IN THE CIRCUIT COURT FOR THE STATE OF OREGON

FOR THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| [LPHA/Oregon Health Authority, Public Health Director],  Petitioner  v.  [Insert initials of person(s) to be detained],    Respondent. | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  PETITIONER’S MOTON FOR EX PARTE ORDER FOR [ISOLATION/QUARANTINE] |

Petitioner, Local Public Health Administrator (LPHA) for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County/Oregon Health Authority, Public Health Director, (PHD), moves the court for an *ex parte* order [isolating/quarantining] the respondent in accordance with ORS 433.121(2), as the respondent poses a clear and immediate danger to others, and requests that the court appoint counsel for the respondent.

POINTS AND AUTHORITIES

In support of the foregoing Motion for Ex Parte Order for [Isolation/Quarantine], petitioner relies on the Emergency Petition for Ex Parte Order for [Isolation/Quarantine], Affidavit of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, and ORS 431.110, 431A.010 and 433.121.

DATED this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_.

.

Respectfully submitted,

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

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Of Attorneys for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County/State

IN THE CIRCUIT COURT FOR THE STATE OF OREGON

FOR THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| [LPHA/Oregon Health Authority, Public Health Director],  Petitioner,  v.  [Insert initials of person(s) to be detained],  Respondent. | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  EMERGENCY PETITION FOR EX PARTE ORDER FOR [ISOLATION/QUARANTINE] |

1. Pursuant to ORS 431.110, 431A.010 and 433.121, the Local Public Health Administrator (LPHA) for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County/Oregon Health Authority, Public Health Director (PHD), petitions the court for an ex parte order to [isolate/quarantine] the Respondent, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, a person who poses a public health threat. This petition is supported by the Affidavit of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, attached.

2. Petitioner has probable cause to believe that the Respondent [is suspected to be infected with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/has been diagnosed with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/is suspected to be contaminated with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/has been exposed to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_]. This [disease/toxic substance] is [put in facts about what the disease or toxic substance is and the public health threat it presents.]

3. Immediate detention is required in order to avoid a clear and immediate danger to others and considerations of safety do not allow initiation of the petition process in ORS 433.123, because [fill in the facts that make this an emergency].

4. [Reasonable efforts were made to obtain voluntary compliance, including [put in facts, including any requests for testing, medical examination, treatment, etc/Reasonable efforts to obtain voluntary compliance were not possible and would have created a serious risk of serious harm to others because \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.]

5. [Isolation/quarantine] is necessary because [explain the medical justification and why it is the least restrictive means].

6. The Respondent's detention should begin upon entry of an order by this court.

7. The isolation/quarantine premises will be \_\_\_\_\_\_ [if known, if not, explain how you will figure it out] and confinement will be in accordance with the conditions and principles in ORS 433.128.

8. Petitioner requests that the court order that the Respondent:

a. Be confined to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

b. Be required to comply with treatment protocols, including \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

c. Submit to appropriate laboratory tests as deemed appropriate by a treating physician;

d. Cooperate with physical examinations and other diagnostic and treatment modalities as deemed appropriate by a treating physician; and

e. Be appointed counsel.

DATED this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_.

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Respectfully submitted,

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

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Of Attorneys for \_\_\_\_\_\_\_\_\_\_ County/State

IN THE CIRCUIT COURT FOR THE STATE OF OREGON

FOR THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| [LPHA/Oregon Health Authority, Public Health Director],  Petitioner,  v.  [Insert initials of person(s) to be detained],  Respondent. | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  AFFIDAVIT OF \_\_\_\_\_\_\_\_\_\_\_ IN SUPPORT OF EMERGENCY PETITION FOR EX PARTE ORDER FOR [ISOLATION/QUARANTINE] |

STATE OF OREGON )

)

County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ )

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ being first duly sworn, depose and say:

1. I am the \_\_\_\_\_\_\_\_\_\_\_\_ [title, job description, qualifications].

2. In my role as \_\_\_\_\_\_\_\_\_\_\_\_\_, I am familiar with the facts of this case.

3. [Put in facts about how you first became aware of the Respondent, why you have reasonable cause to believe the respondent requires immediate detention in order to avoid a clear and immediate danger to others and that considerations of safety do not allow initiation of the regular petition process]

4. [Explain what the communicable disease or toxic substance is that the respondent has, may have, or has been exposed to, why it poses a substantial public health threat, how you cure it and prevent its spread].

5. [Explain why isolation/quarantine is necessary to prevent a serious risk to the health and safety of others, or why other public health measures are appropriate to the public health threat presented].

6. [Explain the reasonable efforts made to obtain voluntary compliance, or why efforts to obtain voluntary compliance were not possible and why pursuit of these efforts creates a serious risk of harm to others].

7. [Explain reasonable efforts to serve person with petition].

8. [Explain the conditions of confinement, including:

a. Where confinement will occur or how a place for confinement will be found;

b. Who will monitor the respondent's medical condition and how often it will be monitored;

c. If the respondent is going to be confined with other people, how they will be protected from exposure or infection;

d. How the respondent's basic needs will be met (i.e. food, medication, etc.); and

e. How the respondent's cultural and religious beliefs will be met, if applicable.]

9. [Explain the length of confinement, why this amount of time is necessary, and why it is the least restrictive alternative, including whether you intend to file a petition to detain the respondent for a longer period of time].

DATED this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_.

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

Affiant

SUBSCRIBED AND SWORN before me this \_\_\_\_day of \_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_.

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

Notary Public for Oregon

My Commission Expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IN THE CIRCUIT COURT FOR THE STATE OF OREGON

FOR THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| [LPHA/Oregon Health Authority, Public Health Director],  Petitioner,  v.  [Insert initials of person(s) to be detained],  Respondent. | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  EX PARTE ORDER FOR [ISOLATION/QUARANTINE] |

Having reviewed the Petitioner's Motion for ex parte [isolation/quarantine] order, Emergency Petition for Ex Parte Order, Affidavit of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, and being fully advised,

the court finds:

1. There is probable cause to believe that the respondent, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, requires immediate detention in order to avoid a clear and immediate danger to others and that considerations of safety do not allow initiation of a petition under ORS 433.123;

2. [insert information from paragraphs 3 and 4 of affidavit (information about disease and the public health threat posed)];

3. [insert information from paragraph 5 of affidavit (information about why its an emergency)];

4. [insert information from paragraph 6 of affidavit (reasonable efforts or why no efforts made)];

5. [insert information from paragraph 8 of affidavit (conditions of confinement)];

6. [insert information from paragraph 9 of affidavit (length of confinement, why least restrictive means, whether a regulation petition will be filed)].

Therefore, the court ORDERS that:

1. Respondent shall be detained for a period not to exceed 72 hours at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

2. Respondent is required to comply with treatment protocols, including \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

3. Respondent shall submit to appropriate laboratory tests as deemed appropriate by a treating physician;

4. Respondent shall cooperate with physical examinations and other diagnostic and treatment modalities as deemed appropriate by a treating physician; and

5. The [Sheriff's office/State Police] shall assist in detaining the respondent in accordance with ORS 433.156 as necessary.

**Failure to obey this order shall subject the respondent to contempt proceedings under ORS 33.015 to 33.155.**

DATED this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_.

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

\*

Circuit Court Judge

**CERTIFICATE OF SERVICE**

I hereby certify that on the \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_, I personally served [list the documents] on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, at:

[list address/place where service occurred]

**OR**

I was unable to individually personally serve [describe the group of persons sought for detention] because [insert facts that made it impracticable] and therefore I [insert facts of how the documents were presented to the group, i.e. posting, etc].

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

[Name of person completing service]

IN THE CIRCUIT COURT FOR THE STATE OF OREGON

FOR THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| [LPHA/Oregon Health Authority, Public Health Director],  Petitioner,  v.  [Insert initials of person(s) to be detained],  Respondent. | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  PETITIONER’S MOTON FOR EX PARTE ORDER FOR GROUP [ISOLATION/QUARANTINE] |

Petitioner, Local Public Health Administrator (LPHA) for \_\_\_\_\_\_\_\_\_\_\_\_\_ County/Oregon Health Authority, Public Health Director (PHD), moves the court for an *ex parte* order [isolating/quarantining] the Respondents in accordance with ORS 433.121, as the respondents pose a clear and immediate danger to others, and requests that the court appoint counsel for the Respondents.

