

THE STATE OF TEXAS

IN THE _____

v.

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COURT OF

FORT BEND COUNTY, TEXAS

ORDER FOR SANITY EVALUATION

On _____, the Court considered the Motion for Sanity Evaluation of the Defendant in this cause. Having heard the arguments and consideration of Counsel, the Court is of the opinion that the Defendant should be examined as provided by Article 46C.101 of the Texas Code of Criminal Procedure.

It is therefore, **Ordered**, that a psychologist with **Fort Bend County Behavioral Health Services** shall examine the Defendant, _____, with regard to the Defendant’s state of mind at the time of the alleged criminal conduct, and if necessary, to testify at any trial or hearing on the issue of sanity, as provided by Article 46C.101 of the Texas Code of Criminal Procedure. **This court order is to be faxed to BHS Court Orders at 281-238-3250 or emailed to BHSCourtOrders@fortbendcountytexas.gov.**

Defendant is **ordered** to submit to the examination by Fort Bend Behavioral Health Services.

The Court **Orders** the examiner in this case to examine Defendant and to prepare a written report and submit it to this Court within ____days of the date of this order.

Said written report shall state the expert’s findings on the following issues: (a) identify and address specific issues referred to the expert for evaluation, (b) document that the expert explained to the defendant the purpose of the evaluation, the persons to whom a report on the evaluation is provided, and the limits on rules of confidentiality applying to the relationship between the expert and the defendant, (c) include a description of the procedures used in the examination, (d) state the examiner’s observations, findings, and recommendations pertaining to the Defendant and the issue of Sanity.

The sanity evaluation will include assessment of the individual’s mental health functioning, intellectual functioning, and substance abuse as clinically warranted.

(If the defendant is on bail/bond)

- The Defendant is **Ordered** to contact the office of **Fort Bend County Behavioral Health Services** at **281-238-3079** within ____ days of the signing of this order and schedule an appointment for this court-ordered evaluation.
- Please provide two phone numbers for the defendant in order to assist **Fort Bend County Behavioral Health Services** in scheduling the defendant as quickly as possible:
Contact # Primary: _____ Contact # Secondary: _____

Signed on this the _____ day of _____, 20__.

Judge Presiding