

Mary L. Shook Student Health Service

APPALACHIAN STATE UNIVERSITY

Clinic policies regarding ADHD treatment

DIAGNOSTIC ASPECTS:

- 1. Students concerned about ADHD: Attention Deficit Hyperactivity Disorder** is a complex diagnosis and as such, this diagnosis should not be made lightly. **Student Health Service does not do diagnostic evaluations for Attention Deficit Hyperactivity Disorder.** We provide prescriptions for ADHD medications only after a specialist has made a formal diagnosis and if clinically appropriate, at the clinician's discretion. A list of local psychologists who do testing is available upon request. Any testing needed is done at the student's expense. See page 3 for details on testing requirements. **BE AWARE THAT MANY ONLINE "TESTING" OPTIONS DO NOT MEET MINIMUM REQUIREMENTS LISTED ON PAGE 3.**
- 2. Trial therapy by an outside physician is not enough:** Many clinicians in private practice will do an empiric trial of ADHD medications. **Student Health Service does not accept this as proof of diagnosis as no workup or evaluation has been done.**
- 3. Students with a pre-existing diagnosis from grade school:** For students diagnosed in elementary or high school, Student Health Service requires review of diagnosis and treatment records from your home medical provider. A "Release of Medical Information" form must be signed by the student in order for Student Health Service to obtain necessary medical records from the diagnosing specialist. If the received documentation is adequate, a clinician may then provide ongoing prescriptions for ADHD medications without further formal testing and if clinically indicated, at the clinician's discretion. See page 3 for further details.

TREATMENT ASPECTS:

- 1. Initial Appointment:** Once records are received regarding a new diagnosis or a pre-existing diagnosis, an initial appointment with a clinician at Student Health should be made. The records will be reviewed and discussed. Vital signs including a blood pressure and weight will be checked. If the clinician feels that adequate documentation is in place, a prescription may be given. If the diagnosis is new, the prescription will likely be for an initial trial period; follow-up will be required to evaluate for medicine efficacy and side effects. If the diagnosis is pre-existing and the current dose of medication is working well without significant side effects, a prescription for a longer time period may be given. This is done at the clinician's discretion.
- 2. Follow-Up Appointments:** Follow-up for further prescriptions should be **BY APPOINTMENT.** Students should call 828-262-6577 at least a week in advance to schedule these appointments. Same day appointments cannot usually be provided. It is the student's responsibility to make an appointment for medication refill. Appointments for refills are only provided between 8 a.m. and 4 p.m., Monday through Friday. **Refills are NOT provided during weekend clinic or during University breaks.**
- 3. Medication Changes:** If the student feels that the current dose of medication is inadequate or if there are unacceptable side effects, an appointment should be made to discuss these issues.
- 4. Continuity of Care at Student Health Service:** Appalachian Student Health clinicians strongly advise that students diagnosed with ADHD choose the same clinician to see for ongoing ADHD care.
- 5. App State Pharmacy:** The App State Pharmacy **does not** carry any medications for the treatment of ADHD. Any prescriptions given by Appalachian clinicians must be filled at an outside pharmacy at the student's expense.
- 6.** Even if prior records support a diagnosis of ADHD or current testing indicates ADHD, a prescription may still not be provided. There are contraindications that may prevent a student from having this medication provided, such as substance use issues, anxiety or mood symptoms, or other co-existing conditions or medications. It is ultimately at the Appalachian clinician's discretion whether to write for ADHD medication.

LEGAL ASPECTS:

- 1. Lost Prescriptions:** Unfortunately, abuse and illegal resale of ADHD medications occurs. Students are advised to keep medications under lock and key. If medicine or a prescription for medicine is lost or stolen, the student should make an appointment to discuss with their clinician. We will document on the chart that the medication was lost or stolen. It is possible that the clinician may no longer continue the medication. This is done at the clinician's discretion.
- 2. Shared Prescriptions:** Sharing prescriptions with anyone is illegal. This is grounds for discontinuing the medication.
- 3. Altered Prescriptions:** Altering written prescriptions in any way is illegal. If an altered prescription is reported by a pharmacy, the clinician will contact the police. If any prescription is ever altered by a student, no further prescriptions for ADHD medications will be given by this clinic.

