

**NOTICE OF DISCHARGE FROM  
ORDER FOR ASSISTED OUTPATIENT TREATMENT**

\_\_\_\_\_  
**Local Mental Health Authority**

**IN THE MATTER OF:**

\_\_\_\_\_  
Patient

\_\_\_\_\_  
Case Number

To the \_\_\_\_\_ District Court of \_\_\_\_\_ County, State of Utah:

The reasons justifying the court ordered Assisted Outpatient Treatment of the above-named patient no longer exist and the patient is discharged from court ordered treatment.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Director or Designee

**Instructions: Each local mental health authority or its designee shall, as frequently as practicable, examine or cause to be examined every person who has been committed to it. Whenever the local mental health authority or its designee determines that the conditions justifying involuntary commitment no longer exist, it shall discharge the patient. If the patient has been committed through judicial proceedings, a report describing that determination shall be sent to the clerk of the court where the proceedings were held. UCA 62A-15-636 (2002)**