

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
**PROBATE DIVISION**

\_\_\_\_\_  
\_\_\_\_\_  
INT  
IDD

In re:

\_\_\_\_\_

An Adult

**PETITION FOR APPOINTMENT OF TEMPORARY GUARDIAN**

- Emergency guardian for up to 21 days based on a life-threatening situation or situation involving emergency care when no other person appears to have authority to act under the circumstances.
- Health care guardian for up to 90 days when there is no guardian, there are two certifications of incapacity under D.C. Code, sec. 21-2204, and no other person appears to have authority to act under the circumstances.
- Provisional guardian for up to six months based on a finding that any guardian is not effectively performing said guardian's duties and the welfare of the ward requires immediate action.
- Extension of appointment
  - Emergency guardian to serve as health care guardian
  - Health care guardian to serve an additional 90 days.

1. Petitioner's name

\_\_\_\_\_

2. Subject

a. Name:

\_\_\_\_\_

b. Age:

\_\_\_\_\_

c. Address:

\_\_\_\_\_

\_\_\_\_\_

d. Telephone:

\_\_\_\_\_

e. Specific reasons why the subject is incapacitated (i.e., the diagnoses):

\_\_\_\_\_

\_\_\_\_\_

3. Nominated guardian and/or conservator if not petitioner

a. Name

\_\_\_\_\_

b. Address

\_\_\_\_\_

\_\_\_\_\_

c. Entitled to serve because

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4. The Court has jurisdiction because

a. D.C. Code, sec. 21-2402.03

The District of Columbia is the subject's home state as defined in D.C. Code, sec. 21-2402.01(a)(2).

The District of Columbia is a significant connection state as defined in D.C. Code, sec. 21-2402.01(a)(3) and one of the following applies:

1.  The subject does not have a home state.

2.  The home state court has declined to exercise jurisdiction because the District of Columbia is the more appropriate forum.

3.  No petition or order is pending before the home state or a significant connection state.

The District of Columbia is not the home state or a significant connection state, but the home state and all significant connection states decline to exercise jurisdiction and jurisdiction in the District of Columbia is more appropriate and consistent with Title 11 and the Constitution.

Special jurisdiction exists in accordance with D.C. Code, sec. 21-2402.04 for the following:

Issuance of a protective order as to real or tangible personal property located in the District of Columbia

Appointment of a guardian or conservator for whom a provisional order to transfer a proceeding from another state has been issued.

b. Other basis for jurisdiction: \_\_\_\_\_

5. Appointment of the following is necessary because

Emergency guardian for up to 21 days

There is no guardian and no other person with authority to act under the circumstances, and there is

A life-threatening situation. State the nature of such situation:

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or

A situation involving emergency care. State the nature of such situation. (This relief should be requested only when immediate treatment, including diagnostic treatment, is needed in response to a sudden, acute, and unanticipated medical crisis to avoid injury, extreme pain, impairment, or death.) \_\_\_\_\_

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Health care guardian for up to 90 days

There is no guardian and no other person with authority to act under the circumstances, and

The incapacity of the subject has been certified pursuant to D.C. Code, sec. 21-2204 by two professionals, one of whom is a physician and one of whom is a qualified psychologist or psychiatrist and one of whom examined the subject within 1 day preceding the certification.

Provisional guardian for up to 6 months

The existing guardian is not effectively performing the duties of a guardian and the welfare of the ward requires immediate action.

The name, address, and telephone number of the existing guardian are \_\_\_\_\_

The length of time for which the provisional guardian should be appointed is \_\_\_\_\_

Extension of appointment

Emergency guardian be allowed to serve as health care guardian.

Health care guardian be appointed for an additional 90 days (1) because of the continued incapacity of the subject and the continued need to provide substituted consent in accordance with D.C. Code, sec. 21-2210 for any health care service, treatment, or procedure or (2) because a petition for appointment of a limited or general guardian was filed before the current appointment of a health care guardian expired but has not yet been heard by the Court.

6. For requests for an emergency guardian or health care guardian, petitioner has

Attached two certifications of incapacity in accordance with D.C. Code, sec. 21-2204 and asks that the appointment of an examiner be waived.

Has not attached two certifications of incapacity, so an examiner must be appointed.

Has attached two certifications of incapacity and requests appointment of an examiner.

