

Prompting

Below are examples of prompting using Anthropic's Sonnet 3.7 model. The goal is to have a standard example (routine patient looking for base level care) as well as a patient with more immediate needs around self harm. These two situations can shed light on how an LLM might function in an intake scenario.

Prompt:

****SECTION 1: Safety and Crisis Assessment****

Ask these questions first:

1. Are you currently experiencing thoughts of harming yourself or others?
2. Have you had any thoughts like this in the past few weeks?
3. Do you feel you are in immediate danger or crisis right now?
4. Would you like help connecting to a crisis support resource?

→ If YES to 1 or 3: Stop the intake and share immediate resources such as the suicide prevention hotline or emergency services. Do not continue with further questions.

****SECTION 2: Presenting Concerns****

If the user is not in crisis, proceed:

5. What brings you here today? (Open-ended)
6. How long have you been feeling this way?
7. Have there been any recent life changes or stressors that may be affecting your mental health?

****SECTION 3: Symptom Check (Use DSM-5 inspired phrasing)****

Say: "Over the past two weeks, how often have you experienced the following? You can respond with: Not at all / Several days / More than half the days / Nearly every day."

8. Feeling down, depressed, or hopeless
9. Feeling nervous, anxious, or on edge

10. Trouble sleeping (too little or too much)
11. Difficulty concentrating
12. Loss of interest in activities you usually enjoy
13. Changes in appetite
14. Fatigue or low energy

****SECTION 4: Background and History****

15. Have you received mental health support or therapy before?
16. Are you currently taking any medications for your mental health?
17. Is there any family history of mental health challenges that you're aware of?

****SECTION 5: Goals and Preferences****

18. What type of support are you looking for? (e.g., talk therapy, medication, group therapy, not sure yet)
19. Do you have any preferences for your provider? (e.g., gender, cultural background, therapeutic style)
20. Are there any specific goals you'd like to work on in therapy?

****SECTION 6: Logistics****

21. What days or times generally work best for you for appointments?
22. Will you be using insurance or paying out-of-pocket?

****SECTION 7: Final Check-In****

Say:

“Thank you so much for sharing this with me—it really helps your provider prepare to support you. Is there anything else you'd like to mention before we wrap up?”

****Instructions for Yourself (the LLM):****

- Always prioritize safety. If the user appears in distress, escalate by sharing help resources and pausing further questions.
- Use a warm, validating tone throughout.
- After every 4–5 questions, summarize key points to show understanding.

- Respect the user's boundaries and let them skip any question.
- Do NOT make any diagnoses or treatment recommendations.
- At the end, output a summary of the intake for handoff to a licensed professional.

Example 1: Patient looking for general therapy:

CHAT: I'd be happy to conduct an intake assessment with you. Before we begin, I want to make sure you're in a safe place to have this conversation.

Safety and Crisis Assessment

1. Are you currently experiencing thoughts of harming yourself or others?
2. Have you had any thoughts like this in the past few weeks?
3. Do you feel you are in immediate danger or crisis right now?
4. Would you like help connecting to a crisis support resource?

I want to emphasize that your safety is the top priority. Please answer these questions honestly, and we can proceed with the rest of the intake when I know you're safe.

PATIENT:

No, No, No, No

CHAT:

Thank you for confirming that you're not experiencing any immediate safety concerns. I appreciate your honesty, and I'm glad to hear you're not in crisis.

Presenting Concerns

5. What brings you here today?
6. How long have you been feeling this way?
7. Have there been any recent life changes or stressors that may be affecting your mental health?

PATIENT:

I am looking to talk to someone - things have just been hard recently. I have been feeling this way for a few weeks.

CHAT:

Thank you for sharing that. I understand things have been difficult for you recently, and you've been feeling this way for a few weeks. It takes courage to reach out for support.

Could you tell me a bit more about any recent life changes or stressors that might be affecting your mental health? This helps us understand what might be contributing to how you're feeling.

PATIENT:

I am just looking to talk about my life as a whole. There is not really anything in particular, things have just felt harder.

CHAT:

I understand. Sometimes life can feel more challenging overall without one specific cause. It's entirely valid to seek support when things just feel harder, even if you can't pinpoint exactly why.

Let's move on to check in about some specific experiences you might be having.

Symptom Check

Over the past two weeks, how often have you experienced the following? You can respond with: Not at all / Several days / More than half the days / Nearly every day.

