**IN THE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ COURT OF THE STATE OF OREGON**

**FOR THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| STATE OF OREGON Plaintiff,v.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Defendant.DOB: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_SID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | CASE NO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_DA NO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**ORDER** AUTHORIZING PSYCHIATRIC/ PSYCHOLOGICAL EXAMINATION OF DEFENDANT AND ORDER FOR **OUT OF CUSTODY DEFENDANT** TO APPEAR FOR EXAMINATION AT THE OREGON STATE HOSPITAL **(ORS 161.315)** |

This matter came before the court on \_\_\_\_\_\_\_\_\_\_\_\_\_at: \_\_\_ Defendant’s; \_\_\_ District Attorney’s request.

The defendant appeared out of custody, with counsel \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, OSB # \_\_\_\_\_\_\_, and the State appeared through \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, OSB # \_\_\_\_\_\_\_.

The Court, having heard statements of counsel and having received written notice from the defendant of the intent to rely upon a defense pursuant to ORS 161.309, FINDS that an examination of the defendant in the manner provided in ORS 161.315 should be made.

It is therefore ORDERED:

1. Within the next sixty days, the defendant shall voluntarily submit to an ORS 161.315 examination through the Oregon State Hospital (OSH) at a date, time and location to be determined by the OSH Forensic Evaluation Service (FES). Defendant shall remain out of custody pending completion of this evaluation.

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1. Pursuant to ORS 161.295 and/or ORS 161.300, the report of the examination shall include, but is not necessarily limited to, the following:
2. Findings and conclusions as to whether the defendant, as a result of a qualifying mental disorder at the time of the alleged criminal conduct, lacked the substantial capacity either to appreciate the criminality of his/her conduct or to conform his/her conduct to the requirements of law (ORS 161.295);
3. Findings and conclusions as to whether the defendant, as a result of a qualifying mental disorder at the time of the alleged criminal conduct, did or did not have the intent which is an element of the crime (ORS 161.300).
4. Dispositional determinations under ORS 161.325(1).
5. The report of the examination shall be filed with the Clerk of the Court for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County. The report of the examination may be filed electronically in the Oregon Judicial Department’s Ecourt system with the Clerk of the Court for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County.

**It is further ORDERED that any and all requested documents from any local and government bodies and agencies, as well as previous health providers, be released to the Oregon State Hospital for the purpose of, and use in, the ordered examination. These documents shall be provided to the Oregon State Hospital Forensic Evaluation Service within 10 business days of the request.**

**The District Attorney, defense attorney, and \_\_\_\_\_\_ County Sheriff/jailer shall provide all non-privileged pertinent information about defendant to the Oregon State Hospital Forensic Evaluation Service within 10 business days of this court order.**

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Further proceedings for this matter are set for hearing in Courtroom \_\_\_\_\_\_\_\_\_\_ on \_\_\_\_\_\_\_\_\_\_\_\_\_ at \_\_\_\_\_\_\_\_\_\_\_\_\_\_.

DATED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Circuit Judge

Defense attorney name, address, email address & phone number:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DDA Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DDA Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Case No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_