7. A Guardian *ad litem* is a person appointed by the court at the beginning of an intervention proceeding to help the subject determine the subject's interest in the proceeding or to make that determination for the subject if the subject is unconscious or otherwise wholly incapable of making such a determination, even with assistance. Petitioner asks the court to

Appoint a Guardian *ad litem*

Not appoint a Guardian *ad litem*

8. If there is any person who otherwise appears to have authority to act under the circumstances, provide an explanation as to why appointment of an emergency guardian or a health care guardian is being sought: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Persons to whom notice will be sent pursuant to D.C. Code, secs. 21-2042 and 21-2402.08 and Superior Court, Probate Division Rule 325, including name, address, and telephone number:

a. Spouse. (If none, adult children. If none, parents. If none, at least one of the nearest adult relatives of the subject.):

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

b. Counsel to the subject:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

c. Attorney in fact nominated in durable power of attorney as guardian and/or conservator and any previously appointed guardian and/or conservator and the custodian of the subject:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

d. All persons entitled to notice if this petition had been filed in the subject's home state:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

10. No guardian or conservator has been appointed in any other jurisdiction and there are no pending proceedings in any other jurisdiction to do so except

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

11. Petitioner seeks the following relief:

Appointment of an emergency or health care guardian with

All powers under D.C. Code, sec. 21-2047.02 including the power to

Grant, refuse, or withdraw consent to medical examination and health care treatment.

Obtain medical records to provide substituted consent pursuant to D.C. Code, sec. 21-2210.

Exercise the status of a legal representative under Chapter 12 of Title 7.

For a health care guardian only and only when there is no durable power of attorney, all powers under D.C. Code, sec. 21-2210 including

Granting, refusing, or withdrawing consent to the provision of any health care service, treatment, or procedure,

Certain enumerated powers: \_\_\_\_\_

\_\_\_\_\_

[ ] Appointment of a provisional guardian:

\_\_\_\_\_  
Name if a specific appointment is requested or a disinterested member of the Bar will be appointed.

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Signature of filer

\_\_\_\_\_  
Typed name of filer

\_\_\_\_\_  
Address (actual address/not Post Office Box)

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

\_\_\_\_\_  
Telephone number

\_\_\_\_\_  
Email address

\_\_\_\_\_  
Unified Bar number (if filer is an attorney)

### **VERIFICATION**

I, \_\_\_\_\_, being first duly sworn, on oath, depose and say that that I have read the foregoing pleadings by me subscribed and that the facts therein stated are true to the best of my knowledge, information, and belief.

\_\_\_\_\_  
Signature of petitioner

Subscribed and sworn to before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public/Clerk

**CERTIFICATE OF SERVICE**

I certify that on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, a copy of this filing was either eServed in accordance with the provisions of Administrative Order 13-15 or served by first class mail, postage prepaid, on the following persons (list names and complete mailing addresses):

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature of Attorney

\_\_\_\_\_  
Typed Name of Attorney

\_\_\_\_\_  
Address (Actual address/not Post Office Box)

\_\_\_\_\_

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Email address

\_\_\_\_\_  
Unified Bar number

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
**PROBATE DIVISION**

\_\_\_\_\_  
\_\_\_\_\_  
INT  
IDD

In re:

\_\_\_\_\_  
An Adult

**ORDER APPOINTING COUNSEL, EXAMINER, VISITOR, AND/OR GUARDIAN AD LITEM**

Upon consideration of the petition filed herein on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, the Court sets a hearing date and makes the following appointments this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

**ORDERED** that a hearing will be held on \_\_\_\_\_, 20\_\_\_\_\_, at \_\_\_\_\_ o'clock a.m./p.m. in Room 4220 of the Superior Court of the District of Columbia, 500 Indiana Avenue, NW, Washington, DC, before Judge in Chambers, and it is further

**ORDERED** that the following persons are appointed and shall attend unless excused by the Court:

**Counsel:** \_\_\_\_\_ is appointed counsel for \_\_\_\_\_, the subject of the above proceeding. The counsel shall have access to any current medical, psychological, or sociological evaluation records of the subject. Counsel shall perform the duties set forth in D.C. Code, sec. 21-2033(b) and Superior Court, Probate Division Rule 305 and represent the subject at the hearing. Counsel shall forthwith file a Notice of Appearance pursuant to Superior Court, Probate Division Rules 321(d) and 305(a)(2).

**Examiner:** \_\_\_\_\_ is appointed examiner and shall have access to any current medical, psychological, or sociological evaluation records of the subject. The examiner shall perform the duties set forth in D.C. Code, sec. 21-2041(d) and/or sec. 21-2054(a) as applicable and Superior Court, Probate Division Rule 326 and submit a report in writing to the Court and mail copies to all persons listed below at least ten (10) days before the hearing.

**Visitor:** \_\_\_\_\_ is appointed visitor and shall perform the duties set forth in D.C. Code, sec. 21-2033(c) and Superior Court, Probate Division Rule 327 and submit a report in writing to the court and mail copies to all persons listed below at least ten (10) days before the hearing.

