

Psychology Analysis Intake Template

AXIOM Analysis

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Working template for structured psychology runs in the AXIOM portal.

Purpose

Use this template to prepare a psychology analysis run in AXIOM.

It is designed for:

- case-study review
- deep behavioral pattern analysis
- candidate / hiring assessment
- treatment-pathway constraint mapping
- rapid first-pass psychological scan

This is a structured analysis intake, not diagnosis, treatment, or a substitute for licensed clinical judgment.

Best AXIOM Settings

Full Case Review

- Domain: Psychology
- Modules: case, deep
- Report Depth: Standard
- Reasoning Engine: AXIOM Gateway or Auto
- Live sources: off

Use this when you have actual case material and want the strongest full structured psychology report.

Candidate / Hiring Review

- Domain: Psychology
- Modules: hiring
- Report Depth: Standard first, Deep second if needed
- Reasoning Engine: Gemini or Auto
- Live sources: on for public candidate context, off for internal-only review

Use this only when you include:

- candidate material
- role requirements
- company context

Therapeutic Pathway Review

- Domain: Psychology
- Modules: therapeutic
- Report Depth: Standard
- Reasoning Engine: AXIOM Gateway or Auto
- Live sources: off

Use this when the main question is treatment barriers, modality constraints, alliance factors, or escalation / referral conditions.

Quick Triage Only

- Domain: Psychology
- Modules: fast
- Report Depth: Compact or Standard
- Reasoning Engine: AXIOM Gateway
- Live sources: off

Use this only for a rapid first-pass scan, not for your best final report.

Important Input Note

For the cleanest current behavior:

- use .txt or .md files when possible
- upload the actual case or assessment material
- keep the request prompt short
- do not select every psychology mode at once

Best current upload shape:

- 01_request.md
- 02_case_material.md
- 03_collateral_and_history.md
- 04_risk_and_functioning.md
- 05_role_company_or_treatment_context.md

You do not need all five files for every run.

For first tests, do one of these:

1. Paste the full material directly into the request box and upload nothing.
2. Upload the material files and use the short prompt file only.

Do not duplicate the entire same case in both places unless you have a reason to.

Data Collection Checklist

Collect as much of the following as possible before running the analysis.

1. Run Basics

- Matter / case name:
- Run type:
 - case review
 - deep pattern analysis
 - hiring assessment
 - therapeutic pathway review
 - quick scan
- Reviewer:
- Date prepared:
- Main decision or question:

2. Subject Basics

- Name or anonymized ID:
- Age:
- Gender:
- Occupation / role:
- Relationship status:
- Living situation:
- Referral source or reason for attention:

3. Presenting Problem

- What brought the subject to attention:
- Subject's own description of the problem:
- When the problem began:
- What made it worse recently:
- Functional impact:
- What outcome the subject wants:

4. Timeline

Collect key events in order:

- onset
- turning points
- losses or gains
- role changes
- relationship changes
- symptom escalation or de-escalation
- prior interventions

5. Source Map

Separate the source types clearly:

- self-report
- direct observation
- collateral report
- documented record

This is one of the most important quality steps. Do not mix them together.

6. Behavioral Observations

Collect what was actually observed:

- appearance / presentation
- speech / pacing
- affect / emotional display
- shutdown, escalation, avoidance, or agitation markers
- relational behavior in conflict
- session behavior
- inconsistencies between words and behavior

7. Cognitive And Emotional Patterns

Collect evidence of:

- thinking style
- rumination
- rigidity or flexibility
- intellectualization
- avoidance
- control strategies
- panic or overwhelm patterns
- trigger-response-recovery patterns

8. Relational Context

Collect:

- attachment indicators
- closeness vs distance patterns
- conflict cycle
- authority reactions
- dependency fears
- partner, family, or work relationship patterns

9. Risk Factors

Collect all risk-relevant information:

- self-harm or suicidal content
- aggression or violence indicators
- severe dysregulation
- substance use
- acute stressors
- prior crises
- trauma history if known

