**Pre-Consultation Questionnaire**

**PRIVATE & CONFIDENTIAL**

Welcome to my practice. There follows some questions about you. This is to help me understand your concerns and how I may be able to help you.

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| **Personal Details** | |
| Full name: | Date of Birth: |
| Address:  (I will **not** write to you unless we agree this) | Mobile phone:  Can I phone this number? Yes / No  Leave voicemail? Yes / No  email:  Can I use this to contact you? Yes / No |
| GP  (I will **not** write to your GP unless we agree this) | Have you ever received a mental health diagnosis?  If so, who gave you this diagnosis? When was this? |
| Do you suffer from any allergies, or epilepsy, or asthma, or heart disease? | Do you believe you may have an ‘eating disorder’ or have had ‘psychotic’ experiences (i.e. heard voices, had visions, experienced unusual beliefs)? |
| Are you taking any prescribed drugs?  (Please list) | How much alcohol do you drink per week?  Do you think your drinking is problematic? |
| Is there anyone I can contact, in the event of an emergency?  Name  Who is this?  Mobile:  You do **not** have to provide these details, but it is helpful to have this on record | Have you used any un-prescribed medicines or illicit drugs (e.g. cannabis)?  (Please list)  Past use:  Present use: |

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| **About You** |
| Please say something about your concerns and how you hope I might be able to help. |
| How would you describe your usual personality? Has that changed and, if so, in what way? |
| Have you ever made a suicide attempt, or deliberately hurt yourself? |
| Have you ever seen a counsellor, psychotherapist, psychologist or psychiatrist?  Please give details. Was it helpful? |
| Can you say something about your present circumstances (i.e. work, studies, family life, social life)? |
| What areas of your life give you pleasure or satisfaction? |
| What was it like for you at school?  Did you experience bullying?  How did you get on academically? |
| Could you write something about your parents, or the people who brought you up, your siblings, and your relationship with them? Please mention any significant experiences that distressed you. |
| What do you value about yourself? |
| What are your hopes for the future? |
| Is there anything else you would like me to know about you at this stage? |
| Please add a drawing, image, or any other piece of art (e.g. photo, lyrics, a poem) that you feel may represent something important about you. |