

# Order for Production of Mental Health Records

SUPERIOR COURT OF THE STATE OF CALIFORNIA  
FOR THE COUNTY OF \_\_\_\_\_

In the Matter of the Petition of  
\_\_\_\_\_  
\_\_\_\_\_

No. \_\_\_\_\_

ORDER RE: PRODUCTION OF  
MENTAL HEALTH RECORDS

It appearing to the court that:

1. A request was served upon the custodian of records of *(name of hospital)* \_\_\_\_\_, and
2. Said request seeks the mental health records of the following patient: \_\_\_\_\_, and
3. The custodian of records has produced said records for the court's preliminary review in camera, and
4. Said records contain information obtained in the course of providing services to the patient for the treatment of a mental health disorder and, for that reason, are confidential and subject to the disclosure restrictions of Welfare and Institutions Code Section 5328 et seq., and
5. Disclosure of the information contained in said records is necessary to the administration of justice, and
6. Disclosure of the information contained in said records can be effectively limited to the court, parties and counsel in the case, and
7. Said records do not contain information that is prohibited from disclosure by the psychotherapist-patient privilege established by Evidence Code Section 1014 or by any other privilege.

NOW, GOOD CAUSE APPEARING THEREFOR, IT IS ORDERED that the following records \_\_\_\_\_ be disclosed to \_\_\_\_\_, and the clerk of the court shall seal from public access such of said records that may become part of this court's records, whether as evidence or otherwise. Any person obtaining copies of the records disclosed pursuant to this order shall maintain their confidentiality and shall make no further disclosure except as provided by law or by order of this court. Upon termination of these proceedings, including any appeal, the parties and their counsel shall destroy all copies of records and information obtained pursuant to this order. Any original records are ordered to be returned to the hospital.

Date: \_\_\_\_\_ Time: \_\_\_\_\_ AM / PM

Signature: \_\_\_\_\_  
*(medical records)*

Print name: \_\_\_\_\_  
*(medical records)*