

ADHD pathway (Draft)

Referral received from GP:
 Agreed in clinical pathway meeting – Through Sci referral
 No additional screening tools or questionnaires by GP
 Patient added to ADHD tracking list.

Letter sent to patient advising them of the referral and asking that they complete and return:

1. Current behaviour self-report form
2. Childhood behaviour self-report form
3. Partner report form

Initial meeting with consultant for general psychiatric assessment in order to rule out of other psychiatric comorbidities that may better explain the symptoms or that may need treating before further assessment for ADHD.

Comorbid illness identified

No Comorbid illness identified

Diagnosis made and condition treated.

Symptoms of ADHD resolved or explained by new diagnosis

Yes

No

Discharge from ADHD pathway

Diagnostic review with consultant. If medication appropriate review for any physical contraindications and complete medical assessment tool form. Baseline pulse, BP and weight recorded. Medication information given and prescription issued. Discuss environmental modifications.

First follow up for dose titration in 4 weeks after initiation by duty CPN and to include post diagnostic support /discussion. Reviews to continue every 4 weeks until dose stabilised. Complete monitoring treatment form at each review.
 3 monthly follow up with consultant to review medication – effects and side effects.

Prescribing handed over to GP once dose stabilised as part of shared care agreement and reviews annually.

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