

# ADHD – Attention-Deficit/Hyperactivity Disorder

## ADHD-C      COMPLICATIONS

**OUTCOME:** The patient/family will understand the common and important complications of ADHD.

### **STANDARDS:**

1. Discuss that ADHD is part of a spectrum of, and may co-exist with other psychiatric diagnoses, including Oppositional Defiant Disorder and Conduct Disorder.
2. Discuss that dysfunctional family dynamics often exists in the homes of persons with ADHD, and that usual disciplinary measures are often not effective with children with ADHD.
3. Discuss that growth delay is often a problem with treated and untreated ADHD and may require intervention by a registered dietitian. **Refer to ADHD-N.**
4. Discuss that persons with ADHD are at increased risk of injuries.
5. Discuss that persons with ADHD often have problems with learning and behavior at school and other organized activities.

## ADHD-CM      CASE MANAGEMENT

**OUTCOME:** The patient/family/caregiver will understand the importance of integrated case management in achieving optimal physical and behavioral health.

### **STANDARDS:**

1. Discuss roles and responsibilities of each member of the care team including the patient, family/caregiver, school personnel/teachers, and providers in the case management plan.
2. Explain the coordination and integration of resources and services in developing and implementing the case management plan.
3. Explain the need to obtain the appropriate releases of information necessary to support integrated case management and to maintain patient privacy and confidentiality. **Refer to AF-CON.**

## ADHD-DP      DISEASE PROCESS

**OUTCOME:** The patient/family will understand the nature and course of ADHD.

## STANDARDS:

1. Discuss the pattern of symptoms present in ADHD, some of which must have been present before the age of 7, but may be diagnosed in adulthood:
  - a. Inattention
    - i. Makes careless mistakes or fails to pay close attention.
    - ii. Has difficulty sustaining attention.
    - iii. Appears not to listen.
    - iv. Does not follow through on instruction, or fails to complete tasks.
    - v. Often loses things.
    - vi. Is forgetful.
  - b. Hyperactivity
    - i. Fidgets with hands and feet, or squirms in seat.
    - ii. Leaves seat when remaining in seat is expected.
    - iii. Often runs about or climbs excessively when its inappropriate. Restlessness in adults and adolescents.
    - iv. Has difficulty playing or engaging in leisure activities quietly.
    - v. Talks excessively.
  - c. Impulsivity
    - i. Blurts out answers before questions have been completed.
    - ii. Has difficulty awaiting turn.
    - iii. Often interrupts or intrudes on others.
  - d. Associated Features
    - i. Has low frustration tolerance, temper outbursts, bossiness, stubbornness, mood lability, demoralization, dysphoria, rejection by peers and teachers, and poor self-esteem.
2. Discuss that the persistent pattern of inattention and/or hyperactivity / impulsivity is due to a central nervous dysfunction, and must be present in more than one area of functioning (e.g., home, school, and work).
3. Explain that ADHD is categorized into three subtypes: Predominantly Inattentive Type, Predominantly Hyperactive- Impulsive Type, and Combined Type.
4. Discuss the current theories of the causes of ADHD:
  - a. Neurological: Central Nervous System Dysfunction
  - b. Environmental toxins: lead, prenatal exposure to cigarette smoke and alcohol
  - c. Genetics

- d. Environmental Factors: Parenting and social variables
5. Discuss the problems associated with ADHD: impaired academic achievement, learning disabilities, health problems, social problems, family conflicts, oppositional behavior, and sleep problems.
6. Discuss the prognosis for ADHD; most people with ADHD learn to compensate for their deficiencies and no longer need medication into adulthood.

#### **ADHD-FU FOLLOW-UP**

**OUTCOME:** The patient/family will understand the importance of follow-up and make a plan to keep follow-up appointments.

**STANDARDS:**

1. Discuss the importance of follow-up care.
2. Discuss the procedure for obtaining follow-up appointments.
3. Emphasize that appointments should be kept. Discuss prescription medications and how follow-up relates to the ability of the patient to get refills of medications.

#### **ADHD-GD GROWTH AND DEVELOPMENT**

**OUTCOME:** The patient/family will understand that the growth of children with ADHD needs to be monitored closely.

**STANDARDS:**

1. Refer to ADHD-N.

#### **ADHD-IR INFORMATION AND REFERRAL**

**OUTCOME:** The patient/family will receive information and referral for alternative or additional services as needed or desired.

**STANDARDS:**

1. Provide the patient/family with alternative or additional sources for care and services, including behavioral health services.
2. Provide the patient/family with assistance in securing alternative or additional resources as needed.

