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Teaching Forensic Psychiatry to Medical Students

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ABSTRACT: Are separate courses on forensic psychiatry available for medical students? During the 1985 to 1986 academic year, the authors surveyed all U.S. medical schools to identify courses on forensic/legal psychiatry. A minority of schools included separate courses or practicums on forensic psychiatry or mental health law. In a follow-up telephone survey, instructors of each of these courses were interviewed. Information was obtained on format of course, duration, discipline of instructor or instructors, topics covered, reading materials, institutional settings, and the number of students who took the course. The results are discussed and compared with earlier surveys.

KEYWORDS: psychiatry, education, medical personnel, surveys

Forensic psychiatry, the legal regulation of psychiatry, and mental health law are overlapping fields of knowledge that have expanded substantially in recent years. Availability of courses on these topics for medical students, at least on an elective basis, would provide balance and enrichment to the academic fare. Importance is highlighted by the growing complexity of mental health law with which the general medical practitioner must have some familiarity (consider civil commitment, for example). For those who prepare to teach courses on forensic/legal psychiatry, it should be of interest to know what other schools are offering, particularly in the way of separate courses.

Most surveys on mental health law education in medical centers have been more general, inquiring about forensic and legal medicine [1], health law [2-5], or the teaching of forensic psychiatry at various levels of training [6, 7], not just in the education of medical students. Other surveys pertain to forensic psychiatry for residents in general psychiatry³ and to forensic psychiatry fellowship programs. The 1984 to 1985 American Association of Medical Colleges Curriculum Directory [8] did not mention forensic/legal psychiatry as a course at any of the U.S. medical schools.

Rather than offer a separate course on mental health law, most schools integrate selected topics into other courses such as medical jurisprudence, medical ethics, or the psychiatry

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³R. Rosner, personal communication regarding survey conducted by the Accreditation Council on Fellowships in Forensic Psychiatry, 1 April 1988.

clerkship. Stoller's survey reported in 1958 included information on both programs for medical students and postgraduate training [6]. Receiving replies from 58 out of 87 schools contacted, Stoller found that about two thirds of the schools offered at least one formal lecture on forensic psychiatry to medical students. Lectures were typically integrated into a broader course on health law. Topics varied greatly, but civil commitment was the most frequently included one. Less than one half of responding schools had seminars or conferences in forensic psychiatry; discussions were case centered and did not consistently address particular topics. At three quarters of schools, students received some practical experience, usually observational, such as watching court procedures.

In 1965, Barr and Suarez reported a survey of law schools, medical schools, and psychiatric residency programs [7]. Of the 86 medical schools contacted, 74 were included. Forty-three percent of responding schools provided 1 to 9 h of "exposure to the field" of forensic psychiatry; 34%, 10 h or more; and 23%, no exposure. Exposure usually occurs in third or fourth years. Didactic material was typically incorporated into a course on health law. Only two medical schools were singled out for having developed programs. University of Michigan students received 5 h of lecture in forensic psychiatry. Medical students at New York University received three lectures. Unfortunately, the survey did not distinguish required from elective courses.

A survey by Beresford, reported in 1971, yielded 79 responses from 96 medical schools [4]. Forty-two offered a course in health law, and the course was mandatory at fifteen of the schools. Twenty-four schools included some discussion of "psychiatry and the law."

Grumet's survey in 1978 identified 73 schools which offered elective or required courses in health law [5]. Most frequently covered topics were those of common interest to psychiatry and medicine generally such as confidentiality (55 schools) and informed consent (52 schools).

A few years before the present survey, the American Society of Law and Medicine (ASLM) initiated development of a national directory of health law programs. Four schools were identified with a separate course for medical students on forensic/legal psychiatry: (1) "Legal Aspects of Psychiatric Practice," Rutgers (now Robert Wood Johnson Medical School), Piscataway, New Jersey; (2) "Forensic Psychiatry," University of Iowa, Iowa City, Iowa; (3) "Seminar in Forensic Psychiatry," University of Pennsylvania, Philadelphia, Pennsylvania; and (4) "Law and Psychiatry," Wayne State University, Detroit, Michigan.