POINTS AND AUTHORITIES

In support of the foregoing Motion for an Ex Parte Order for [Isolation/Quarantine], petitioner relies on the Emergency Petition for Ex Parte Order for Group [Isolation/Quarantine], Affidavit of \_\_\_\_\_\_\_\_\_\_\_\_\_, and ORS 431.110, 431A.010 and 433.121.

DATED this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_, \_\_\_\_\_.

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Respectfully submitted,

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

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Of Attorneys for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County/State,

IN THE CIRCUIT COURT FOR THE STATE OF OREGON

FOR THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- |
| [LPHA/Oregon Health Authority, Public Health Director],  Petitioner,  v.  [Insert initials of person(s) to be detained],  Respondent. | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  EMERGENCY PETITION FOR EX PARTE ORDER FOR GROUP [ISOLATION/QUARANTINE] |

1. Pursuant to ORS 431.110, 431A.010 and 433.121, the Local Public Health Administrator (LPHA) for \_\_\_\_\_\_\_\_\_\_\_\_ County/Oregon Health Authority, Public Health Director (PHD), petitions the court for an ex parte order [isolating/quarantining] the Respondents, \_\_\_\_\_\_\_\_\_\_\_\_\_\_, [if you know individual names, list them or perhaps include the list in an attachment, if you don't know, provide a description of the group, i.e., passengers aboard the cruise ship "Unlucky" docked/anchored at pier 1] a group of persons who pose a public health threat. This petition is supported by the attached affidavit of \_\_\_\_\_\_\_\_\_\_\_.

2. Petitioner has probable cause to believe that the Respondents, [are suspected to be infected with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/have been diagnosed with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/are suspected to be contaminated with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/have been exposed to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_]. This [disease/toxic substance] is [put in facts about what the disease or toxic substance is and the public health threat it presents.]

3. Immediate detention is required in order to avoid a clear and immediate danger to others and considerations of safety do not allow initiation of the petition process in ORS 433.123 because [fill in the facts that make this an emergency].

4. [Reasonable efforts were made to obtain voluntary compliance, including [put in facts, including any requests for testing, medical examination, treatment, etc/Reasonable efforts to obtain voluntary compliance were not possible and would have created a serious risk of serious harm to others because \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.]

5. [Isolation/quarantine] is necessary because [explain the medical justification and why it is the least restrictive means].

6. The respondent’s detention should begin upon entry of an order by this court.

7. The Isolation/quarantine premises will be \_\_\_\_\_\_ [if known, if not, explain how you will figure it out] and confinement will be in accordance with the conditions and principles in ORS 433.128.

8. [Explain reasonable efforts to serve copy of petition prior to filing].

9. Petitioner requests that the court order that the respondents:

a. Be confine to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

b. Be required to comply with treatment protocols, including \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

c. Submit to appropriate laboratory tests as deemed appropriate by a treating physician;

d. Cooperate with physical examinations and other diagnostic and treatment modalities as deemed appropriate by a treating physician; and

e. Be appointed counsel.

DATED this \_\_\_\_\_ day of \_\_\_\_\_\_\_, \_\_\_\_\_.

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Respectfully submitted,

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

\*

Of Attorneys for \_\_\_\_\_\_\_\_\_\_\_\_ County/State

IN THE CIRCUIT COURT FOR THE STATE OF OREGON

FOR THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| [LPHA/Oregon Health Authority, Public Health Director],  Petitioner,  v.  [Insert initials of person(s) to be detained],  Respondent. | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  AFFIDAVIT OF \_\_\_\_\_\_\_\_\_\_\_ IN SUPPORT OF EMERGENCY PETITION FOR EX PARTE ORDER FOR GROUP [ISOLATION/QUARANTINE] |

STATE OF OREGON )

)

County of \_\_\_\_\_\_\_\_\_ )

I, \_\_\_\_\_\_\_\_\_\_\_\_\_ being first duly sworn, depose and say:

1. I am the \_\_\_\_\_\_\_ [title, job description, qualifications].

2. In my role as \_\_\_\_\_\_\_\_\_\_\_\_, I am familiar with the facts of this case.

3. [Put in facts about how you first became aware of the Respondents, why you have reasonable cause to believe the Respondents require immediate detention in order to avoid a clear and immediate danger to others and that considerations of safety do not allow initiation of the regular petition process]

4. [Explain what the communicable disease or toxic substance is that the respondents have, may have, or have been exposed to, why it poses a substantial public health threat, how you cure it and prevent its spread].

5. [Explain why isolation/quarantine is necessary to prevent a serious risk to the health and safety of others, or why other public health measures are appropriate to the public health threat presented].

6. [Explain the reasonable efforts made to obtain voluntary compliance, or why efforts to obtain voluntary compliance were not possible and why pursuit of these efforts creates a serious risk of harm to others].

7. [Explain the conditions of confinement, including:

a. Where confinement will occur or how a place for confinement will be found;

b. Who will monitor the Respondents' medical condition and how often it will be monitored;

c. If the Respondents are going to be confined with other people, how they will be protected from exposure or infection;

d. How the Respondents' basic needs will be met (i.e. food, medication, etc.); and

e. How the Respondents' cultural and religious beliefs will be met, if applicable.]

8. [Explain the length of confinement, why this amount of time is necessary, and why it is the least restrictive alternative, including whether you intend to file a petition to detain the respondents for a longer period of time].

9. [Explain reasonable efforts to serve copy of petition prior to filing].

DATED this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_.

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

Affiant

SUBSCRIBED AND SWORN before me this \_\_\_\_day of \_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_.

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

Notary Public for Oregon

My Commission Expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IN THE CIRCUIT COURT FOR THE STATE OF OREGON

FOR THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| [LPHA/Oregon Health Authority, Public Health Director],  Petitioner,  v.  [Insert initials of person(s) to be detained],  Respondent. | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  EX PARTE ORDER FOR GROUP [ISOLATION/QUARANTINE] |

Having reviewed the Petitioner's Motion for Ex Parte [isolation/quarantine] order, Emergency Petition for Ex Parte Order, and Affidavit of \_\_\_\_\_\_\_\_\_\_\_, and being fully advised,

the court finds:

1. There is probable cause to believe that the Respondents, \_\_\_\_\_\_\_\_\_\_\_\_\_\_, require immediate detention in order to avoid a clear and immediate danger to others and that considerations of safety do not allow initiation of a petition under ORS 433.123;

2. [insert information from paragraphs 3 and 4 of affidavit (information about disease and the public health threat posed)];

3. [insert information from paragraph 5 of affidavit (information about why its an emergency)];

4. [insert information from paragraph 6 of affidavit (reasonable efforts or why no efforts made)];

5. [insert information from paragraph 7 of affidavit (conditions of confinement)];

6. [insert information from paragraph 8 of affidavit (length of confinement, why least restrictive means, whether a regulation petition will be filed)].

Therefore, the court ORDERS that:

1. Respondents shall be detained for a period not to exceed 72 hours, at \_\_\_\_\_\_\_\_\_;

2. Respondents are required to comply with treatment protocols, including \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

3. Respondents shall submit to appropriate laboratory tests as deemed appropriate by a treating physician; and

4. Respondents shall cooperate with physical examinations and other diagnostic and treatment modalities as deemed appropriate by a treating physician; and

5. The [Sheriff's Office/State Police] shall assist in detaining the Respondents in accordance with ORS 433.156 as necessary.

**Failure to obey this order shall subject the Respondents to contempt proceedings under ORS 33.015 to 33.155.**

DATED this \_\_\_\_\_ day of \_\_\_\_\_\_\_, \_\_\_\_\_.

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

\*

Circuit Court Judge

CERTIFICATE OF SERVICE

I hereby certify that on the \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_, I personally served [list the documents] on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, at:

[list address/place where service occurred]

**OR**

I was unable to individually personally serve [describe the group of persons sought for detention] because [insert facts that made it impracticable] and therefore I [insert facts of how the documents were presented to the group, i.e. posting, etc].

