Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dear\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is under LPS conservatorship.
( name of conservatee)

The court requires that I, \_\_( name of conservator) \_\_\_\_\_, as conservator, approve any and all changes to medication and treatment for \_\_\_\_(name of conservatee\_\_.

The court further requires that I, as conservator, approve any change in placement of conservatee and that I notify the court and conservatee’s attorney of any change of placement.

Failure to comply with these requirements of the court is
equal to treating a patient without informed consent .

I look forward to working with you and cooperating fully to achieve the best treatment for conservatee. Respectfully, I request that you comply with the LPS conservatorship requirements.

If you need to contact me, the best telephone number to reach me is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Should you have any questions, please contact me.

Thank you for your attention to this request and for your treatment of conservatee.

Sincerely,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed name, LPS Conservator for

(name of conservatee)\_\_\_\_\_, Case No.

Department 95A, Los Angeles Mental Health Court

cc. The Honorable Laura Hymowitz, Department 95A

Counsel for Conservatee (Usually will be Public Defender)

1150 North San Fernando Road

Los Angeles, CA 90065