10. Protective Factors

Collect:

- insight
- treatment engagement

- social supports
- stable housing
- work functioning
- resilience indicators
- coping resources

11. Current Functioning

Collect:

- sleep
- appetite
- work performance
- social functioning
- relationship functioning
- ability to regulate
- medical contributors if known

12. History

Collect:

- developmental history
- family system dynamics
- prior treatment
- medication history
- medical history
- prior diagnoses if documented
- legal or occupational stress context

13. Therapeutic Review Add-On

If the run is therapeutic, also collect:

- prior modalities tried
- what worked
- what failed
- treatment barriers
- alliance issues
- compliance / adherence issues
- escalation history

14. Hiring Review Add-On

If the run is hiring, also collect:

- candidate material
- role description
- success profile
- company context
- reference notes
- work samples
- public reputation or governance context if relevant

15. Missing Inputs

List what is not yet known:

- trauma history
- medical contributors
- prior therapy outcomes
- medication effects
- collateral gaps
- missing timeline details
- no role/company context
- no treatment history

16. Output Goal

What should the AXIOM report help you do?

- organize the case
- surface contradictions
- identify strongest patterns
- see treatment constraints

- assess candidate fit
 - see what is missing before a real decision
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Suggested File Pack

File 1: 01_request.md

Use this for the decision context:

Case / matter name:
Run type:
Decision to support:

Top questions:
1.
2.
3.

Known constraints:

Known uncertainties:

File 2: 02_case_material.md

Use this for the core material:

Subject basics:

Presenting problems:

Timeline:

Observed behavior:

Self-report:

File 3: 03_collateral_and_history.md

Use this for partner/family/record material:

Collateral:

Family / developmental context:

History:

Prior treatment:

File 4: 04_risk_and_functioning.md

Use this for risk and present-day functioning:

Risk factors:

Protective factors:

Current functioning:

Unknowns:

File 5: 05_role_company_or_treatment_context.md

Use this only when relevant:

If hiring:
- role requirements
- company context
- decision criteria

If therapeutic:
- modality history
- treatment barriers
- alliance issues
- escalation questions

Fill-In Intake Block

Copy this block into a working .md file and complete it.

Case / matter name:

Run type:

Prepared by:

Prepared on:

Decision to support:

Primary review questions:

- 1.
- 2.
- 3.

Subject ID or name:

Age:

Gender:

Occupation / role:

Relationship status:

Living situation:

Referral source:

Presenting problem:

Subject's own description:

Onset:

Recent worsening factors:

Functional impact:

Desired outcome:

Timeline highlights:

Observed behavior:

Self-report:

Collateral:

Family / developmental context:

Current functioning:

Risk factors:

Protective factors:

History:

Prior treatment / medication:

Therapeutic review notes:

Hiring review notes:

- candidate material included:
- role requirements included:
- company context included:

Known contradictions:

Known weak spots:

Missing information:

What a useful AXIOM output should focus on:

Recommended Prompt Pairing

Use this template together with:

- [PSYCHOLOGY_ANALYSIS_PROMPT_2026-04-12.txt](#)

Best pattern:

1. fill out this intake
 2. upload this intake plus the actual psychology material
 3. use the short prompt file in the portal request box
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Practical Notes For Better Results

- Start with Standard depth, not Deep
- For a real full case report, use case + deep

- For hiring, do not forget role and company context
 - For therapeutic review, include prior treatment history and barriers
 - For fictional case work, keep live sources off
 - If the result is weak, improve the case material before making the prompt longer
 - If the output repeats your prompt or returns only [NO DATA], the system probably did not receive the actual case material
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Caution

AXIOM can help surface:

- patterns
- discrepancies
- risk and protective factors
- attachment and relational indicators
- treatment constraints
- information gaps

It should not be treated as a diagnosis, a treatment prescription, or a final employment decision.

End of Psychology Analysis Intake Template v1.0