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

[Name of person completing service]

IN THE CIRCUIT COURT FOR THE STATE OF OREGON

FOR THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| [LPHA/Oregon Health Authority, Public Health Director],  Petitioner,  v.  [Insert initials of person(s) to be detained],  Respondent. | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  PETITION FOR [ISOLATION/QUARANTINE], REQUEST FOR HEARING, AND REQUEST FOR APPOINTMENT OF COUNSEL |

1. Pursuant to ORS 431.110, 431A.010 and 433.123, the Local Public Health Administrator (LPHA) for \_\_\_\_\_\_\_\_\_\_\_\_ County/Oregon Health Authority, Public Health Director (PHD), petitions the court to [isolate/quarantine] the Respondent, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, a person who poses a public health threat. This petition is supported by the attached affidavit of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

2. The Respondent [is suspected to be infected with \_\_\_\_\_\_\_\_\_\_\_\_\_/has been diagnosed with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/is suspected to be contaminated with \_\_\_\_\_\_\_\_\_\_\_/has been exposed to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_]. This [disease/toxic substance] is [put in facts about what the disease or toxic substance is and the public health threat it presents].

\*. [Optional] Respondent has been detained pursuant to [an administrative order/ex parte order] that was issued on \_\_\_\_\_\_\_\_\_\_\_\_. Exhibit \_\_.

3. [Reasonable efforts were made to obtain voluntary compliance/ Reasonable efforts to obtain voluntary compliance were not possible and would have created a serious risk of serious harm to others because \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_].

4. [Isolation/quarantine] is necessary because [explain the medical justification and why it is the least restrictive means].

5. The Respondent's detention began on [\_\_\_\_\_\_\_\_\_\_\_\_\_/should begin upon entry of an order by this court].

6. The isolation/quarantine premises will be \_\_\_\_\_\_\_\_\_\_\_\_\_ [if known, if not, explain how it will be figured out] and confinement will be in accordance with the conditions and principles in ORS 433.128.

7. Respondent should be [isolated/quarantined] for 60 days [or for \_\_\_\_ days (not longer than 180 days) because there is substantial medical evidence that the condition the respondent suffers from is spread by airborne transmission and cannot be rendered noninfectious within 60 days or the condition may recur after 60 days]. *See* ORS 433.123(8).

8. Petitioner requests that the court order that the Respondent:

a. Be isolated/quarantined for \_\_\_ days;

b. Be required to comply with treatment protocols, including \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

c. Submit to appropriate laboratory tests on a [weekly/monthly] basis or as otherwise deemed appropriate by a treating physician;

d. Cooperate with physical examinations and other diagnostic and treatment modalities as deemed appropriate by a treating physician; and

e. Appoint counsel for Respondent.

9. Under ORS 433.123(6)(a), the court is required to hold a hearing on this petition within 72 hours of the filing of the petition, exclusive of Saturdays, Sundays, and legal holidays.

DATED this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_.

Respectfully submitted,

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

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Of Attorneys for \_\_\_\_\_\_\_\_\_\_\_ County/State

IN THE CIRCUIT COURT FOR THE STATE OF OREGON

FOR THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- |
| [LPHA/Oregon Health Authority, Public Health Director],  Petitioner,  v.  [Insert initials of person(s) to be detained],  Respondent. | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  AFFIDAVIT OF \_\_\_\_\_\_\_\_\_ IN SUPPORT OF PETITION FOR [ISOLATION/QUARANTINE] |

STATE OF OREGON )

)

County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_ )

I, \_\_\_\_\_\_\_\_\_\_\_\_\_ being first duly sworn, depose and say:

1. I am the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [title, job description, qualifications].

2. In my role as \_\_\_\_\_\_\_\_\_\_\_\_, I am familiar with the facts of this case.

3. [Put in facts about how you first became aware of the Respondent, why it is believed that she or he has a communicable disease or is contaminated with a toxic substance, or why it is believed the person has been exposed to communicable disease or toxic substance.]

4. [Explain what the communicable disease or toxic substance is, why it poses a substantial public health threat, how you cure it and prevent its spread].

5. [Explain why isolation/quarantine is necessary to prevent a serious risk to the health and safety of others, or why other public health measures are appropriate to the public health threat presented].

6. [Explain the reasonable efforts made to obtain voluntary compliance, or why efforts to obtain voluntary compliance were not possible and why pursuit of these efforts creates a serious risk of harm to others].

7. [Explain the conditions of confinement, including:

a. Where confinement will occur or how a place for confinement will be found;

b. Who will monitor the respondent's medical condition and how often it will be monitored;

c. If the respondent is going to be confined with other people, how they will be protected from exposure or infection;

d. How the respondent's basic needs will be met (i.e. food, medication, etc.); and

e. How the respondent's cultural and religious beliefs will be met, if applicable.]

8. [Explain the length of confinement, why this amount of time is necessary, and why it is the least restrictive alternative].

9. [Explain what testing, treatment, examinations will be needed during the confinement and why].

DATED this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_.

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

Affiant

SUBSCRIBED AND SWORN before me this \_\_\_\_day of \_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Notary Public for Oregon

My Commission Expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IN THE CIRCUIT COURT FOR THE STATE OF OREGON

FOR THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| [LPHA/Oregon Health Authority, Public Health Director],  Petitioner,  v.  [Insert initials of person(s) to be detained],  Respondent. | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ORDER CONTINUING [ISOLATION/QUARANTINE] |

Respondent was detained pursuant to an emergency [administrative/ex parte] order issued on [insert date]. Petitioner has filed a petition for continued [isolation/quarantine] in accordance with ORS 433.123. Therefore, IT IS HEREBY ORDERED, that under ORS 433.123(5), Respondent’s detention is extended and will continue until the court holds a hearing on the petition.

DATED THIS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_.

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

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Circuit Court Judge

IN THE CIRCUIT COURT FOR THE STATE OF OREGON

FOR THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| [LPHA/Oregon Health Authority, Public Health Director],  Petitioner,  v.  [Insert initials of person(s) to be detained],  Respondent. | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ORDER GRANTING PETITION FOR [ISOLATION/QUARANTINE] |

Having reviewed the Petition, Affidavit of \_\_\_\_\_\_\_\_\_\_\_, and evidence and testimony provided at the hearing held on \_\_\_\_\_\_\_\_\_\_\_\_\_\_, and being fully advised,

THE COURT FINDS:

1. There is clear and convincing evidence that [isolation/quarantine/specify other public health measure] of the Respondent, \_\_\_\_\_\_\_\_\_\_\_\_\_, is necessary to prevent a serious risk to the health and safety of others based on the following facts:

2. [insert information from paragraph 3 of affidavit (information about disease), or updated information presented at the hearing];

3. [insert information from paragraph 4 of affidavit (information about public health threat) or updated information presented at the hearing];

4. [insert information from paragraph 5 of affidavit (facts about why public health measure warranted) or updated information presented at the hearing];

5. [insert information from paragraph 6 of affidavit (efforts to obtain voluntary compliance or why not possible) or updated information presented at the hearing];

6. [insert information from paragraph 8 of affidavit (length of confinement and why this least restrictive alternative) or updated information presented at the hearing]; and

7. [insert information from paragraph 9 of affidavit (what and why treatment, exams, etc. will be needed during confinement].

Therefore, the court ORDERS that:

1. Respondent shall be detained for a period not to exceed \_\_\_\_\_;

2. Respondent is required to comply with treatment protocols, including \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

3. Respondent shall submit to appropriate laboratory tests on a [weekly/monthly basis] or as otherwise deemed appropriate by the respondent's treating physician;

4. Respondent shall cooperate with physical examinations and other diagnostic and treatment modalities as deemed appropriate by his treating physician; and

5. The [Sheriff's office/State Police] shall assist in detaining the respondent in accordance with ORS 433.156 as necessary.

**Failure to obey this order shall subject the respondent to contempt proceedings under ORS 33.015 to 33.155.**

DATED this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_, \_\_\_\_\_.

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

Circuit Court Judge

CERTIFICATE OF SERVICE

I hereby certify that on the \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_, I personally served [list the documents] on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, at:

[list address/place where service occurred]

**OR**

I was unable to individually personally serve [describe the group of persons sought for detention] because [insert facts that made it impracticable] and therefore I [insert facts of how the documents were presented to the group, i.e. posting, etc].

