

FORM SUMMARY

Name of Form: Order on Petition for Involuntary Administration of Psychotropic Medication (with Order for Protective Services)

Form Number: GN-4180

Statutory Reference: §§55.14, Wisconsin Statutes

Benchbook Reference:

Purpose of Form: To order Involuntary Administration of Psychotropic Medications.

Who Completes It: The Court.

Who Signs It: **BY THE COURT:** Circuit Court Judge/Circuit Court Commissioner. **THIS IS A FINAL ORDER FOR THE PURPOSE OF APPEAL IF SIGNED BY A CIRCUIT COURT JUDGE.**

Distribution of Form: Court; Individual/Ward; Individual/Ward's Guardian; Corporation Counsel; Individual/Ward's Legal Counsel; Guardian ad litem; Individual/Ward's agent under Power of Attorney for Health Care; Facility in which the Individual resides and County Department of Human Services/Social Worker

Accompanying Forms:

New Form/Modification: Modified; last update 05/18.

Modifications: Added "a hearing on held on [Date]."

Comments:

About this Form: This form is the product of the Wisconsin Records Management Committee, a committee of the Director of State Court's Office and a mandate of the Wisconsin Judicial Conference.

If you have additional information that does not change the meaning of the form, attach it on a separate page. The form itself shall not be altered.