**Guardian ad litem:** Pursuant to D.C. Code, sec. 21-2033(a) and Superior Court, Probate Division Rule 306, a guardian *ad litem* is appropriate for the following reasons:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_, so

\_\_\_\_\_ is appointed guardian *ad litem* herein and shall have access to any current medical, psychological, or sociological evaluation records of the subject for the following purpose(s):

To assist the subject in determining the subject's interests in regard to this proceeding; or

To make the determination of the subject's interests in regard to this proceeding if the subject is unconscious or otherwise wholly incapable of determining his/her interests even with assistance; or

To prosecute or defend the interest of \_\_\_\_\_ because the Court has determined for reasons stated below that representation would otherwise be inadequate. The guardian *ad litem* shall not serve as an independent finder of fact, investigator, ombudsman, or other neutral party and shall have the following specific duties in addition to those set forth above: \_\_\_\_\_

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

\_\_\_\_\_  
JUDGE

Copies to:  
(Insert list of names and addresses of all interested persons. Attach additional sheet if necessary.)

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA**  
**PROBATE DIVISION**

\_\_\_\_\_ INT \_\_\_\_\_  
\_\_\_\_\_ IDD \_\_\_\_\_

In re:

\_\_\_\_\_

An Adult

**AFFIDAVIT OF PERSONAL SERVICE**

I, \_\_\_\_\_, being first duly sworn, say: That I am over the age of eighteen years and am not a party to the above entitled action and that my address is \_\_\_\_\_.

On the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, I served personally the attached Notice of Hearing on Petition on the person or persons named below by delivery to and leaving with the person or persons at the time and place set forth below a copy of the said notice.

Names of Persons Served	Address	Place of Service	Date of Service
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

\_\_\_\_\_  
Affiant's Signature

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public/Clerk

# **Who to Serve with Petition for Appointment of Guardian and/or Conservator and Notice of Initial Hearing**

1. Subject  
    Notice of Hearing (For Subject Only)
2. Relatives of subject:
  - a. Spouse, but if none,
  - b. Adult Children, but if none,
  - c. Parents, but if none,
  - d. At least one nearest adult relative
3. Person already serving as guardian or conservator  
    - or -  
    Person having care and custody of subject
4. Agent or attorney-in-fact nominated in any durable power of attorney signed by subject
5. Any person entitled to support by the subject  
    (Please note that if the person is a minor, the minor's responsible party must be served.)
6. Any person with higher priority for appointment than person nominated as guardian or conservator in petition
7. Attorney retained by subject or appointed for subject in another proceeding
8. Any person who has filed a request for notice  
    (Not applicable to proceedings on an initial petition.)
9. Any other person directed by the court

**SUPERIOR COURT OF THE DISTRICT OF COLUMBIA  
PROBATE DIVISION  
JUDGE-IN-CHAMBERS**

In re:

\_\_\_\_\_ INT \_\_\_\_\_

\_\_\_\_\_ IDD \_\_\_\_\_

\_\_\_\_\_  
AN ADULT

**ORDER APPOINTING TEMPORARY GUARDIAN**

A hearing was held on the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_,  
on the Petition for the Appointment of a Temporary Guardian filed herein by  
\_\_\_\_\_ on the \_\_\_\_\_ day of  
\_\_\_\_\_ 20\_\_\_\_\_.

The following were present for the scheduled hearing:

- Judge \_\_\_\_\_
- Petitioner \_\_\_\_\_
- Attorney for the Petitioner \_\_\_\_\_
- Counsel for the Subject \_\_\_\_\_
- Subject was present
- Subject was not present
- Guardian Ad Litem \_\_\_\_\_
- Visitor \_\_\_\_\_
- Examiner \_\_\_\_\_
- Examiner via telephone \_\_\_\_\_
- Other persons who were given permission to participate after the court determined that the subject's best interests would be served by the person's participation:

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

It is by the Court this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_; hereby

**ORDERED**, that the Petition for the Appointment of a 21-Day Emergency Guardian is

**GRANTED;**

**DENIED;**

**DISMISSED;**

and it is further

**ORDERED**, that it appearing that \_\_\_\_\_  
\_\_\_\_\_ is an incapacitated person for whom (1) no guardian  
is in place, (2) no other person appears to have authority to act under the circumstances, and  
(3) a life-threatening situation or a situation involving emergency care exists within the meaning  
of the District of Columbia Guardianship, Protective Proceedings, and Durable Power of  
Attorney Act of 1986, as amended by the Health-Care Decisions for Persons with  
Developmental Disabilities Act, \_\_\_\_\_,  
whose address is \_\_\_\_\_  
\_\_\_\_\_ and telephone number is \_\_\_\_\_,  
be and hereby is appointed as Emergency Guardian for a period not to exceed **21-Days** from  
the date of this Order;

