



CONSULTING PHYSICIAN  
COMPLIANCE FORM

E <b>CONSULTANT'S INFORMATION</b>		
<b>X</b>	PHYSICIAN'S SIGNATURE	DATE
	NAME (PLEASE PRINT)	
MAILING ADDRESS		
CITY, STATE AND ZIP CODE		TELEPHONE NUMBER (    )    -

.. "Capacity to make medical decisions" means that, in the opinion of an individual's attending physician, consulting physician, psychiatrist, or psychologist, pursuant to Section 4609 of the Probate Code, the individual has the ability to understand the nature and consequences of a health care decision, the ability to understand its significant benefits, risks, and alternatives, and the ability to make

\*\*\*\* "Mental Health Specialist" means a psychiatrist or a licensed psychologist.