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

[Name of person completing service]

IN THE CIRCUIT COURT FOR THE STATE OF OREGON

FOR THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| [LPHA/Oregon Health Authority, Public Health Director],  Petitioner,  v.  [Insert initials of person(s) to be detained],  Respondent. | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  PETITION FOR GROUP [ISOLATION/QUARANTINE], REQUEST FOR HEARING, AND REQUEST FOR APPOINTMENT OF COUNSEL |

1. Pursuant to ORS 431.110, 431A.010 and 433.123, the Local Public Health Administrator (LPHA) for \_\_\_\_\_\_\_\_\_\_\_ County/Oregon Health Authority, Public Health Director (PHD), petitions the court to [isolate/quarantine] the Respondents, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, [if you know individual names, list them and perhaps include the list in an attachment, if you don't know, provide a description of the group, i.e., passengers aboard the cruise ship "Unlucky" docked/anchored at \_\_\_\_\_\_\_\_\_\_\_] a group of persons that pose a public health threat. This petition is supported by the attached affidavit of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

2. Respondents [are suspected to be infected with \_\_\_\_\_\_\_\_\_\_\_\_\_/are suspected to be contaminated with \_\_\_\_\_\_\_\_\_\_\_/have been exposed to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_]. This [disease/toxic substance] is [put in facts about what the disease or toxic substance is and the public health threat it presents].

\*. [Optional] Respondents have been detained pursuant to [an administrative order/ex parte order] that was issued on \_\_\_\_\_\_\_\_\_\_\_\_. Exhibit \_\_.

3. [Reasonable efforts were made to obtain voluntary compliance/ Reasonable efforts to obtain voluntary compliance were not possible and would have created a serious risk of serious harm to others because \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_].

4. [Isolation/quarantine] is necessary because [explain the medical justification and why it is the least restrictive means].

5. The respondents' detention began on [\_\_\_\_\_\_\_\_\_\_\_\_\_/should begin upon entry of an order by this court].

6. The isolation/quarantine premises will be \_\_\_\_\_\_\_\_\_\_\_\_\_ [if known, if not, explain how it will be figured out] and confinement will be in accordance with the conditions and principles in ORS 433.128.

7. Respondents should be [isolated/quarantined] for 60 days [or for \_\_\_\_ days (not longer than 180 days) because there is substantial medical evidence that the condition the respondents suffer from is spread by airborne transmission and cannot be rendered noninfectious within 60 days or the condition may recur after 60 days]. *See* ORS 433.123(8).

8. Petitioner requests that the court:

a. Isolate/quarantine the Respondents for \_\_\_ days;

b. Require Respondents to comply with treatment protocols, including \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

c. Require Respondents to submit to appropriate laboratory tests on a [weekly/monthly] basis or as otherwise deemed appropriate by a treating physician;

d. Require Respondents to cooperate with physical examinations and other diagnostic and treatment modalities as deemed appropriate by a treating physician; and

e. Appoint counsel for Respondents.

9. Under ORS 433.123(6)(a), the court is required to hold a hearing on this petition within 72 hours of the filing of the petition, exclusive of Saturdays, Sundays, and legal holidays.

DATED this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_.

Respectfully submitted,

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

\*

Of Attorneys for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County/State

IN THE CIRCUIT COURT FOR THE STATE OF OREGON

FOR THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| [LPHA/Oregon Health Authority, Public Health Director],  Petitioner,  v.  [Insert initials of person(s) to be detained],  Respondent. | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  AFFIDAVIT OF \_\_\_\_\_\_\_\_\_\_\_\_\_ IN SUPPORT OF PETITION FOR GROUP [ISOLATION/QUARANTINE] |

STATE OF OREGON )

)

County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ )

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ being first duly sworn, depose and say:

1. I am the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [title, job description, qualifications].

2. In my role as \_\_\_\_\_\_\_\_\_\_\_\_, I am familiar with the facts of this case.

3. [Put in facts about how you first became aware of the Respondents, why it is believed that they have a communicable disease or are contaminated with a toxic substance, or why it is believed they have been exposed to a communicable disease or toxic substance.]

4. [Explain what the communicable disease or toxic substance is, why it poses a substantial public health threat, how you cure it and prevent its spread].

5. [Explain why isolation/quarantine is necessary to prevent a serious risk to the health and safety of others, or why other public health measures are appropriate to the public health threat presented].

6. [Explain the reasonable efforts made to obtain voluntary compliance, or why efforts to obtain voluntary compliance were not possible and why pursuit of these efforts creates a serious risk of harm to others].

7. [Explain the conditions of confinement, including:

a. Where confinement will occur or how a place for confinement will be found;

b. Who will monitor the respondents' medical condition and how often it will be monitored;

c. If the respondents are going to be confined with other people, how they will be protected from exposure or infection;

d. How the respondents' basic needs will be met (i.e. food, medication, etc.); and

e. How the respondents' cultural and religious beliefs will be met, if applicable.]

8. [Explain the length of confinement, why this amount of time is necessary, and why it is the least restrictive alternative].

9. [Explain what testing, treatment, examinations will be needed during the confinement and why].

DATED this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_.

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

Affiant

SUBSCRIBED AND SWORN before me this \_\_\_\_day of \_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_.

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

Notary Public for Oregon

My Commission Expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IN THE CIRCUIT COURT FOR THE STATE OF OREGON

FOR THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| [LPHA/Oregon Health Authority, Public Health Director],  Petitioner,  v.  [Insert initials of person(s) to be detained],  Respondents. | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ORDER CONTINUING [ISOLATION/QUARANTINE] |

Respondents were detained pursuant to an emergency [administrative/ex parte] order issued on [insert date]. Petitioner has filed a petition for continued [isolation/quarantine] in accordance with ORS 433.123. Therefore, IT IS HEREBY ORDERED, that under ORS 433.123(5), Respondents’ detention is extended and will continue until the court holds a hearing on the petition.

DATED THIS \_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_.

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

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Circuit Court Judge

IN THE CIRCUIT COURT FOR THE STATE OF OREGON

FOR THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| [LPHA/Oregon Health Authority, Public Health Director],  Petitioner,  v.  [Insert initials of person(s) to be detained],  Respondents. | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ORDER GRANTING PETITION FOR GROUP [ISOLATION/QUARANTINE] |

Having reviewed the Petition, Affidavit of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, and evidence and testimony provided at the hearing held on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, and being fully advised,

the Court finds:

1. There is clear and convincing evidence that [isolating/quarantining/specify other public health measure] Respondents, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, is necessary to prevent a serious risk to the health and safety of others.

2. [insert information from paragraph 3 of affidavit (information about disease), or updated information presented at the hearing];

3. [insert information from paragraph 4 of affidavit (information about public health threat) or updated information presented at the hearing];

4. [insert information from paragraph 5 of affidavit (facts about why public health measure warranted) or updated information presented at the hearing];

5. [insert information from paragraph 6 of affidavit (efforts to obtain voluntary compliance or why not possible) or updated information presented at the hearing];

6. [insert information from paragraph 8 of affidavit (length of confinement and why this least restrictive alternative) or updated information presented at the hearing]; and

7. [insert information from paragraph 9 of affidavit (what and why treatment, exams, etc. will be needed during confinement)].

Therefore, the court ORDERS that:

1. Respondents shall be detained for a period not to exceed \_\_\_\_\_\_\_\_\_\_\_\_;

2. Respondents shall be required to comply with treatment protocols, including \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

3. Respondents shall submit to appropriate laboratory tests on a [weekly/monthly basis] or as otherwise deemed appropriate by a treating physician;

4. Respondents shall cooperate with physical examinations and other diagnostic and treatment modalities as deemed appropriate by a treating physician; and

5. The [Sheriff's Office/State Police] shall assist in detaining the respondents in accordance with ORS 433.156 as necessary.

**Failure to obey this order shall subject the respondents to contempt proceedings under ORS 33.015 to 33.155.**

DATED this \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_.

