

# 1 Select Appointment Slot



Dr. Marisa Mendel MD

Child and Adolescent Psychiatry

Marisa Mendel, MD, PLLC

1040 Great Plain Ave

Ste. 3A

Needham, MA 02492-2500

781-472-1477

MarisaMendelMD@gmail.com

## Select a Service

> 10 minute initial consultation

> Follow-up Visit (25 min)



To request to schedule as a new patient:

1) Click on 10 minute initial consultation.

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Service :

10 minute initial consultation [Change](#)

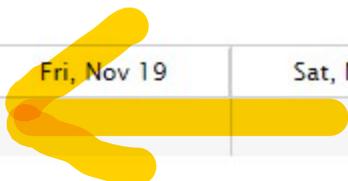
Slots are shown in US/Eastern time zone

Go To

< Nov 14 — Nov 20 2021 >

Sun, Nov 14	Mon, Nov 15	Tue, Nov 16	Wed, Nov 17	Thu, Nov 18	Fri, Nov 19	Sat, Nov 20
				09:00 AM		

2) click on an available time slot which you could be free for your 10 minute phone call (if patient under 18yo, only parent needs to be present for phone call).





Needham, MA 02492-2500  
781-472-1477  
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Service : 10 minute initial consultation

Date : Thursday, Nov 18, 2021 09:00 AM(US/Eastern)

Are you an existing patient  Yes  No



First Name \*

Last Name \*

Date of Birth \*

Gender \*  Male  Female  Other

Email \*

Phone \*

Next

**3) Check off "No" for existing patient and fill in the following demographic information.**

**Name and Date of Birth should be that of the patient, but if the patient is under 18yo, the email and phone number should be that of the parent/legal guardian submitting this information.**

Service : 10 minute initial consultation

Date : Thursday, Nov 18, 2021 09:00 AM(US/Eastern)

Are you an existing patient  Yes  No

First Name \*

Last Name \*

Date of Birth \*

Gender \*  Male  Female  Other

Email \*

Phone \*

Please enter 10 digit phone number

**4) Once you have filled in this information, please hit "Next".**



Next

Gender female

Phone 6078675309

Email maleficentfakepatient@gmail.com

Reason for Appointment \*

my therapist recommended I see a psychiatrist for a more thorough medication evaluation and management.

5) Please fill in all remaining questions truthfully and honestly in the pop-up questionnaire.

**UPDATE: In order to be placed on the wait list, you must be in regular therapy (that is, seeing your therapist AT LEAST once every 2 weeks) as Dr. Mendel is not offering regular therapy at this time and evidenced based treatment is therapy first, +/- adjunct medications**

Thank you for your interest in Marisa Mendel MD, PLLC. The following questionnaire will be submitted through Dr. Mendel's HIPAA compliant, secure portal. Requests for an intake appointment do not guarantee an appointment. Once you have completed the following intake request, you may be offered a 10 minute complementary phone consultation to further ensure that your needs and goals match those of this practice. Getting this 10 minute phone consultation does not signify the start of a doctor-patient relationship. However, following the phone consultation, if Dr. Mendel has availability and feels her practice may be an appropriate fit for your needs, you will be offered a 75 minute new patient evaluation at that time.

Potential Patient Name, Date of Birth (of potential patient) \*

Child's name and D.O.B. if under 18yo

Name of Person Completing Form, Relationship to potential

Name of person completing form



Thank you for your time completing these questions. We will be in touch shortly to either confirm your 10 minute phone consultation if Dr. Mendel possibly has availability to schedule you for an evaluation within the next 2 months. (If so, you will be scheduled during the 10 minute consultation). Otherwise, your phone call request may be cancelled but you will be placed on a waitlist and contacted if an opening occurs.

Image Text \*

zialgw

zialgw

Confirm

6) When all questions have been completed, hit "confirm" to submit.

**Dr. Mendel will call the phone number you provided at the time scheduled for your 10 minute phone call. Only a parent/legal guardian needs to be present for this phone call if patient under 18 years old.**

If after this 10 minute consultation, it seems appropriate to move forward with an evaluation, that can be scheduled during this phone call.