

IN THE COURT OF COMMON PLEAS OF FAIRFIELD COUNTY, OHIO
PROBATE DIVISION
TERRE L. VANDERVOORT, JUDGE

GUARDIANSHIP OF _____

CASE NO. _____

SUPPLEMENT FOR EMERGENCY GUARDIAN OF PERSON
[R.C. 2111.49]

This supplement must be completed when there is a request for Emergency Guardianship. The following questions must be answered with specificity and item 1.C, page 1 of the Statement of Expert Evaluation, Form 17.1 must be checked.

A. Does the individual have a durable health care power of attorney? _____ If yes, why it is not being honored?

B. Exact nature of emergency: _____

C. Length of time emergency has existed, and why? _____

D. Specific action required to prevent significant injury to the person: _____

E. Ability of the alleged Incompetent to receive notice and give consent: _____

F. Medical prognosis in detail if immediate action, within 24 hours, is not taken: _____

G. Additional statements regarding condition, family, support services, etc.: _____

Note: Any above answers may be supplemented by attachments.

Date and Time of Evaluation

Licensed Physician

Date of Report