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

Circuit Court Judge

CERTIFICATE OF SERVICE

I hereby certify that on the \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_, I personally served [list the documents] on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, at:

[list address/place where service occurred]

**OR**

I was unable to individually personally serve [describe the group of persons sought for detention] because [insert facts that made it impracticable] and therefore I [insert facts of how the documents were presented to the group, i.e. posting, etc].

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

[Name of person completing service]

IN THE CIRCUIT COURT FOR THE STATE OF OREGON

FOR THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| [Oregon Health Authority, Public Health  Director/ Local Public Health Authority]  Petitioner,  v.  [Insert initials of person(s) to be detained],    Respondent. | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Notice of Rights |

**To: [Respondent's name and address]**

Petitioner has issued an Emergency Order/filed a petition alleging that you have/have been exposed to/are contaminated with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and that you must be [isolated/quarantined/subject to some other public health measure] in order to prevent a serious risk to the health and safety of others.] OR [The court has issued an Order detaining you for 72 hours because you have/have been exposed to/are contaminated with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ .] A copy of the [order/petition] and supporting documentation is attached to this Notice.

Definition of "Isolation" and "Quarantine"

Isolation is the separation of a person with an infectious illness from healthy people, and the restriction of a person's movement to stop the spread of that illness. Isolation allows for the focused delivery of specialized health care to people who are ill, and it protects healthy people from getting sick. *See* ORS 433.001.

Quarantine is the separation and restriction of movement of a person who, while not yet sick, has been exposed to an infectious agent and therefore may become infectious. Quarantine of an exposed person is a public health strategy, like isolation, that is intended to stop the spread of infectious disease. *See* ORS 433.001.

Right to an Attorney

You have the right to be represented by an attorney at any time during this action. If you cannot afford an attorney and you meet the state's financial guidelines, you are entitled to have an attorney appointed for you at the state's expense. To request appointment of an attorney to represent you at state expense, call the court at the following number: \_\_\_\_\_\_\_\_\_\_\_\_\_. If you wish to be represented by an attorney and can afford to hire one, please retain one as soon as possible to represent you in this proceeding. If you can afford an attorney but do not have one, you may wish to contact the Oregon State Bar (OSB) lawyer referral service by calling 503-620-0222 or 800-452-8260, or by visiting OSB’s website at https://www.osbar.org/public/ris/lrsform.html. If you do not want to have an attorney represent you, you can fill out the attached form and return it to the court at the address indicated.

Court Hearing

If you are held longer than 72 hours the court will hold a hearing to determine if there is clear and convincing evidence that isolation or quarantine is necessary to prevent a serious risk to the health and safety of others. Instead of isolation or quarantine, or in addition to isolation or quarantine, the court may order other public health measures such as medical treatment.

You have the right to participate in this hearing and present evidence. Your attorney can attend this hearing on your behalf or steps will be taken to allow you to meaningfully participate.

You may waive your right to a hearing. If you want to waive your right to a hearing, fill out the attached form and return it to the court at the address indicated.

Petition for Release

If the court has ordered you to be isolated or quarantined and you believe that you should be released, you or an attorney acting on your behalf can ask the court to release you by filing a petition. You can call your attorney to help you with the petition, or if you do not have an attorney, you can ask the court to appoint one for you to help with the petition. If you do not want to be represented by an attorney, you can prepare and file the petition yourself.

The petition must be filed with the court and must contain the caption used at the very beginning of this document where it lists "petitioner" and "respondent," and the case number. In the petition you need to explain why you believe you do not have \_\_\_\_\_\_\_\_\_ or are not contaminated with \_\_\_\_\_\_\_\_\_\_, why you do not present a serious risk to the health and safety of others, or how you will comply with voluntary measures in a manner that protects the public's health and safety. You should include, with the petition, any information that supports your arguments about why you should be released.

The court will then decide if the petitioner has shown by clear and convincing evidence that isolation or quarantine is necessary to prevent a serious health risk to the health and safety of others and issue an order denying or granting your release.

Conditions of Confinement

Oregon law provides that if you are subject to an order of isolation or quarantine certain conditions and principles must be adhered to. If at any time you believe these conditions or principles are not being followed, you can petition the court for a hearing, either through your attorney (and if you do not yet have one, you can request one if you cannot afford one) or on your own. You will need to use the caption (on the first page of this document) and the case number.

The conditions and principles of confinement are as follows:

(1) The state or county must use the least restrictive means necessary to isolate or quarantine you.

(2) Your health status must be monitored regularly to determine if you require continued isolation or quarantine.

(3) You must be released as soon as practicable when it is determined that you are no longer contaminated or no longer pose a substantial risk of transmitting a communicable disease to others.

(4) Your needs must be addressed to the greatest extent practicable in a systematic and competent fashion, including, but not limited to, providing adequate food, medication, competent medical care, clothing, shelter and means of communication with other persons who are in isolation or quarantine and persons who are not under isolation or quarantine, such as your attorney.

(5) The place used for isolation or quarantine must, to the extent practicable, be maintained in a safe and hygienic manner to lessen the likelihood of further transmission of a communicable disease or possibly communicable disease or of further harm to you.

(6) Your cultural and religious beliefs will be considered to the extent practicable in addressing your needs.

(7) If you are subject to an order of quarantine but not isolation, you may not be confined with isolated persons. You may be isolated if the state or county reasonably believes that you have become infected with a communicable disease and you pose a significant threat to the health and safety of others.

(8) You may not be confined in jail unless you present an immediate and serious physical threat to the staff or property of a hospital or other facility in which you have been confined, or you have been found in contempt of court because of your failure to obey a court order.

ORS 433.128.

In addition, nothing in the law governing isolation and quarantine prohibits a person who relies exclusively on spiritual means to treat a communicable disease or possibly communicable disease and who is infected with a communicable disease or has been exposed to a toxic substance from being isolated or quarantined in a private place of the person's own choice, provided the private place is approved by the petitioner and the person who is isolated or quarantined complies with all laws, rules and regulations governing control, sanitation, isolation and quarantine.

Penalties for Failure to Comply With an Emergency Administrative Order or Court Order

If you fail to comply with the specific terms of an emergency administrative order for isolation or quarantine you may be subject to civil penalties of up to $500 a day. ORS 431A.010(1)(d).

If you fail to obey an order issued by the judge at any time in this case, you may be subject to contempt proceedings under ORS 33.015 to 33.155, which could result in your being put in jail. ORS 433.123(13).

IN THE CIRCUIT COURT FOR THE STATE OF OREGON

FOR THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| [Oregon Health Authority, Public Health  Director/ Local Public Health Authority]  Petitioner,  v.  [Insert initials of person(s) to be detained],    Respondent. | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_  WAIVER OF COUNSEL |

I, the Respondent, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, have reviewed and understand the Notice of Rights provided to me by the petitioner.

I understand that I have the right to an attorney, and that if I cannot afford one, the court would appoint an attorney for me at state expense. By signing this document I expressly, knowingly, and intelligently refuse to have an attorney represent me. I understand that the court may wish to contact me to discuss the waiver of my right to an attorney. The court can call me at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Signature of Respondent

**FILE THIS FORM WITH**:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Circuit Court

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [Address]

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [Phone No]

IN THE CIRCUIT COURT FOR THE STATE OF OREGON

FOR THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| [Oregon Health Authority, Public Health  Director/ Local Public Health Authority]  Petitioner,  v.  [Insert initials of person(s) to be detained],    Respondent. | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_  wAIVER OF HEARING |

I, the Respondent, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, have reviewed and understand the Notice of Rights provided to me by the petitioner.

I understand that I have the right to a hearing to contest the petition for isolation or quarantine filed by the petitioner. By signing this document I expressly, knowingly, and intelligently waive my right to a hearing. I understand that the court may wish to contact me to discuss the waiver of my right to a hearing. The court can call me at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Signature of Respondent

**FILE THIS FORM WITH**:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Circuit Court

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [Address]

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [Phone No]

CERTIFICATE OF SERVICE

I hereby certify that on the \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_, I personally served [list the documents] on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, at:

[list address/place where service occurred]

**OR**

I was unable to individually personally serve [describe the group of persons sought for detention] because [insert facts that made it impracticable] and therefore I [insert facts of how the documents were presented to the group, i.e. posting, etc].