The American Academy of Psychiatry and the Law (AAPL), today the largest organization of forensic psychiatrists in the world, was established in 1969 to promote the teaching of forensic/legal psychiatry in medical schools and residency training programs [9]. Stimulated by this early AAPL goal, Robert L. Sadoff and others conducted a comprehensive survey of medical schools and residency training programs in early 1973. The 83 of the 91 centers that responded substantiated the impression of an expanding interest in forensic psychiatry. Eight-one percent of respondents replied that their center either offered interdisciplinary programs in psychiatry and the law or were planning to offer such programs. Over half of the reported programs addressed topics of criminal responsibility, sex offenders, drug abuse, competency, commitment procedures, and expert testimony. Although this survey was most useful in identifying programmatic content and teaching materials, the report did not distinguish courses for medical students from postgraduate programs.

The development of forensic psychiatry fellowships is a recent phenomenon. Most residency programs systematically offer some training in forensic psychiatry. Our interest here, however, is in organized courses on legal and forensic psychiatry offered to students in training at the undergraduate level, that is, during medical school. Review of the literature suggests that while some lectures or "exposure to the field" is presented to students at most medical schools, the number of separate, organized courses on forensic/legal psychiatry which are registered in national surveys is remarkably small.

Method

The present survey is the second of a two-phase project. In 1984 to 1985, all 127 U.S. medical schools were surveyed by questionnaire mailings and telephone interviews to determine what schools were teaching medical students about health law and mental health law. Results of this survey were previously reported [10,11]. Briefly, all 127 medical schools were represented either by the two-page mailed questionnaire, telephone interview, or both. One section of the questionnaire addressed courses in health law or medical jurisprudence. Another section pertained to forensic/legal psychiatry.

Although most schools integrate some health or mental health topics into broader courses, the extent to which useful material is systematically integrated in other courses is difficult to assess. We therefore limited our inquiry to separate, focused courses on health law and mental health law; 54 (42.5%) of schools offered a focused course on health law; only 13 registered a focused seminar or rotation in psychiatry and the law. Most courses on psychiatry and the law included all topics on the questionnaire, but in order to achieve 100% return rate, the questionnaire was simple in design and asked about only 7 topics on forensic/legal psychiatry.

The present survey focused exclusively on those programs presented as separate courses on forensic/legal psychiatry and offering separate credit. Our purpose here was to isolate separate courses from lecture series and clinical experiences which were incorporated into another course or rotation with a focus not limited to forensic/legal psychiatry. This limited to ten the number of centers which had such undergraduate courses, identified through this two-phase survey. Afterwards, reports directly from course instructors allowed identification of two additional centers with courses on forensic psychiatry (University of Wisconsin—Madison and University of Missouri—Columbia), bringing to twelve the number of centers with courses on forensic psychiatry for medical students.

Inquiry into course format, content, credentials of instructors, and teaching materials was more extensive than the earlier survey and accomplished by means of a 3¹/₂-page telephone interview schedule. The surveyors telephoned the designated course instructor and obtained information through interview. This was accomplished for all but one program, the latter completing telephone interview schedules and returning them through the mail.

Interview schedules included course format, credentials of all instructors, topics, required readings, videotapes and other audiovisual teaching aides, setting for practicums and clerkships, and number of students in the course.

To ensure accuracy of tabulated data, tables were sent to instructors who were invited to make any corrections pertaining to their own courses.

Results

The present follow-up survey identified twelve medical centers that offered a separate course on forensic/legal psychiatry with academic credit (Table 1). The Medical College of Georgia offered two courses for medical students. Case Western Reserve offered three during the year surveyed and now in 1988 has a fourth course entitled "Civil Law and Psychiatry." All courses were elective and only one, "Criminal Law and Psychiatry," at Case Western Reserve required students to take an examination. Course titles were "Psychiatry and the Law," "Law and Psychiatry," or "Forensic Psychiatry" except where the focus was more limited, such as in "Criminal Law and Psychiatry."