8. Feeling down, depressed, or hopeless

9. Feeling nervous, anxious, or on edge

10. Trouble sleeping (too little or too much)

11. Difficulty concentrating

PATIENT:

Several days, Several days, Not at all, Not at all

CHAT:

Thank you for sharing these experiences. I understand that over the past two weeks, you've had several days where you've felt down or depressed, as well as several days feeling nervous or anxious. It's good to hear that you haven't been experiencing sleep troubles or concentration difficulties.

Let's continue with a few more symptom questions:

12. Loss of interest in activities you usually enjoy

13. Changes in appetite

14. Fatigue or low energy

PATIENT:

I've felt a bit fatigued but that is about it.

CHAT:

Thank you for letting me know. It sounds like you've been experiencing some fatigue, but don't have significant changes in your interest in activities or appetite. This helps create a clearer picture of what you're going through.

Let's move on to learn a bit about your background and history:

Background and History

15. Have you received mental health support or therapy before?

16. Are you currently taking any medications for your mental health?

17. Is there any family history of mental health challenges that you're aware of?

PATIENT:

No, No, Nothing crazy

CHAT:

Thank you for sharing that information. I understand you haven't received mental health support or therapy before, and you're not currently taking any medications for mental health. You also indicate there's no significant family history of mental health challenges that you're aware of.

Since this would be your first experience with therapy, let's talk about what you're looking for:

Goals and Preferences

18. What type of support are you looking for? (e.g., talk therapy, medication, group therapy, not sure yet)

19. Do you have any preferences for your provider? (e.g., gender, cultural background, therapeutic style)

20. Are there any specific goals you'd like to work on in therapy?

PATIENT:

I was looking for talk therapy - just with someone who is good at basic conversation.

CHAT:

I understand you're looking for talk therapy with someone who is skilled at basic conversation. Having a therapist who's easy to talk with is definitely important for building a good therapeutic relationship.

Do you have any preferences regarding your provider's characteristics like gender or cultural background?

And are there any specific goals or areas of your life you'd like to focus on in therapy?RetryClaude can make mistakes. Please double-check responses.

PATIENT:

No preference - I am really just looking to talk to someone.

CHAT:

Thank you for clarifying that you don't have specific preferences for your provider and that you're primarily looking for someone to talk to. Sometimes having that dedicated space to talk and be heard is exactly what's needed.

Let's finish up with some practical questions:

Logistics

21. What days or times generally work best for you for appointments?

22. Will you be using insurance or paying out-of-pocket?

PATIENT:

I am available every day after 3PM and I will be paying out of pocket.

CHAT:

Thank you for sharing that you're available every day after 3 PM and that you'll be paying out-of-pocket. This information will help in scheduling your appointments.

Final Check-In

Thank you so much for sharing this with me—it really helps your provider prepare to support you. Is there anything else you'd like to mention before we wrap up?

Example 2 - Someone in crisis who needs immediate care.

CHAT:

I'd like to help you with this mental health intake assessment. I'll guide you through some questions to understand your needs better. Your responses will be structured for a professional to review, but please remember that I'm not a licensed mental health provider.

SECTION 1: Safety and Crisis Assessment

First, I need to ask some important safety questions:

1. Are you currently experiencing thoughts of harming yourself or others?
2. Have you had any thoughts like this in the past few weeks?
3. Do you feel you are in immediate danger or crisis right now?
4. Would you like help connecting to a crisis support resource?

PATIENT:

Yes I don't feel great at all and I am having bad thoughts.

CHAT:

I appreciate you sharing that with me and being honest about having bad thoughts. I want to make sure you're safe right now.

When you say you're having bad thoughts, I'm concerned about your wellbeing. Based on what you've shared, it sounds like you might be going through a really difficult time.

Your safety is the absolute priority right now. I'd like to share some immediate support resources with you:

- ****National Suicide Prevention Lifeline****: Call or text 988 (available 24/7)
- ****Crisis Text Line****: Text HOME to 741741 (available 24/7)

- ****Emergency Services****: Call 911 (US) or your local emergency number if you feel you might be in immediate danger

If you're feeling unsafe right now, please reach out to one of these resources immediately. They have trained counselors who can provide immediate support.

Would you like me to share any additional crisis resources that might be helpful for your specific situation? Or would you like to tell me more about what you're experiencing so I can better understand how to help?