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

[Name of person completing service]

IN THE CIRCUIT COURT FOR THE STATE OF OREGON

FOR THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| [Oregon Health Authority, Public Health  Director/ Local Public Health Authority]  Petitioner,  v.  [Insert initials of person(s) to be detained],    Respondent. | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_  MOTION TO RESCHEDULE HEARING |

Petitioner moves the court for an order rescheduling the hearing set for \_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. [optional: Counsel for the respondent consents to the continuance/objects to the continuance.]

POINTS AND AUTHORITIES

In support of this Motion petitioner relies on the Affidavit of \_\_\_\_\_\_\_\_\_\_\_\_\_, and ORS 433.123(6)(b).

DATED this \_\_\_\_\_ day of \_\_\_\_\_\_\_, \_\_\_\_\_.

.

Respectfully submitted,

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

\*

Of Attorneys for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IN THE CIRCUIT COURT FOR THE STATE OF OREGON

FOR THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| [Oregon Health Authority, Public Health  Director/ Local Public Health Authority]  Petitioner,  v.  [Insert initials of person(s) to be detained],    Respondent. | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_  AFFIDAVIT IN SUPPORT OF MOTION TO RESCHEDULE HEARING |

STATE OF OREGON )

)

County of \_\_\_\_\_\_\_\_\_ )

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ being first sworn, depose and say:

1. I am \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

2. [Fill in facts re: extraordinary circumstances for continuance, good cause for continuance, or that respondent has agree to continuance and why].

3. [Explain when hearing should be scheduled - can't be more than 10 days].

4. [Explain any communication between you and respondent or respondent’s attorney about the motion]

DATED this \_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_.

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

Affiant

SUBSCRIBED AND SWORN before me this \_\_\_\_ day of \_\_\_\_\_\_\_\_\_, \_\_\_\_\_.

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

Notary Public for Oregon

My Commission Expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IN THE CIRCUIT COURT FOR THE STATE OF OREGON

FOR THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| [Oregon Health Authority, Public Health  Director/ Local Public Health Authority]  Petitioner,  v.  [Insert initials of person(s) to be detained],    Respondent. | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_  ORDER RESCHEDULING HEARING |

Having reviewed petitioner's Motion to Reschedule Hearing, and the supporting affidavit, the court GRANTS the motion.

IT IS HEREBY ORDERED that the hearing now scheduled for \_\_\_\_\_\_\_\_\_\_\_\_\_ is continued until \_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_, at \_\_\_\_\_\_\_.

DATED this \_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_, \_\_\_\_\_

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

Circuit Court Judge

CERTIFICATE OF SERVICE

I hereby certify that on the \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_, \_\_\_\_, I [personally served/mailed] [list the documents] on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, at:

[list address/place where service occurred]

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

[Name of person completing service]

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ COUNTY/

OREGON HEALTH AUTHORITY, pUBLIC HEALTH DIVISION

for the state of oregon

|  |  |
| --- | --- |
| [Oregon Health Authority,  Public Health Director/  Local Public Health Authority]    Petitioner,  v.  [Insert initials of person(s) to be detained],    Respondent. | No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_  EMERGENCY ORDER FOR [ISOLATION/QUARANTINE] |

To: [Insert Name of Respondent and address, if possible]

Pursuant to ORS 433.121(1), the Petitioner has determined that there is probable cause to believe that you require immediate [isolation/quarantine] in order to avoid a clear and immediate danger to others. The Petitioner is issuing this emergency order because considerations of safety do not allow for the filing of a petition for [isolation/quarantine] with the court.

This order is based on the following facts:

[Insert, in separate paragraphs, facts that tell the respondent's story, in chronological order, detailing:

* The reasonable efforts made to obtain voluntary compliance including requests for testing or medical examination, treatment, counseling, vaccination, decontamination of persons or animals, isolation, quarantine, and inspection and closure of facilities; or why reasonable efforts to obtain voluntary compliance are not possible and why the pursuit of these efforts creates a risk of serious harm to others;
* A description of the suspected communicable disease or toxic substance, if known, and why there is a reasonable belief that a person has a disease, has been exposed to one, or may be or is contaminated with a toxic substance;
* A description of the medical basis for which isolation or quarantine is justified;
* Why the person would pose a serious and imminent risk to the health and safety of others if not detained isolated or quarantined;
* An explanation of why isolation or quarantine is the least restrictive means available to prevent a risk to the health and safety of others;
* The time and date at which the isolation or quarantine commences;
* How long the isolation or quarantine is expected to last based on the suspected communicable disease or toxic substance;
* Where the person will be detained, if known; and

* A statement of compliance with the conditions of and principles for isolation and quarantine specified in ORS 433.128.

Therefore, IT IS ORDERED THAT:

1. You shall be detained at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ until \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [not to exceed 72 hours from the time the Respondent is placed in [isolation/quarantine]];

2. You are required to comply with treatment protocols, including \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

3. You are required to submit to appropriate laboratory tests, including \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; and

4. You shall cooperate with physical examinations and other diagnostic and treatment modalities as deemed appropriate by his treating physician.

Pursuant to ORS 433.156, state and local law enforcement authorities shall cooperate with the Local Public Health Administrator in enforcing this order.

If [isolation/quarantine] beyond the 72 hours is needed the petitioner will file a petition in circuit court seeking to continue the [isolation/quarantine] and the court will hold a hearing on the petition.

**Failure to comply with this order may subject you to civil penalties of up to $500 a day. ORS 431A.010(1)(d).**

**A Notice of Rights is attached to this order.**

DATED this \_\_\_\_\_ day of \_\_\_\_\_\_\_, \_\_\_\_\_.

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

\*

Local Public Health Administrator/Public Health Director

CERTIFICATE OF SERVICE

I hereby certify that on the \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_, \_\_\_\_, I personally served [list the documents] on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, at:

[list address/place where service occurred]

**OR**

I was unable to individually personally serve [describe the group of persons sought for detention] because [insert facts that made it impracticable] and therefore I [insert facts of how the documents were presented to the group, i.e. posting, etc].

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

[Name of person completing service]

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ COUNTY/

oregon health authority, public health division

for the state of oregon

|  |  |
| --- | --- |
| [Oregon Health Authority, Public Health  Director/ Local Public Health Authority]  Petitioner,  v.  [Insert initials of person(s) to be detained],    Respondents. | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_  EMERGENCY ORDER FOR GROUP [ISOLATION/QUARANTINE] |

To: [Insert Name of Respondents and addresses, if possible]

Pursuant to ORS 433.121(1), the Petitioner has determined that there is probable cause to believe that you require immediate [isolation/quarantine] in order to avoid a clear and immediate danger to others. The LPHA is issuing this order because considerations of safety do not allow the filing of a petition for [isolation/quarantine] with the court.

This order is based on the following facts:

[Insert, in separate paragraphs, facts that tell the respondents' story, in chronological order, detailing:

* The reasonable efforts made to obtain voluntary compliance including requests for testing or medical examination, treatment, counseling, vaccination, decontamination of persons or animals, isolation, quarantine, and inspection and closure of facilities; or why reasonable efforts to obtain voluntary compliance are not possible and why the pursuit of these efforts creates a risk of serious harm to others;
* A description of the suspected communicable disease or toxic substance, if known, and why there is a reasonable belief that a person has a disease, has been exposed to one, or may be or is contaminated with a toxic substance;
* A description of the medical basis for which isolation or quarantine is justified;
* Why the group of persons would pose a serious and imminent risk to the health and safety of others if not detained isolated or quarantined;
* An explanation of why isolation or quarantine is the least restrictive means available to prevent a risk to the health and safety of others;
* The time and date at which the isolation or quarantine commences;
* How long the isolation or quarantine is expected to last based on the suspected communicable disease or toxic substance;
* Where the persons will be detained, if known; and

* A statement of compliance with the conditions of and principles for isolation and quarantine specified in ORS 433.128.

Therefore, IT IS ORDERED that:

1. You shall be detained at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, until \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[not to exceed 72 hours from the time the respondents are placed in [isolation/quarantine];

2. You are required to comply with treatment protocols, including \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

3. You are required to submit to appropriate laboratory tests, including \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; and

4. You shall cooperate with physical examinations and other diagnostic and treatment modalities as deemed appropriate by a treating physician.

