Section 19 – authority for transfer from one hospital to another under different managers

PART 1

(To be completed on behalf of the managers of the hospital where the patient is detained)					
Authorit	y is given for the transfer	of (PRINT full name o	of patient)		
from (no	ome and address of been	ital in which the nation	at is liable to be det	coinad)	
from (name and address of hospital in which the patient is liable to be detained)					
to (name and address of hospital to which patient is to be transferred)					
in accor	dance with the Mental He	ealth (Hospital, Guard	ianship and Treatm	ent) (England	d)
Regulations 2008 within 28 days beginning with the date of this authority.					
Signed					
on beha	If of the managers of the	first named hospital			
PRINT NAME				Date	
				/	/
				,	,
PART 2 – RECORD OF ADMISSION					
(This is not part of the authority for transfer but is to be completed at the hospital to which the patient is transferred)					
This pat	ient was transferred to (n	•	,		
in pursuance of this authority for transfer and admitted to that hospital on					
	1 1	(date of admission to	o receiving hospital) at	
	:	(time)			
		(* - /			
Signed					
on behalf of the managers of the receiving hospital					
PRINT	NAME			Date	
				1	1