MISCELLANEOUS ASPECTS:

- 1. Disability Resources:** Students with an ADHD diagnosis are encouraged to connect with the Office of Disability Resources (ODR). ODR determines access needs, applicable University resources/supports, and eligibility of appropriate accommodations (academic adjustments, auxiliary aids/services, and reasonable modifications) on the basis of disability at Appalachian. . The telephone number is 828-262-3056. Anne Belk Hall, Suite 112, odr.appstate.edu
- 2. Continuity of Care Issues:** Students who have seen a home-area primary care provider in the past for prescriptions need to decide who will provide care. Appalachian Student Health Service encourages keeping planned visits with the home-area clinician when possible.
- 3. Special Circumstances:** Unusual circumstances (internships, summer work, study out of town) that may need deviation from typical protocols should be addressed ahead of time with the clinician managing the student's care. An appointment should be made to discuss these issues.
- 4. For therapy help** in treating emotional health symptoms contact Counseling and Psychological Services Center 828-262-3180. counseling.appstate.edu
- 5. The AS-U-R program**, Supporting Transition, Access, and Retention, also called STAR. This program assists students with improvement of executive functions, which are cognitive capacities linked to such tasks as organization, planning, judgment, and adequate self-directed regulation of behaviors and emotions. Office: Edwin Duncan Hall, Room 213-D <https://studentlearningcenter.appstate.edu/students/u-r>
- 6. Student Learning Center** For help in developing integrative thinking skills and providing academic services to students. ASU-828-262-3046 or <https://studentlearningcenter.appstate.edu/>
- 7. For more information** regarding the nature of the disorder, visit Children and Adults with ADHD (CHADD) website-www.chadd.org

Attention Deficit Hyperactivity Disorder (ADHD) testing

Students who think they may need treatment for ADHD should first discuss with their clinician to see if testing is recommended. Fees for testing vary are the responsibility of the student. Options in the Boone area include:

ASU Psychology Clinic at 262-6639	Dr. Bob Hill 828-265-6410
Appalachian Regional Health System Outpatient Behavioral Health 436 Hospital Drive, Suite 235 Linville, NC 28646 828-737-7888	Mentor Behavioral Healthcare 249 Wilson Drive, Suite 5 Boone, NC 28607 828-268-2172 Fax: 877-211-7323

ADHD Testing Guidelines/Requirements:

Student Health requires clear documentation of testing done to establish your ADHD diagnosis in order to provide stimulant medication prescriptions. Evaluation should include OBJECTIVE testing for sustained attention.

The following information must be provided for review when requesting stimulant medication prescriptions for ADHD. You must drop off or fax the required documentation prior to your scheduled appointment so it can be reviewed before your meeting with a provider. (Fax # is 828-262-6958)

A copy of the psychological or psychoeducational evaluation report from the provider (ie,- psychologist or neuropsychologist) who diagnosed your ADHD is required. In general, this report must include:

- 1) **Client** name, date of birth, and the date of the evaluation.
- 2) Provider name (printed), office address and contact information, qualification of evaluator, signature and date of report
- 3) Evaluation must include a reasonable combination of the following:
 - Cognitive/intelligence test (WAIS-IV or Stanford-Binet 5, RIAS-2, Woodcock Johnson-IV)
 - Achievement Test (Woodcock-Johnson- IV, WIAT)
 - Test of Sustained Attention (TOVA or CPT)
 - Self report forms for ADHD (Brown, Connors) and collateral information from parents/partners (Brown, Connors). **(However, assessments such as checklists, symptom lists, and rating scales are valuable, but will NOT be used as the sole criteria for an ADHD diagnosis).**
 - Diagnostic interview with psychologist- with the expectation that the interview is a face to face/one on one interaction. **(Symptom lists reviewed asynchronously online are not acceptable.)**
- 4) Comprehensive diagnostic interview, which must include:
 - Psychosocial and educational history
 - Mental health and medical history (including current treatments/medications)
 - Current symptoms
- 5) Clinical evaluation/summary must include:
 - All tests and scores
 - Interpretation of test results
 - Diagnosis
 - Summary and recommendations

Special Considerations:

- Note that an Individualized Education Program (IEP) or a 504 Plan is insufficient documentation alone, but can be included.
- The evaluation cannot be done by a family member or others with a close personal relationship to the individual.
- The evaluation must be from within the last 5 years.
- Documentation of diagnosis made earlier in life (by pediatrician or psychiatrist) and ongoing treatment can be reviewed on a case-by-case basis. In general, without ongoing stable pharmaceutical treatment since the diagnosis was made such documentation is insufficient to substantiate prescription provision. If treatment was from years before, an updated evaluation would likely be required.
- Trial of therapy from an outside clinician for an adult without testing is not adequate.

