PROBATE COURT OF FRANKLIN COUNTY, OHIO JEFFREY D. MACKEY, JUDGE

THE MATTER OF IEGUARDIANSHIPOF
ASE NO
SUPPLEMENT FOR EMERGENCY GUARDIAN OF PERSON [R.C. 2111.02]
s Supplement must be completed when there is a request for Emergency Guardianship. The following questions must answered with <u>specificity</u> and item 1.C, page 1 of the Statement of Expert Evaluation , Form 17.1A, must be checked.
Does the patient have a durable health care power of attorney: \square Yes \square No
If yes, why is it not being honored:
Injury(ies) which the alleged incompetent is in danger of receiving:
What is the risk of the injury(ies) in 2 above: ☐ Possible ☐ Likely ☐ Substantially Certain What are the medical procedures, if any, which would prevent the injury(ies) in 2 above:
what are the medical procedures, if any, which would prevent the injury(les) in 2 above.
What decision(s) can a guardian make that will prevent this/these injury(ies):
Ability of the alleged incompetent to receive notice and give consent:
Additional statements regarding condition, family, support services, etc.:
e: Any above answers any may be supplemented by attachments.
Date and Time of Evaluation Licensed Physician

Date of Report