

Bilderbeck et al. Psychiatric assessment of mood instability: qualitative study of patient experience. *Br J Psychiatry* – doi: 10.1192/bjp.bp.113.128348

Online supplement DS1

Interview Schedule: stem questions and broad subquestions asked during patient interviews

- Can you tell me about your experience of psychiatric assessment(s)?
 - Did you have any expectations? Were they met?
 - Did you feel that all of the relevant points were covered, or were there things that were missed out?
 - What factors do you think the clinician thought were important in your diagnosis?
- How has it felt to be 'diagnosed'? (where appropriate)
 - Did you feel that you received enough information about the (possible) diagnosis / treatment(s), or not?
- What things did you think were done well?
- What would you change about the process?

Online Supplement DS2

Supplementary quotations to key themes

Wanting an explanation, and help

"I felt that that maybe we were coming to a conclusion... [I] thought we might get somewhere." [P02-F-BD]

"Hopefully like then it [a diagnosis] will help them give me the right treatment quicker...and that's what I want. It's the right treatment." [P14-F-DA]

"I was right, ok, well if I'm not bipolar what's wrong with me." [P28-F-BD]

"I don't necessarily want to be bipolar, I just want to know what's wrong with me." [P13-F-DA]

"I suppose it [a diagnosis of BD] was part of a jigsaw piece that was missing cuz I always felt that there was something wrong" [P25-F-BD]

"I would feel ironically less crazy [to have a diagnosis of BD] because it would make sense then, um, and I would have something clear that people could understand." [P13-F-DA]

Wanting consistent and continuous care

"She's known me all my life...I felt like I could trust her. So yeah, she knows my past..." [P19-F-DA]

"Because it was our first appointment, so you don't know who somebody is, and I felt a little intimidated." [P06-F-BD]

"I was a bit nervous and when I started talking to her - I wasn't quite sure to tell her everything how I feel because I didn't really know her." [P08-F-DA]

"I think I should have access to or be referred to or invited to by somebody that I can call regularly if I need to or have regular appointments because at the moment if I get ill they just say oh see your GP" [P07-F-BD-BPD]

Struggling to communicate and be understood

"There's so much going on in my head, you know, so asking people uh what happened months and months ago, well when was the last time you can remember this...the amount of times I been asked something and I think oh I don't know the answer to that, or I can't think of that, and later on in the day it comes back and I think oh Christ, why couldn't I think of that then?" [P26-M-OD]

"It's pretty shit really to expect you know to be able to come to a proper diagnosis and a proper anything, within that short space of time." [P25-F-BD]

"How do I clearly express 38 years of life and all the many nuances about my health, in an hour or an hour and a half, all in one go?" [P13-F-DA]

"He asked about like my family and past experience but not about how I was feeling. I very much felt

like he was trying to find some sort of early trauma.” [P05-F-BD]

“That [traumatic experiences] wasn't covered in a lot of detail, which part of me feels quite happy about, because I don't really like discussing it very much” [P16-F-DA]

Wanting to feel involved and informed

“Like oh yeah the Complex Needs service...He said like, explained why that might be useful to me as well, as opposed to just saying “there’s a bunch of leaflets – bye”, like, “I’ve done my bit now” but explaining why I might find that useful and how it works as well beforehand.” [P03-F-BPD]

“Now I know it’s [a diagnosis of BPD] a common thing and it’s just like a result of like usually someone having a horrible background ... that’s pretty reassuring.” [P03-F-BPD]

“Nobody has ever said this could cause this, these are the side effects, these are the risks....and I think it’s really important” [P06-F-BD]

“It would have been helpful to come away with some information...it was only when I was actually in the waiting room that I picked up some leaflets...the last thing I need to be doing is searching round on Google to see what all the worse-case scenarios are...” [P02-F-BD]

“I should have asked more questions, but I was a bit sort of um taken aback really...I have no idea if this is going to be long term, I don't know how long I'm going to have to be on the medication, I don't know if I'm ever going to be able to, to take up employment, um, all these things came through my mind.” [P28-F-BD]

Wanting to be acknowledged, but often feeling dismissed and discredited

“He seemed eager to understand mostly to, to solve to assess the problem and find some solutions.” [P05-F-BD]

“When I left [the assessment] like the first thing I said to [participant’s partner] was “I’m so glad that he didn’t just fob me off with tablets and tell me to go away” sort of thing like that was really good. I was really pleased.” [P03-F-BPD]

“They've made a diagnosis, they're going to change my medication, said they don't need to see me again...Is that it?” [P25-F-BD]

“I wasn’t taken seriously, I just felt like it was just another doctor to sit there and fall apart in front of” [P07-F-BD-BPD]

“I think probably because of the way I present most of the time they probably actually didn’t realise how bad I was... if you’re articulate and educated then you can’t be ill.” [P13-F-DA]

“He said well...I can see that you're um OK ... I think he got the impression that you know I'm more than halfway cured of my depression.” [P12-M-ND]

“I mean he uh he can only sort of go by how he sees me today...he didn't see me how I was the other night, so it's hard for him to make a judgement. I mean I suppose he can go really go by what I'm saying now...” [P17-M-BPD]