name of proposed patient)  
Person alleged to be a person in a mental health crisis.

PETITION FOR MENTAL HEALTH CRISIS HOLD

I declare as follows:

1. I am ( check one):

An officer authorized to make arrests in the State of Nevada.  
 A physician,  physician assistant,  psychologist,  marriage and family therapist,  
 clinical professional counselor,  social worker,  or registered nurse.  
 The spouse,  parent,  adult child,  or legal guardian of a person alleged to be a person in a mental health crisis.  
 Any other person who has a legitimate interest in a person alleged to be a person in a mental health crisis (explain why you have a legitimate interest): \_\_\_\_\_

2. The proposed patient resides or can be found at: \_\_\_\_\_

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The Resource Center will give you a Case No. and Department No. when you file the documents with the court.

The penalty for willfully making a false statement under penalty of perjury is a minimum of 1 year, and a maximum of 4 years in prison, in addition to a fine of not more than \$5,000.00.  
N.R.S. §199.145

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## INSTRUCTIONS: STEP 2

### Complete the Request for Submission as Shown:

1) Print your name, address, telephone number, and email.

1 Code: 3860  
2 Name: \_\_\_\_\_  
3 Address: \_\_\_\_\_  
4 Telephone: \_\_\_\_\_  
5 Email: \_\_\_\_\_  
6 Self-Represented Litigant

The Resource Center will give you a Case No. and Department No. when you file the documents with the court.

2) Print the name of the proposed patient.

7 IN THE FAMILY  
8 OF THE SECOND JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA  
9 IN AND FOR THE COUNTY OF WASHOE  
10  
11 In the Matter of: \_\_\_\_\_ Case No. \_\_\_\_\_  
12 \_\_\_\_\_ Dept. No. \_\_\_\_\_  
13 (Name of proposed patient)

3) Print the date that you filed the document.

14 Person alleged to be a person in a mental health crisis.  
15 \_\_\_\_\_  
16 REQUEST FOR SUBMISSION  
17 I request that the Petition for Mental Health Crisis Hold filed on \_\_\_\_\_  
18 be submitted to the Court for decision. (Date document was filed)

4) Date, sign, and print your name.

19 This document does not contain the personal information of any person as defined by  
20 NRS 603A.040.  
21  
22  
23 Date: \_\_\_\_\_ Your Signature: \_\_\_\_\_  
24  
25 Print Your Name: \_\_\_\_\_  
26  
27  
28



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## INSTRUCTIONS: STEP 4

### Complete the Order for Mental Health Crisis Hold as Shown:

The Resource Center will give you a Case No. and Department No. when you file the documents with the court.

1) Print the name of the proposed patient.

Leave this date and signature blank for the judge.

1 Code: \_\_\_\_\_  
2  
3  
4  
5  
6 IN THE FAMILY DIVISION  
7 OF THE SECOND JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA  
8 IN AND FOR THE COUNTY OF WASHOE  
9 In the Matter of: \_\_\_\_\_ Case No. \_\_\_\_\_  
10 \_\_\_\_\_ Dept. No. \_\_\_\_\_  
11 \_\_\_\_\_  
12 (Name of Proposed Patient)  
13 Person alleged to be a person in a mental health crisis. \_\_\_\_\_  
14 \_\_\_\_\_  
15 ORDER FOR MENTAL HEALTH CRISIS HOLD  
16 TO: ANY PEACE OFFICER  
17 Based upon the Petition for Mental Health Crisis Hold and this Court being fully advised of the  
18 circumstances herein; and,  
19 It appears to the Court that the allegations set forth in the Petition for Mental Health Crisis Hold,  
20 and the testimony provided, present probable cause to believe the proposed patient is in a mental  
21 health crisis.  
22 THEREFORE, IT IS HEREBY ORDERED that the proposed patient, located at  
23 \_\_\_\_\_, be taken into custody and transported to a hospital  
24 pursuant to NRS 433A.160.  
25 **This order shall be in effect for 14 days from the date of entry.**  
26  
27 Date: \_\_\_\_\_ DISTRICT JUDGE  
28 \_\_\_\_\_

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## INSTRUCTIONS: STEP 5

### Filing the Documents

**Contact the Dianne Talley at 775-328-3186  
or [Dianne.Talley@washocourts.us](mailto:Dianne.Talley@washocourts.us) to inform the department of the  
case.**

Then, file the documents:

- A.** Take the completed forms to the Resource Center to be filed.  
The Resource Center is located on the third floor of the courthouse at 1 S. Sierra Street, Reno, NV.

The Resource Center will keep the original documents and return filed-stamped copies to you. Please make sure to keep copies of all the documents you file for your personal records.

**OR**

- B.** You may electronically file the documents by uploading the original documents to eFlex. Eflex is available online at <https://wcefex.washocourts.com/>.

If you have not done so, you will need to sign up for an eFlex account and submit the Efile User Agreement to the Second Judicial District Court, or email it to [eflexsupport@washocourts.us](mailto:eflexsupport@washocourts.us).

Sign into your eFlex account using the username and password you created and electronically file the:

- Petition for Mental Health Crisis Hold
- Request for Submission and Exhibit Index; and
  - ↳ Exhibit Cover page and Order for Mental Health Crisis Hold (as an exhibit to the Request for Submission)

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## **NOW WHAT HAPPENS?**

You must now wait for a decision from the judge. After the judge reviews the information provided in your application, they can either set the matter for a hearing or deny the application. You will be informed either way.

## **Legal Assistance**

The information in this packet is provided as a courtesy only. This packet is not a substitute for the advice of an attorney. Counsel is always recommended for legal matters.

If you do not have an attorney, you are encouraged to seek the advice of a licensed attorney or contact the Resource Center. **The Resource Center cannot give legal advice** but can give information regarding court procedures.

You may also wish to speak with a family law lawyer at no cost through the Law Library's "Lawyer in the Library" program, or to seek assistance from other free or reduced-cost legal resources in the area, to include:

### **LAWYER IN THE LIBRARY**

For information contact the Law Library at 775-328-3250.

[www.washoecourts.com/LawLibrary](http://www.washoecourts.com/LawLibrary)

#### **NEVADA LEGAL SERVICES**

204 Marsh Avenue Reno, NV 89509  
(775) 284- 3491 – leave a message if  
necessary

<https://nevadalegalservices.org>

#### **NORTHERN NEVADA LEGAL AID**

299 S. Arlington Avenue Reno, NV 89501  
(775) 329-2727 – leave a message if  
necessary

<https://nnlegalaid.org>