Most of the separate courses on law and psychiatry were practicums (three) or full-time clerkships (nine) (Table 2). One was offered as either a clerkship or a part-time practicum. Only three were seminars with a discussion/lecture format. Most practicums and clerkships were about one month in duration. The number of students assigned to the rotation was

TABLE 1—*Status of courses for academic credit.*

School	Title of Course	Course Required (R) or Elective (E)	Examination	Grade	Credit
Yale University	Forensic Psychiatry	E			yes
Medical College of Georgia	Psychiatry & the Law	E	no	yes	yes
	Psychiatry & the Law	E	no	yes	yes
Northwestern University	Law & Psychiatry	E	no	yes	yes
Rush Medical College	Forensic Psychiatry	E	no	yes	yes
University of Missouri-Columbia	Elective in Forensic Psychiatry	E	no	yes	yes
Robert Wood Johnson Medical School	Psychiatry & the Law	E			yes
Mount Sinai	Forensic Psychiatry	E			yes
Case Western Reserve	Forensic Psychiatry Clerkship	E	no	yes	yes
	Criminal Law & Psychiatry	E	yes	yes	yes
	Forensic Psychiatry & Clinical Elective	E	no	yes	yes
Wright State University	Forensic Psychiatry	E	no	yes	yes
Baylor College of Medicine	Law & Psychiatry	E			yes
University of Texas Medical School-Houston	Forensic Psychiatry	E			yes
University of Wisconsin-Madison	Forensic Psychiatry	E	no	yes	yes

TABLE 2—Course format.

School	Course	Format ^a	Duration, Months	Primary Assignment	Number of Students Enrolled in 1984-85			
					Minimum	Average	Maximum	Total
Yale University Medical College of Georgia	Forensic Psychiatry	clerkship	1-1/2	court clinic	1	...	2	2
	Psychiatry & the Law	clerkship	1	forensic inpatient	1	1 1/2	2	3
	Psychiatry & the Law	practicum	6	forensic inpatient service	1	1 1/2	2	3
Northwestern University Medical School	Psychiatry & the Law	seminar	3	NA	6MS 12LS	...	20	7MS 12LS
Rush Medical College	Psychiatry & the Law	clerkship	1	psychiatric clinic	...	1	1	1-2
University of Missouri-Columbia	Elective in Forensic Psychiatry	clerkship or practicum	1-2	psychiatric inpatient service, forensic inpatient service, and psychiatric clinic	1	1	2	2
Robert Wood Johnson Medical School	Psychiatry & the Law	seminar	(6-15 h)	NA	...	16	16	16
Mount Sinai School of Medicine	Forensic Psychiatry	clerkship	1	forensic	1	variable	2	...
Case Western Reserve	Forensic Psychiatry Clerkship	clerkship	1	court clinic	...	1	1	3
	Criminal Law & Psychiatry	seminar	3 1/2	NA	...	2	...	2
	Forensic Psychiatry & Clinical Elective	practicum	1 1/2	court clinic	1	2	2	2
Wright State University	Forensic Psychiatry	clerkship	1	forensic inpatient service	1	1	2	...
Baylor College of Medicine	Law & Psychiatry	clerkship 1		forensic inpatient service	1	1	1	...
University of Texas Medical School-Houston	Forensic Psychiatry	clerkship	1	jail	1	1 or 2
University of Wisconsin-Madison	Forensic Psychiatry	clerkship	1/2-2	forensic inpatient service	1	1	3	2

^a“Clerkship” is a full-time rotation; “practicum” is part time; “seminar” is a lecture/discussion format.

^bMedical students and law students are indicated by MS and LS, respectively.

small, one or two, and in no case was the maximum greater than three students at one time. Settings for rotation assignments varied and included forensic inpatient service (seven centers), court clinic (two centers), general psychiatric clinic (one center), and jail (one). At several centers the student's time was appointed to several different settings; Table 2 indicates, where possible, the setting in which the student devoted most time.

Instructors

Primary instructors for most programs were established forensic psychiatrists, certified by the American Board of Forensic Psychiatry and holding membership in the AAPL. Five were also members of the American Academy of Forensic Sciences. The program at Wright State University was headed by a lawyer who specialized in health law. Most programs were interdisciplinary and included an attorney as one of the instructors (eight centers). Four programs had a psychologist-instructor among the faculty.

Topics

Topics covered in courses on law and psychiatry are presented in Table 3. Where teaching centers offered more than one course, data in the table reflect topics covered if all courses were considered cumulatively. The survey pertained to the 1984 to 1985 academic year, so planned courses not yet underway then are not included. Case Western Reserve, for example, now has a course on "Civil Law and Psychiatry" which covers more noncriminal topics than the present table indicates.

All programs included competency to stand trial, the insanity defense, and the duty to warn/protect. A majority of programs addressed psychiatric malpractice, patients' rights, confidentiality, civil commitment, civil competency and guardianships, expert psychiatric testimony, personal injury, right to treatment, and right to refuse treatment. Half of the programs included testamentary capacity. Less than half of the programs touched on drug abuse, sex offenders, child custody, marriage, annulment, and divorce, juvenile delinquency, and workers' compensation.

