

ADHD Management Plan—Sample 1

Date: _____

To the family of _____, please refer to this plan between visits if you have questions about care.

If you are still unsure, call us at _____ for assistance.

Patient _____'s doctor is _____ Pager # _____

Parent/Guardian _____ Relationship _____

Contact Number(s) _____

School Name _____ School Phone No. _____ Fax No. _____

Key Teacher Contact Name _____ Grade _____ Teacher's E-mail Address _____

Goals What improvements would you most like to see? Specific behavior you would like to see improve:

At Home: _____

At School: _____

Plans to reach these goals:

1. _____
2. _____
3. _____

Medication

1. _____ Time _____ am/pm Time _____ am/pm Time _____ am/pm
Dose 1 _____ mg Dose 2 _____ mg Dose 3 _____ mg

2. _____ Time _____ am/pm Time _____ am/pm Time _____ am/pm
Dose 1 _____ mg Dose 2 _____ mg Dose 3 _____ mg

- Medication to be given on nonschool days Medication given for _____ number of days
 School authorization signed by parent and MD Rx written for duplicate bottle for administration at school
 Side effects explained/information given

Common Side Effects: decreased appetite, sleep problems, transient stomachache, transient headache, behavioral rebound

Call your doctor immediately if any infrequent side effects occur: weight loss, increased heart rate and/or blood pressure, dizziness, growth suppression, hallucinations/mania, exacerbation of tics and Tourette syndrome (rare)

Further Evaluation

- School testing scheduled date _____
 Parent and Teacher Vanderbilts completed _____

Additional Resources and Treatment Strategies

- F/U Parent Vanderbilt given completed _____
 F/U Teacher Vanderbilt given to parent F/U Teacher Vanderbilt to be faxed to school completed _____
 Behavioral Modification Counseling Referral to _____
 Parenting Tips Sheet given CHADD phone number given: 800/233-4050
 Community Resources/Referrals: _____

Next Follow-up Visit: _____

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The information contained in this publication should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances.

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