



Patient-Specific Protocol **Template for the Management of ADHD**

A patient-specific protocol is to be included as part of your standardized procedures that govern your practice if you chose to furnish CS II or III medications. Your existing standardized procedures/furnishing protocol must be updated to include schedule II and III requirements. This is a sample patient-specific protocol that may be tailored to your existing documents. Items ***bold and italicized*** must be included in your protocol by law, regardless of the format utilized (process or disease-oriented).

Definition:

This protocol covers the management of controlled substances schedule II medications for patients with ADHD/ADD in/at _____ practice/clinic/institution. ADHD is a neurobiological disorder characterized by developmentally inappropriate behavior including poor attention skills, impulsivity, and hyperactivity.

Subjective Data (SAMPLE):

- The following history is suggested
- Onset and duration of symptoms
- History of poor attention skills, impulsivity, hyperactivity (type and severity): DSM IV Criteria for ADHD
- ***Previous treatment or therapy; response to therapy***
- Complete medical history, allergies, medications
- Developmental history and school performance; Learning disability (Children)
- Environmental factors
- Comorbid psychological conditions
- Dietary factors, nutrient deficiencies, and heavy metal exposure
- Impairment in social, academic, or occupational functioning (Adolescents/Adults)
- Red flags that may indicate possible drug misuse/abuse:
- ***Potential Contraindications to therapy:***

Objective Data (SAMPLE):

- ***Identify physical findings that support use of CS II medications***
- Results of psychological testing
- Appropriate assessment of involved system(s)
- Results of vision and hearing screening
- Screening for comorbid medical and psychological/psychiatric conditions

Diagnostic Plan:

- ADHD is a clinical diagnosis. Diagnostic testing should be guided by the findings of the physical exam

Treatment Plan: (SAMPLE)

- ***Supportive/Adjunctive Therapy***
- ***Behavioral Therapy***
- ***Pharmacotherapy***



- ✓ *List general guidelines and recommended CS II therapy for ADHD/ADD for those medications included in the furnishing formulary.*
- ✓ *Include all potential scheduled II and III medications, including dose, frequency, route of administration, quantity and refills authorized (NOTE: Refills may not be authorized for CS II medications on any prescription blank).*
- ✓ *Prescription blank may be triplicate (through December 31, 2004) or Secure, anti-fraud as issued by the DEA.*

Suggested Patient Education:

- *Provide the patient and/or family with appropriate education related to the use of schedule II medications, including potential side effects and adverse reactions.*

Follow-up:

- *Document the necessity for follow-up including time period.*

Physician Consultation/Referral:

- *Identify the circumstances when physician referral is necessary.*