Programs more universally addressed topics in the criminal law and issues involving adults more than children and adolescents. This was consistent with the service requirements of the setting assignments (for example, jail, court clinic, forensic inservice unit). Nonetheless, courses did not appear overly narrow in focus; most programs addressed most of the topics.

Materials

Reading materials and teaching aids varied widely from one program to another. Most courses required readings of several articles, some included legal cases, and videotapes were occasionally used. In several programs forensic diagnostic interviews were videotaped for instruction. None of the programs used mock trials and none used audiotapes for teaching. Only one course required students to read a book on forensic psychiatry, though in nine programs, books and book chapters were recommended.

The following textbooks were cited for recommended readings, usually only selected chapters: *Clinical Handbook of Psychiatry and the Law* by T. G. Gutheil and P. S. Appelbaum (four programs) [12], *Law in the Practice of Psychiatry* by S. L. Halleck (two programs) [13], *The Uses of Psychiatry in the Law* by W. Bromberg (one program) [14], *The Mental Health Process* by F. W. Miller, R. O. Dawson, G. E. Dix, and R. I. Parnas (one program) [15], *Clinical Psychiatry and the Law* by R. I. Simon (one program) [16], and *Mental Health and Law: A System in Transition* by A. A. Stone (one program) [17]. Four programs selected readings from each of several books.

Other readings cited by instructors included articles from the *The Bulletin of the American Academy of Psychiatry and the Law*, articles in the *AAPL Newsletter*, articles recom-

TABLE 3—Topics included in undergraduate courses on forensic/legal psychiatry.^a

Topic	School										Total No. of Programs that Address Topic	Percentage of Programs that Address Topics		
	Yale Univ.	Medical College of Georgia	Northwestern University	Rush Medical College	University of Missouri-Columbia	Robert Wood Johnson Medical School	Mt. Sinai School of Medicine	Case Western Reserve	Wright State University	Baylor College of Medicine			University of Texas Medical School Houston	University of Wisconsin-Madison
Psychiatric malpractice	X	X		X	X	X	X	X	X	X		X	10	83
Patients' rights	X	X	X	X	X	X	X	X	X	X		X	11	92
Confidentiality	X	X	X	X	X	X	X	X	X	X		X	11	92
Civil commitment	X	X	X	X	X	X	X	X	X	X		X	10	83
Competency to stand trial	X	X	X	X	X	X	X	X	X	X		X	12	100
Insanity defense	X	X	X	X	X	X	X	X	X	X		X	12	100
Civil competency and guardianship	X	X	X	X	X	X	X	X	X	X		X	9	75
Expert psychiatric testimony	X	X	X	X	X	X	X	X	X	X		X	10	83
Drug abuse	X		X			X	X		X				5	42
Sex offenders	X		X		±	X	X	±				X	5	42
Child custody	X		X		X	X	X	X					5	42
Marriage, annulment, and divorce	X		X		X	X	X	±					4	33
Juvenile delinquency	X				X	X	X						3	25
Personal injury	X		X		X	X	X	X	±				7	58
Workers' compensation	X		X		X	X	X	±					4	33
Duty to warn/protect	X	X	X	X	X	X	X	±	X	X		X	12	100
Testimony capacity	X	X	X	X	X	X	X	±	X	X		X	6	50
Right to treatment	X	X	X	X	X	X	X	X	X	X		X	9	75
Right to refuse treatment	X	X	X	X	X	X	X	X	X	X		X	8	67

^aX = Topics included, ± = Topic may or may not be covered from one class to the next. Where teaching centers offered more than one course, the table represents topics covered if all courses are considered cumulatively.

mended by Committee on Forensic Fellowships, and legal cases recommended by the American Board of Forensic Psychiatry. A few programs made use of AAPL's Learning Resource Center's videotape library service.

Comment

Undoubtedly, much that pertains to law and psychiatry (such as informed consent and civil commitment) is included in other, more general courses in medical school. Presumably, a separate course on forensic/legal psychiatry could serve as a rich, meaningful experience and introduction to the field for interested medical students. Our survey of 127 medical schools identified 10 separate courses with credit.

