

ADHD in Children and Adolescents

Resources for Patients

Centers for Disease Control and Prevention

[Is It ADHD? – Symptom Checklist](#) - Print symptoms checklist to complete later

[Is It ADHD? – Symptom Checklist](#) - Print symptoms checklist to complete later (Spanish version)

[Learn the Signs, Act Early](#) - Print form in English and Spanish

[Learning Disabilities Association of America \(LDA\)](#)

Provides professionals, parents and teachers with information on learning disabilities, practical solutions, and a network of resources.

[National Center for Learning Disability](#)

Connects parents with essential resources, provides educators with evidence-based tools and engages advocates in public policy initiatives to improve the lives of children and adults with learning disabilities.

[ParentsMedGuide.org](#)

ADHD medication guide for parents. Resources developed by the American Psychiatric Association and the American Academy of Child and Adolescent Psychiatry.

[Vanderbilt Diagnostic Teacher Rating Scale](#)

A rating scale with two components: symptom assessment and impairment of performance in school, to screen for symptoms of ADHD.

Measures Commonly Used by National Organizations (for purpose for maintenance treatment)

- ADHD Initiation Phase: percentage of members 6 to 12 years of age with an ambulatory prescription dispensed for ADHD medication who had one follow-up visit with a practitioner with prescribing authority during the 30-day initiation phase. (HEDIS, MU2)
- ADHD Continuation and Maintenance Phase: percentage of members 6 to 12 years of age with an ambulatory prescription dispensed for ADHD medication who remained on the medication for at least 210 days and who, in addition to the visit in the initiation phase, had at least two follow-up visits with a practitioner within 270 days (9 months) after the initiation phase ended. (HEDIS, MU2)

High Risk Populations/Disparities

- All practitioners need to be aware that there are racial and ethnic disparities in the diagnosis and treatment of ADHD, even though prevalence likely does not differ (e.g. Children from racial and ethnic minorities may be less likely to be diagnosed and treated for ADHD).
- In a national survey, reported rates of identified ADHD and the use of any prescription medication were lower in Hispanic and African-American children, compared to white children. In another study, prevalence did not differ in different groups, but medication use was lower in non-Whites. “Attitudes and perceptions about mental health care, language barriers, parental knowledge about ADHD, and access to and cost of treatment are among the cultural disparities that result in a considerable level of unmet need.” ¹

1. Oatis, Melvin, MD, Cultural Disparities in the Diagnosis and Treatment of Childhood ADHD. ADHA Update. American Professional Society of ADHD and Related Disorders. Feb. 2010.