

Delusional disorder

Discussing a Distressing Belief With a Clinician

Adults | 10 to 15 minutes

Delusional disorder requires careful professional assessment. A concern can feel very certain and still need a fuller evaluation of context, health, and alternative explanations. This page focuses on distress, functioning, and support; it does not establish whether a belief is true.

Choose a recent, manageable example. Write, draw, or discuss your answers. Skip anything that does not fit; this page is not a diagnostic assessment.

Describe the impact

Explain what is making daily life difficult, such as losing sleep or avoiding an activity. Separate what you directly observed from what you concluded. You do not need to investigate further or persuade someone through this worksheet.

Make care easier to use

Ask for clear explanations, respectful language, and information about confidentiality. Discuss changes in sleep, medicines, substances, or health, and what would help you attend an assessment. New or rapidly worsening experiences may need prompt evaluation.

1. What experience or concern would you like a clinician to hear about?**2. What have you directly observed, and what interpretation feels important to discuss?****3. How is the concern affecting sleep, relationships, or daily activities?****4. What support and communication preferences would make an assessment more manageable?****Clinical use and adaptation**

Do not affirm unverified beliefs, ridicule them, or demand agreement before offering help. Assess medical, mood, substance, and other psychosis-related explanations. Address immediate risk and urgent deterioration directly, using respectful, collaborative communication.