

WHAT TO EXPECT

A guide to common mental health appointments



A little preparation helps. You do not need to know the “right” thing to say. These visits are designed to help providers understand what is happening, what matters to you, and what support may be useful.

Four common appointment types

01

Mental Health Intake Background information, current concerns, needs, and next steps. This generally takes place with a therapist or other mental health professional.

02

Psychiatric Evaluation A detailed assessment of symptoms, functioning, diagnosis, and treatment options. Most typically with the psychiatrist but can also occur with a psychiatric nurse practitioner.

03

Medication Management A follow-up focused on whether medication is helping and how you are tolerating it. This can involve seeing the psychiatrist, a nurse practitioner, a physician assistant, or a combination of the three. This is dependent on the provider’s office.

04

Therapy Session Ongoing work on goals, coping skills, emotions, behaviors, relationships, and everyday challenges. This can be trauma focused, but does not have to be.

Before any appointment

- Write down your biggest questions or concerns beforehand.
- Bring an up-to-date medication list when relevant, including doses and over-the-counter medicines or supplements.
- Bring insurance information and records the provider specifically requested.
- For a child or teen, school information, evaluations, treatment records, or custody information may be useful if requested.
- Ask ahead if you need an interpreter, accessibility support, or another accommodation.

Keep in mind: Every provider and program is a little different. It is always okay to ask what an appointment will involve and what happens next.



Mental Health Intake Appointment

The starting point for understanding your needs and connecting you with appropriate services.

What usually happens

- You may complete registration, consent, privacy, and screening forms.
- A staff member asks what brought you in and what you would like help with.
- They gather background information about mental health, medical history, family, school/work, and previous services.
- You may discuss strengths, supports, stressors, and practical needs.
- The visit usually ends with recommendations or next steps.

Questions you may be asked

- What concerns are happening now, and when did they begin?
- How are sleep, appetite, mood, anxiety, attention, or behavior?
- How are things going at home, school, work, or in relationships?
- Have there been previous diagnoses, hospitalizations, therapy, or medications?
- Are there concerns about alcohol or other substances?
- Do you feel safe? Have you had thoughts of hurting yourself or someone else?

Why so many questions? The goal is to see the whole picture - not just a diagnosis. Some questions may feel personal, but they help the provider understand safety, functioning, strengths, and support needs.

For children and teens

- The provider may want information from both the caregiver and the young person.
- Part of the appointment may occur together and part separately, depending on age, provider practice, and the situation.
- School information, developmental history, behavior patterns, and caregiver observations can be helpful.

What happens afterward?

- You may be scheduled for therapy, a psychiatric evaluation, medication services, additional assessment, or another program.
- The provider may request records or additional information before making a recommendation.
- Sometimes another service is a better fit. A referral elsewhere does not mean your concerns were not taken seriously.

Helpful question “What are the next steps, and who should I contact if I have questions while I’m waiting?”



Psychiatric Evaluation

A detailed assessment used to understand symptoms, functioning, possible diagnoses, and treatment options.

This is different from ongoing therapy. A psychiatric evaluation focuses heavily on assessment and treatment planning. The provider is gathering information to understand the clinical picture and recommend next steps.

The provider may review

- Current symptoms and when they started
- Mood, anxiety, attention, behavior, sleep, appetite, and energy
- Medical conditions and current medications
- Previous treatment and medication trials
- Family mental health and medical history
- Trauma, substance use, safety, and major stressors
- School, work, relationships, and daily functioning

Possible outcomes

- Discussion of a diagnosis or possible diagnoses
- Medication may be offered, continued, changed, or not recommended
- Therapy or another service may be recommended
- Labs, medical follow-up, or additional testing may be suggested
- The provider may need more information before reaching a diagnosis
- A follow-up appointment may be scheduled

Medication is not automatic

- Seeing a psychiatric provider does not mean you must start medication.
- You can ask what a medication is intended to treat, expected benefits, common side effects, alternatives, and what to do if problems occur.
- Tell the provider about medications that did not help, caused side effects, or were difficult to take.

It is okay not to have every answer. Mental health symptoms can overlap. Sometimes a diagnosis becomes clearer over time as the provider learns more about symptoms, history, and response to treatment.

Good questions to bring

- What do you think may be contributing to these symptoms?
- Are there other conditions or medical issues you are considering?
- What treatment options are available?
- What should we watch for before the next appointment?



Medication Management Appointment

A follow-up focused on how psychiatric medication is working and whether the treatment plan needs adjustment.

Short appointment? Bring notes. Medication visits can move quickly. Write down changes, side effects, missed doses, and your top questions beforehand.

Be ready to talk about

- What has improved since the last visit
- Symptoms that have not improved
- New or worsening symptoms
- Side effects or concerns
- Sleep, appetite, energy, mood, anxiety, and attention
- Changes at home, school, work, or in relationships
- How consistently the medication is being taken

Bring or know

- Medication name and current dose
- When and how you take it
- Other prescriptions and over-the-counter medicines
- Recent medication changes from other providers
- Refills you will need
- Any monitoring information requested by your provider
- Your top two or three questions

The provider may

- Keep the medication and dose the same.
- Increase or decrease a dose or change when it is taken.
- Stop or switch a medication, or add another treatment.
- Order monitoring such as labs or vital signs when appropriate.
- Schedule another follow-up based on symptoms and treatment needs.

Important Do not stop or change a prescribed psychiatric medication on your own unless your prescriber has told you how to do so. If you are having a concerning reaction or are unsure what to do, contact the prescribing office or seek appropriate urgent care.

Say what is really happening

- If you miss doses, say so. That helps the provider interpret whether the medication is working.
- If cost, transportation, pharmacy access, swallowing pills, schedules, or another barrier is making treatment difficult, bring it up.
- If you are worried about a recommendation, ask about the reasoning and alternatives.



Therapy Session

A space to work toward goals, understand patterns, build skills, and get support with emotional or behavioral challenges.

What a session might include

- Talking about what has happened since the last visit
- Identifying thoughts, emotions, patterns, or triggers
- Learning or practicing coping and communication skills
- Problem-solving a current challenge
- Activities, worksheets, play, art, or structured exercises
- Setting goals or deciding what to practice between sessions

Things you are allowed to say

- “I don’t know what to talk about today.”
- “I don’t understand what you mean.”
- “I’m not ready to talk about that.”
- “That strategy isn’t working for me.”
- “Can we try something different?”
- “I don’t think this is a good fit.”

You do not have to perform in therapy. There is no perfect answer. A therapist can help guide the conversation when you are new, nervous, unsure where to start, or simply having a quiet day.

Privacy and confidentiality

- Therapy is generally private, but confidentiality has legal and safety-related limits.
- Providers should explain those limits, including situations in which information may need to be shared to protect someone’s safety or meet legal requirements.
- For children and teens, ask what information stays private, what caregivers will be told, and how caregiver involvement will work.

Finding the right fit matters

- It can take a few sessions to feel comfortable with a therapist.
- You can give feedback about what is or is not helping.
- If the relationship does not feel workable, it is reasonable to ask about another therapist or treatment approach.

A useful goal for the first few sessions You should gradually understand what you are working on, how therapy is supposed to help, and what progress might look like for you.

You Have a Voice in Your Care

What happens next?	Can you explain that differently?	What are my options?	What if things get worse?
Who do I call?	Can I write this down?	Can someone come with me?	Are there other options?