Two training centers had a course on forensic psychiatry for medical students which was not registered in the nationwide survey. There may well be others. Courses were identified by initial correspondence with the office of the director of undergraduate training of each medical school, because this seemed to offer the most systematic and least biased method of identifying courses. Even with the limited yield, more courses were identified by name in the present survey than in any prior published survey.

The principle instructor for most of the courses was an established forensic psychiatrist, though a number of courses had several instructors of various professions. A lawyer participated in most of the programs. All courses were elective, and most were clinical rotations which were limited to one or two students at a time. Courses covered a wide range of topics, but most consistently addressed legal issues for adults in the criminal justice system, presumably reflecting service demands of the setting.

Some courses were especially well organized and enhanced with a variety of readings and teaching aids. Yet no single book, article, legal case, videotape, or other specific aid was consistently cited by more than just a few instructors.

The data here indicate at least 41 medical students took a separate course in forensic psychiatry during the 1984 to 1985 academic year. The Robert Wood Johnson Medical School accounted for 16 of these, where all 16 students were enrolled in a single course with seminar format. Similarly, 7 medical students and 12 law students participated in the seminar at Northwestern University. This survey does not register the number of medical students who took courses taught at law schools. Twenty-three students were in small clerkships or practicums in forensic psychiatry limited to one or two students at a time.

Two medical schools offered electives on psychiatry and the law which were taught in classrooms. This survey did not identify goals or objectives of individual instructors, so it is difficult to assess the success of this format in comparison with the practicum/clerkship format. The classroom format has the advantage of exposing many students to the field with less entrenchment upon the curricular time. It also provides a forum for discussing a wide range of topics, whereas the experiential mode will stress aspects inherent in the forensic science service. As an introduction, the classroom format may be the most practical and time/energy conservative mode of teaching a large number of students *legal psychiatry*, whereas a clerkship/practicum for one or two students at a time can provide intensive exposure to the subspecialty of *forensic psychiatry*.

Our earlier survey included, in addition to courses on forensic psychiatry, courses on medical jurisprudence or health law [10]. Most courses on health law used the seminar or lecture model; only 2 of the 54 schools with a separate health law course were full-time rotations. The classroom setting allows many students to participate, and it allows systematic coverage of topics. This model is preferable for systematic instruction of many students on topics with which the general medical practitioner ought to be familiar. Topics such as medical malpractice, informed consent, and patients' rights should be incorporated into every medical school curriculum today, and, to ensure such topics are taught, they probably ought to be presented in a separate medical-jurisprudence course rather than either buried in a more general course such as social medicine or haphazardly touched upon in various clerkships.

Teaching forensic psychiatry to medical students is quite another matter. Though forensic psychiatry can appeal to general interest, most medical practitioners do not have to know about mental illness and criminal responsibility. Topics relevant to the generalist, such as civil commitment and courtroom testimony, can be incorporated into the more general courses on legal and forensic medicine. A course in forensic psychiatry, like other subspecialty courses, should not be a requirement of all medical students, nor should a clerkship be made electively available to many students at once when most curricula are already overcrowded. The purposes of such a course ought to be to provide an appetizing intellectual and experiential fare, to allow students to pursue a special interest, and to stimulate that interest.

It makes sense, then, that most courses in forensic psychiatry are elective clerkships or practicums intended for no more than a few students at a time. This is the most effective way of stimulating and broadening interest where uniform instruction of all medical students is unneeded. A potential disadvantage of this model is that if enough students do not elect to take the course, the organization and interest in maintaining it year after year can wither and die.

This valuation of courses for medical students justifies offering forensic-psychiatry electives at every medical school where there is at least one forensic science or legal expert with energy and interest enough to develop it. Forensic psychiatry is not a course that ought to be forced into the curriculum regardless of who is available to teach it. For those who teach law and psychiatry to medical students, it is hoped that awareness of the efforts of colleagues will be helpful. For those who plan to teach, some appreciation of what others have done should be useful. From this survey, it appears that the more intensive learning experiences in forensic/legal psychiatry are clinical rotations limited to one or two students at a time. Some medical students may have already decided to take a psychiatric residency before they select their clinical electives. Nonetheless, a clinical rotation in forensic psychiatry may stimulate or consolidate the students' interest. The availability of a forensic-psychiatry rotation may serve to recruit talented and motivated students to enter psychiatry and eventually forensic psychiatry.

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