Pursuant to ORS 433.156, state and local law enforcement authorities shall cooperate with the Petitioner in enforcing this order.

If [isolation/quarantine] beyond the 72 hours is needed the Petitioner will file a petition in circuit court seeking to continue the [isolation/quarantine] and the court will hold a hearing on the petition.

**Failure to comply with this order may subject you to civil penalties of up to $500 a day. ORS 431A.010(1)(d).**

**A Notice of Rights is attached to this order.**

DATED this \_\_\_\_\_ day of \_\_\_\_\_\_\_, \_\_\_\_\_.

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

\*

Local Public Health Administrator/State Public Health Director

CERTIFICATE OF SERVICE

I hereby certify that on the \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_, \_\_\_\_, I personally served [list the documents] on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, at:

[list address/place where service occurred]

**OR**

I was unable to individually personally serve [describe the group of persons sought for detention] because [insert facts that made it impracticable] and therefore I [insert facts of how the documents were presented to the group, i.e. posting, etc].

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

[Name of person completing service]

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ COUNTY/

OREGON HEALTH AUTHORITY, PUBLIC HEALTH DIVISION

FOR THE STATE OF OREGON

|  |  |
| --- | --- |
| In the Matter of:  [Insert name of person(s) to be detained],  Respondent. | ORDER REQUIRING [TESTING/MEDICAL EXAMINATION] |

**To: [Respondent's name and address]**

Under ORS 433.035 the Local Public Health Administrator (LPHA) for \_\_\_\_\_\_\_\_ County / State Public Health Director (PHD) may require a person who may have, or may have been exposed to a [communicable, reportable disease/a new or uncommon disease of public health significance/condition that is the basis of a state of public health emergency declared by the Governor] to undergo [testing/a medical examination] to establish the existence or absence of the disease.

The LPHA/PHD believes that you [may have/have been exposed to] \_\_\_\_\_\_\_\_\_. \_\_\_\_\_\_\_\_\_ is a [virus/bacteria/other] that is spread through \_\_\_\_\_\_\_. The symptoms of \_\_\_\_\_ are \_\_\_\_\_\_\_\_\_\_\_\_\_. Without treatment you may \_\_\_\_\_\_\_\_\_\_\_\_\_\_. You are believed [to have/to have been exposed to] \_\_\_\_\_ based on the following facts:

1. [fill in as many facts as possible]

2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Attempts have been made to get you to voluntarily submit to treatment, including [fill in all facts of attempts for voluntary compliance]

[Testing/a medical examination may/will] determine whether you have the disease and if you do have the disease, [there is treatment that can cure the disease/there are control measures that will stop the spread of the disease to others].

To comply with this order contact \_\_\_\_\_\_ within \_\_ days to make an appointment to see \_\_\_\_\_\_\_\_\_\_. A written report will be provided to you with the results of the [testing/medical examination].

If you refuse to comply with this order the LPHA/PHD or the court may issue an emergency order requiring you to be [isolated/quarantined] or a petition may be filed in circuit court seeking an order for [isolation/quarantine]. ORS 433.121 to 433.123.

**Failure to comply with this order may subject you to civil penalties of up to $500 a day. ORS 431A.010(1)(d).**

Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Local Public Health Administrator/Public Health Director

CERTIFICATE OF SERVICE

I hereby certify that on the \_\_\_\_\_ day of \_\_\_\_\_\_\_, \_\_\_\_\_, I personally served [list

the documents] on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, at:

[list address/place where service occurred]

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

[Name of person completing service]

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ COUNTY

OREGON HEALTH AUTHORITY, PUBLIC HEALTH DIRECTOR

FOR THE STATE OF OREGON

|  |  |
| --- | --- |
| In the Matter of:  [Insert name of person(s) to be detained],  Respondent. | ORDER REQUIRING TREATMENT |

**To: [Respondent's name and address]**

Under ORS 433.035 the Local Public Health Administrator (LPHA) for \_\_\_\_\_\_\_\_\_\_\_\_ County / Public Health Director (PHD) may require a person with a communicable disease complete an appropriate prescribed course of medication/other treatment, including directly observed therapy if appropriate, and to follow infection control provisions for the disease.

You have been diagnosed with \_\_\_\_\_\_\_\_\_. Without treatment you will \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

To comply with this order you must:

1.

2.

3.

If you refuse to comply with this order the LPHA/ PHD may issue an emergency order requiring you to be [isolated/quarantined] or may file a petition in circuit court seeking the imposition of a public health measure, including isolation or quarantine under ORS 433.121 to 433.123.

**Failure to comply with this order may subject you to civil penalties of up to $500 a day. ORS 431A.010(1)(d).**

Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Local Public Health Administrator/Public Health Director

CERTIFICATE OF SERVICE

I hereby certify that on the \_\_\_\_\_ day of \_\_\_\_\_\_\_\_, \_\_\_\_, I personally served [list the documents] on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, at:

[list address/place where service occurred]

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

[Name of person completing service]

IN THE CIRCUIT COURT FOR THE STATE OF OREGON

FOR THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| In the Matter of: [property address or description],  Contaminated Property  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_  PETITION TO ISOLATE PROPERTY |

1. Pursuant to ORS 431A.010 and 433.142, the Local Public Health Administrator (LPHA) for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_County / Oregon Health Authority, Public Health Director (PHD) petitions the court to isolate \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [describe property] hereinafter "the property" that is [believed to be/is] contaminated with a toxic substance that poses a serious risk to the health and safety of others. This petition is supported by the attached affidavit of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

2. [Describe property, if necessary].

3. The property is suspected to be contaminated with \_\_\_\_\_\_\_\_\_\_\_/is contaminated with] \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_], a toxic substance as that is defined in ORS 431A.005 and ORS 433.001. This toxic substance \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[put in facts about the health effects of the toxic substance].

4. The property is [suspected to be contaminated/known to be contaminated] because \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[put in facts that support the reasonable belief that property is contaminated, e.g. testing].

5. The toxic substance poses a serious risk to the health and safety of others because \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

6. [Reasonable efforts were made to obtain voluntary compliance/ Reasonable efforts to obtain voluntary compliance were not possible and would have created a serious risk of serious harm to others because \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_].

7. Isolation is necessary because [explain the medical justification and why it is the least restrictive means].

8. The property can be decontaminated by \_\_\_\_\_\_\_\_\_\_\_\_/**OR** The toxic substance can be neutralized by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/ **OR** The property cannot be decontaminated and must be destroyed because \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

9. Petitioner requests that the court order:

a. The property be isolated until \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_;

b. The property owner be required to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[set out remedial actions necessary to neutralize or remove the toxic substance]; and

c. [Add any other conditions necessary ensure that isolation is carried out in a manner that protects the public's health e.g. no entry unless authorized].

10. Under ORS 433.142, the court is required to hold a hearing on this petition within 72 hours of the filing of the petition, exclusive of Saturdays, Sundays, and legal holidays.

DATED this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_.

Respectfully submitted,

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

\*

Of Attorneys for \_\_\_\_\_\_\_\_\_\_\_ LPHA/PHD

IN THE CIRCUIT COURT FOR THE STATE OF OREGON

FOR THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| In the Matter of: [property address or description],  Contaminated Property  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_  AFFIDAVIT IN SUPPORT OF PETITION TO ISOLATE PROPERTY |

STATE OF OREGON )

)

County of \_\_\_\_\_\_\_\_\_ )

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ being first duly sworn, depose and say:

1. I am the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [title, job description, qualifications].

2. In my role as \_\_\_\_\_\_\_\_\_\_\_\_, I am familiar with the facts of this case.

3. [Put in facts about the property, how you first became aware of the property and why it is believed that it is contaminated with a toxic substance.]

4. [Explain what the toxic substance is and its health effects if exposed].

5. [Explain why isolation is necessary to prevent a serious risk to the health and safety of others and why isolation is the least restrictive alternative].

6. [Explain the reasonable efforts made to obtain voluntary compliance, or why efforts to obtain voluntary compliance were not possible and why pursuit of these efforts creates a serious risk of harm to others].