**ORDERED**, that the Petition for the Appointment of a 90-Day Health-Care Guardian is

**GRANTED;**

**DENIED;**

**DISMISSED;**

and it is further

**ORDERED**, that it appearing that \_\_\_\_\_  
\_\_\_\_\_ is an incapacitated person for whom (1) no  
guardian is in place (2) no other person appears to have the authority to act under the

circumstances and (3) two certifications of incapacity have been presented to the Court in accordance with **D.C. Code Sec. 21-2204**, \_\_\_\_\_, whose address is \_\_\_\_\_ and telephone number is \_\_\_\_\_, be and hereby is appointed as Health-Care Guardian for a period not to exceed **90-Days** from the date of this Order;

**ORDERED** that the appointment(s) of [ ] Counsel, [ ] Guardian ad litem, [ ] Visitor, and/or [ ] Examiner, made on \_\_\_\_\_, 20\_\_\_\_, for this hearing, remain in effect through the Hearing on Petition for Guardian on \_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_ o'clock a.m./p.m. in Courtroom \_\_\_\_\_ of the Superior Court of the District of Columbia, before Judge \_\_\_\_\_ unless excused by the Court.

**[POWERS/DUTIES AND LIMITATIONS]**

**ORDERED**, that the Emergency or Health-Care Guardian shall have the powers and duties set forth in **D.C. Code Secs. 21-2047.01 and 21-2047.02** and shall (1) become or remain personally acquainted with the ward and maintain sufficient contact with the ward to know the ward's capacities, limitations, needs, opportunities, and physical and mental health (2) make decisions on behalf of the ward by conforming as closely as possible to a standard of substituted judgment or if the ward's wishes are unknown and remain unknown after reasonable efforts to discern them, make decisions on the basis of the ward's best interests as that term is defined by the Health-Care Decisions for Persons with Developmental Disabilities Act (3) encourage the ward to participate with the guardian in the decision-making process to the maximum extent of the ward's ability in order to encourage the individual to act on his or her own behalf whenever able to do so and to develop or regain capacity to make decisions in those areas in which decision-making assistance is needed to the maximum extent possible and (4) make any report that the Court requires;

- ORDERED**, that the Emergency or Health-Care Guardian may
  - Grant, refuse, or withdraw consent to medical examination and health care treatment for which the individual has been deemed incapacitated pursuant to **D.C. Code Sec. 21-2204**;
  - Obtain medical records for the purpose of providing substituted consent pursuant to **D.C. Code Sec. 21-2210**;
  - Have the status of a legal representative under **Chapter 12 of Title 7**;

**ORDERED**, that the power of any Emergency, Health-Care or Provisional Guardian shall be limited as provided by **D.C. Code Sec. 21-2047.01**;

**ORDERED** that the powers of the Emergency, Health-Care or Provisional Guardian shall be limited to the following: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_.

**ORDERED**, that it appearing that the ward did not have a durable power of attorney for health care and that the certifications of incapacity required by **D.C. Code Sec. 21-2204** have been provided, the powers as Health-Care Guardian shall include the power to grant, refuse, or withdraw consent to the provision of any health care service, treatment, or procedure in accordance with **D.C. Code Sec. 21-2210**;

[TEMPORARY GUARDIANSHIP EXTENSION]

**ORDERED**, that the appointment of \_\_\_\_\_  
\_\_\_\_\_ as **Emergency Guardian** be and hereby is  
extended until \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_ (said extension  
not to exceed 90-Days) during which period, \_\_\_\_\_  
\_\_\_\_\_ shall serve as **Health Care Guardian**;

**ORDERED**, that it appearing that (1) \_\_\_\_\_  
\_\_\_\_\_ is still an incapacitated person and (2) there is a  
continued need to provide substituted consent in accordance with D.C. Code Sec. 21-2210 for  
any health care service, treatment or procedure or (3) a Petition for the Appointment of a  
Limited or General Guardian was filed before the current appointment of the Health-Care  
Guardian expired but has not yet been heard by the Court, the appointment of  
\_\_\_\_\_ as **Health-Care Guardian** be and  
hereby is extended for one additional period (not to exceed 90-Days) until \_\_\_\_\_ day of  
\_\_\_\_\_ 20\_\_\_\_;

**ORDERED**, that \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
**JUDGE**

**Copies To:**  
(Insert list of names and addresses of all interested persons. Attach additional sheets as necessary.)