# **Attention Deficit and Hyperactivity Disorder**

Hilliard Pediatrics, Inc. - Dr. Tim Teller, MD

### Introduction

Below are the diagnostic criteria that are used in helping diagnose children with ADD/ADHD. Although they are the only information needed to "make the diagnosis", they can be helpful to review if you believe your child's struggles are due to ADD/ADHD. Please see our other protocols about Attention Deficit Disorder and call the office during regular business hours if you have further questions. For children 6 years old and above who you have a concern for ADHD, we suggest downloading from our website (under Forms tab) the Vanderbilt forms for Parents (both parents, if possible, should each fill one out) and for Teachers (as many teachers as the child has should fill out the form), collecting the forms, and call our office to set-up an appointment to further discuss.

#### Inattention

- 1. Often does not give close attention to details or makes careless mistakes in schoolwork, work, or other activities.
- 2. Often has difficulty sustaining attention in tasks or play activities.
- 3. Often does not seem to listen when spoken to directly.
- 4. Often does not follow through on instruction and fails to finish schoolwork, chores, or duties (not due to oppositional disorder or failure to understand instructions).
- 5. Often has difficulty organizing tasks and activities.
- 6. Often avoids, dislikes, or is reluctant to engage in tasks that require sustained mental effort (such as school work or homework).
- 7. Often loses things necessary for tasks or activities, such as toys, assignments, books, or tools.
- 8. Is often easily distracted by extraneous stimuli.
- 9. Is often forgetful in daily activities.

Total number of inattention items circled.

### Hyperactivity (1-6) & Impulsivity (7-9)

- 1. Often fidgets with hands or feet or squirms in seat.
- 2. Often leaves seat in classroom or in other situations in which remaining seated is expected.
- 3. Often runs about or climbs excessively in situations in which it is inappropriate (adolescents or adults may have feelings of restlessness).
- 4. Often has difficulty playing or engaging in leisure activities quietly.
- 5. Is often "on the go" or often acts as if "driven by a motor."
- 6. Often talks excessively.
- 7. Often blurts out answers before questions are completed.
- 8. Often has difficulty waiting turn.
- 9. Often interrupts or intrudes on others, such as busting into conversations or games.

Total number of hyperactivity-impulsivity items circled.

# **Attention Deficit and Hyperactivity Disorder**

Hilliard Pediatrics, Inc. - Dr. Tim Teller, MD

## Results

\*\*If 6 or more symptoms of inattention or hyperactivity-impulsivity have persisted for at least 6 months to a degree that is maladaptive and inconsistent with developmental level, the patient should be further evaluated for ADD and/or ADHD.

In addition, the following factors might be considered:

- Some hyperactive impulsive or inattentive symptoms that caused impairment were present before 12 years of age.
- Some impairment from the symptoms is present in two or more settings (school, work, home, play, etc.).
- There must be clear evidence of clinically significant impairment in social, academic, or nonoccupational functioning.
- The symptoms do not occur exclusively during the course of a pervasive developmental disorder, schizophrenia, or other psychotic disorder, and are not better accounted for by another mental disorder (e.g., mood disorder, anxiety disorder, dissociative disorder, or personality disorder).