7. [Explain how the property can be contaminated or neutralized, or whether it has to be destroyed and why].

8. [Explain any conditions necessary to ensure that isolation is carried out in a manner that protects the public's health].

DATED this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_.

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

Affiant

SUBSCRIBED AND SWORN before me this \_\_\_\_\_day of \_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_.

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

Notary Public for Oregon

My Commission Expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IN THE CIRCUIT COURT FOR THE STATE OF OREGON

FOR THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| In the Matter of: [property address or description], Contaminated Property  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_  ORDER TO ISOLATE PROPERTY |

Having reviewed the Petition filed by Petitioner [LPHA/PHD], Affidavit of \_\_\_\_\_\_\_\_\_\_\_, and evidence and testimony provided at the hearing held on \_\_\_\_\_\_\_\_\_\_\_\_\_\_, and being fully advised,

THE COURT FINDS:

1. There is clear and convincing evidence that isolation of \_\_\_\_\_\_\_\_\_\_\_\_, is necessary to prevent a serious risk to the health and safety of others based on the following facts:

2. [insert information from paragraph 3 of affidavit (information about why property is believed to be contaminated/or how it is known to be contaminated];

3. [insert information from paragraph 4 of affidavit (information about toxic substance and its health effects) or updated information presented at the hearing];

4. [insert information from paragraph 5 of affidavit (facts about why isolation warranted) or updated information presented at the hearing];

5. [insert information from paragraph 6 of affidavit (efforts to obtain voluntary compliance or why not possible) or updated information presented at the hearing]; and

6. [insert information from paragraphs 7 and 8 of affidavit (how to decontaminate, neutralize or destroy property, conditions of isolation to protect public health) or updated information presented at the hearing].

Therefore, the court ORDERS that:

1. The property shall be isolated until petitioner notifies the court, in writing, that the toxic substance no longer poses a serious risk to the health and safety of others;

2. The property owner is required to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[insert conditions necessary to ensure that isolation is carried out in a manner that protects the public's health];

3. The property owner shall \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [set out remedial actions necessary to neutralize or remove the contamination or procedures for destruction of the property].

**Failure to obey this order shall subject the respondent to contempt proceedings under ORS 33.015 to 33.155.**

DATED this \_\_\_\_\_ day of \_\_\_\_\_\_\_, \_\_\_\_\_.

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

\*

Circuit Court Judge

CERTIFICATE OF SERVICE

I hereby certify that on the \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_, \_\_\_\_, I personally served [list the documents] on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, at:

[list address/place where service occurred]

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

[Name of person completing service]

IN THE CIRCUIT COURT FOR THE STATE OF OREGON

FOR THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| [Name of County or State],  Petitioner,  v.  [Insert initials of person(s) to be detained],  Respondent. | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  MOTION TO SEAL |

Pursuant to ORS 433.137 Petitioner moves the Court for an order sealing all records and documents submitted in this matter unless and until the court orders records to be released. This Motion is supported by the attached Affidavit of Counsel.

Pursuant to [local rule #], I did/did not confer with respondent about this motion.

DATED this day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_

[signature line of attorney]

IN THE CIRCUIT COURT FOR THE STATE OF OREGON

FOR THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| [Name of County or State],  Petitioner,  v.  [Insert initials of person(s) to be detained],  Respondent. | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  AFFIDAVIT OF COUNSEL IN SUPPORT OF PETITIONER’S MOTION TO SEAL |

STATE OF OREGON

County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

)

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)

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, being first duly sworn, depose and say:

1. I am the [insert title, job description, qualifications].

2. ORS 433.137 requires that the court cause to be recorded in the court records:

a. A full account of proceedings at hearings conducted pursuant to ORS 433.121, 433.123, 433.133 and 433.136;

b. The petitions, affidavits, judgments and orders of the court; and

c. A copy of the orders issued.

3. However, the information listed in paragraph two may only be released in limited circumstances.

4. In order to avoid inadvertent disclosure of protected information, petitioner requests that the court seal the records and recordings in this case and only permit their release:

a. To the respondent or the legal representative or attorney of the respondent;

b. To the state Public Health Director or a local public health administrator; or

c. Pursuant to a court order issued in accordance with ORS 433.137.

DATED this \_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_.

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

Affiant

SUBSCRIBED AND SWORN before me this \_\_\_\_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_.

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

Notary Public for Oregon

My Commission Expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IN THE CIRCUIT COURT FOR THE STATE OF OREGON

FOR THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| [Name of County/State],  Petitioner,  v.  [Insert initials of person(s) to be detained],  Respondent. | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ORDER SEALING RECORDS |

Having reviewed the Petitioner’s Motion to Seal and ORS 433.137, and being fully advised, the Court grants the Petitioner’s motion and makes the following ORDER:

1. The full account of proceedings at hearings conducted in this matter, petitions, affidavits, judgments and orders of the court, ARE SEALED.

2. The records and recordings placed under seal may only be released:

a. To the respondent or the legal representative or attorney of the respondent;

b. To the state Public Health Director or a local public health administrator; or

c. Pursuant to a court order issued in accordance with ORS 433.137.

DATED this \_\_\_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_.

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

\*

Circuit Court Judge

CERTIFICATE OF SERVICE

I hereby certify that on the \_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_, I personally served [list the documents] on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, at:

[list address/place where service occurred]

**OR**

I was unable to individually personally serve [describe the group of persons sought for detention] because [insert facts that made it impracticable] and therefore I [insert facts of how the documents were presented to the group, i.e. posting, etc.].

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

[Name of person completing service]

IN THE CIRCUIT COURT FOR THE STATE OF OREGON

FOR THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| [Name of County or State],  Petitioner,  v.  [Insert initials of person(s) to be detained],  Respondent. | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  PETITIONER’S MOTION TO EXCLUDE PETITIONER FROM PERSONAL COURT APPEARANCE |

Petitioner, [ local public health or state public health director], moves the court to issue an order excluding respondent from personally appearing at the hearing scheduled for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, pursuant to ORS 433.123(7), because such an appearance would pose a risk of serious harm to others.

POINTS AND AUTHORITIES

In support of the foregoing motion petitioner relies on the attached affidavit of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

DATED this \_\_\_\_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_.

[signature line for attorney]

IN THE CIRCUIT COURT FOR THE STATE OF OREGON

FOR THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| [Name of County/State],  Petitioner,  v.  [Insert initials of person(s) to be detained],  Respondent. | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  AFFIDAVIT IN SUPPORT OF PETITIONER’S MOTION TO EXCLUDE PETITIONER FROM PERSONAL COURT APPEARANCE |

STATE OF OREGON )

)

County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_ )

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, being first duly sworn, depose and say:

1. I am the [insert title, job description, qualifications].

2. In my role as \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, I am familiar with the facts of this case.

3. [put in facts that support the motion to exclude the petitioner from the courtroom]

DATED this \_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_.

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

Affiant

SUBSCRIBED AND SWORN before me this \_\_\_\_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_.

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

Notary Public for Oregon

My Commission Expires: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IN THE CIRCUIT COURT FOR THE STATE OF OREGON

FOR THE COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| [Name of County/State],  Petitioner,  v.  [Insert initials of person(s) to be detained],  Respondent. | Case No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ORDER EXCLUDING PETITIONER FROM PERSONAL COURT APPEARANCE |

Having reviewed the Petitioner’s Motion to Exclude Petitioner from Personal Court Appearance, the Affidavit of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, ORS 433.123(7), and being fully advised,

THE COURT FINDS:

1. Respondent’s personal appearance in court would pose a risk of serious harm to others and therefore respondent may not appear at the court hearing scheduled for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

2. Respondent may participate by phone or by any simultaneous electronic transmission.

DATED this \_\_\_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_.

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

\*

Circuit Court Judge

CERTIFICATE OF SERVICE

I hereby certify that on the \_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_, I personally served [list the documents] on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, at:

[list address/place where service occurred]

**OR**

I was unable to individually personally serve [describe the group of persons sought for detention] because [insert facts that made it impracticable] and therefore I [insert facts of how the documents were presented to the group, i.e. posting, etc.].

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

[Name of person completing service