#### **ADHD-L LITERATURE**

**OUTCOME:** The patient/family will receive literature about ADHD.

**STANDARDS:**

1. Provide the patient/family with literature on ADHD.

2. Discuss the content of the literature.

## **ADHD-LA LIFESTYLE ADAPTATIONS**

**OUTCOME:** The patient/family will have an increased understanding of the factors that contribute to better outcomes for ADHD children and adults.

### **STANDARDS:**

1. Explain that the treatment of ADHD requires family involvement in an ongoing fashion.
2. Discuss that effective therapy often requires restructuring home, community, and school environments.
3. Explain that use of multiple, consistent, persistent interventions in all areas of functioning (including school and home) are necessary for a good outcome.
4. Discuss the need to advocate for, not against, the child.
5. Discuss the importance of positive reinforcement for good behaviors and support of self esteem.
6. Discuss the effects of parental stress and marital problems on children. Further discuss that ADHD may exacerbate parental stress and marital problems. Explain that these problems should not be ignored and that appropriate help should be sought as soon as the problem is identified.

## **ADHD-M MEDICATIONS**

**OUTCOME:** The patient/family will understand the importance of fully participating with a prescribed medication regimen, if applicable.

### **STANDARDS:**

1. Describe the name, strength, purpose, dosing directions, and storage of the medication.
2. Discuss the risks, benefits, and common or important side effects of the medication and follow up as appropriate.
3. Discuss any significant drug/drug, drug/food, and alcohol interactions, as appropriate.
4. Discuss the importance of full participation with the medication plan and that this is the patient's responsibility. Discuss any barriers to full participation.
5. Discuss the importance of keeping a list of all current prescriptions and over-the-counter medicines, vitamins, herbs, traditional remedies, and supplements. Encourage the patient to bring this list and pill bottles to appointments for medication reconciliation.

## **ADHD-MNT    MEDICAL NUTRITION THERAPY**

**OUTCOME:** The patient/family will understand the specific nutritional intervention(s) needed for the treatment or management of this condition, illness, or injury.

### **STANDARDS:**

1. Explain that Medical Nutrition Therapy (MNT) is a systematic nutrition care process provided by a Registered Dietitian (RD) that consists of the following:
  - a. Assessment of the nutrition related condition.
  - b. Identification of the patient's nutritional problem.
  - c. Identification of a specific nutrition intervention therapy plan.
  - d. Evaluation of the patient's nutritional care outcomes.
  - e. Reassessment as needed.
2. Review the basic nutrition recommendations for the treatment plan.
3. Discuss the benefits of nutrition and exercise to health and well-being.
4. Assist the patient/family in developing an appropriate nutrition care plan.
5. Refer to other providers or community resources as needed.

## **ADHD-N    NUTRITION**

**OUTCOME:** The patient/family will understand nutritional requirements for the child with ADHD and will plan for adequate nutritional support.

### **STANDARDS:**

1. Explain that the hyperactive child will often burn more calories than age-matched peers and will require additional caloric intake for adequate growth.
2. Discuss that many medications used for ADHD suppress appetite. Timing of medication may need to be adjusted to optimize hunger at mealtimes.
3. Explain that children with ADHD are distractible and may need to be reminded to eat.
4. Discuss that academic performance and behavioral compliance may improve with opportunities for calorie intake in mid-morning and mid-afternoon.

## **ADHD-PSY    PSYCHOTHERAPY**

**OUTCOME:** The patient/family will understand the goals and process of psychotherapy in the treatment of ADHD.

### **STANDARDS:**

1. Review the reason for the initial referral for therapy as part of the care plan.

2. Emphasize that full participation, and follow-up is critical to treatment success. Emphasize parental responsibility for children's attendance.
3. Emphasize the importance of openness and honesty with the therapist.
4. Discuss issues of safety, confidentiality, and responsibility.
5. Explain that the therapist and the patient/ parents will establish goals and duration of therapy together.

#### **ADHD-TE TESTS**

**OUTCOME:** The patient/family will understand the test(s) to be performed to diagnose ADHD.

#### **STANDARDS:**

1. Discuss the test(s) to be performed to diagnose ADHD. Answer the patient/family questions regarding the testing process.
2. Refer to Behavioral Health or other community resources as appropriate.

#### **ADHD-TX TREATMENT**

**OUTCOME:** The patient/family will understand that the four components of treatment of ADHD symptoms are based on biologically-based handicaps.

#### **STANDARDS:**

1. Discuss that the therapy for ADHD is multi-factorial and may consist of:
  - a. Parent Education
  - b. Behavior Management and Behavior Therapy (consistent in the school and home)
  - c. Educational Management
  - d. Play therapy/psychotherapy
  - e. Medication Therapy