# Essentials

# of ADHD Assessment for Children and Adolescents

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Elizabeth P. Sparrow

Drew Erhardt

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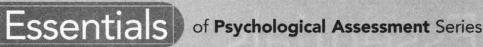
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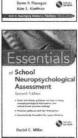
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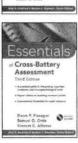
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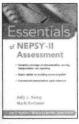


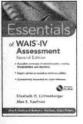
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To Selma and Warren, with love and appreciation—DE

To C. Keith Conners, our valued mentor, colleague, and friend—DE & ES

#### **FOREWORD**

his new book by Elizabeth Sparrow and Drew Erhardt addresses important needs during this time of rapid change in our understanding of ADHD. The American Psychiatric Association continues to "tweak" the DSM criteria for recognizing ADHD. Professionals need to be aware of these changes and understand their impact on clinical practice in a variety of settings. The knowledge required to correctly assess ADHD goes well beyond the general guidelines in the DSM manual. The purpose of this book is to provide that knowledge.

With prevalence estimates of ADHD already approaching nine to twenty percent of the child population, it seems that ADHD has been diagnosed too liberally, in a slap-dash fashion. There are an ever-increasing number of children and adolescents who are misdiagnosed, and therefore mistreated, with dire consequences such as drug diversion, emergency room visits, and suicide. Conversely, there are children and adolescents who are not correctly treated due to failure to recognize ADHD when it is present. The thorough, comprehensive guidelines in this book will help prevent the common occurrences of under- and over-diagnosis of ADHD.

Although often ignored, there is a vast array of practical clinical issues relevant to the assessment of this syndrome (e.g., dealing with discrepant data, differential diagnosis, comorbidity). This book will heighten mental health professionals' awareness of these issues and provide the tools necessary to address them successfully. A clear, concise guide for conducting state-of-the-art ADHD evaluations, this book is a valuable resource for professionals in training, for those working in schools, and for those seeking to hone their ADHD assessment skills.

I had the good fortune to mentor Drs. Sparrow and Erhardt at the beginning of their careers and continue to collaborate with them as colleagues. In this authoritative yet highly accessible book, they combine their extensive experience in clinical assessment and treatment with their backgrounds in teaching, research, and test development.

The fundamental message of this book is the importance of a *comprehensive* assessment of ADHD and related disorders. This means that the assessment must include multiple sources of information and multiple methods. There is no single test or method for this task, and appropriate selection of the tasks and sources of information is the *sine qua non* of a good assessment.

This book offers a truly comprehensive *and* evidence-based approach to assessment, without fluff, surplus speculation, or unsupported opinion. I highly applaud this significant new work by two excellent, well-informed authors.

C. Keith Conners, Ph.D.
Professor Emeritus
Duke University
Department of Psychiatry & Behavioral Sciences

#### **SERIES PREFACE**

n the *Essentials of Psychological Assessment* series, we have attempted to provide the reader with books that will deliver key practical information in the most efficient and accessible style. The series features instruments in a variety of domains, such as cognition, personality, education, and neuropsychology. For the experienced clinician, books in the series offer a concise yet thorough way to master utilization of the continuously evolving supply of new and revised instruments, as well as a convenient method for keeping up to date on the tried-and-true measures. The novice will find here a prioritized assembly of all the information and techniques that must be at one's fingertips to begin the complicated process of individual psychological diagnosis.

Wherever feasible, visual shortcuts to highlight key points are utilized alongside systematic, step-by-step guidelines. Chapters are focused and succinct. Topics are targeted for an easy understanding of the essentials of administration, scoring, interpretation, and clinical application. Theory and research are continually woven into the fabric of each book, but always to enhance clinical inference, never to sidetrack or overwhelm. We have long been advocates of "intelligent" testing—the notion that a profile of test scores is meaningless unless it is brought to life by the clinical observations and astute detective work of knowledgeable examiners. Test profiles must be used to make a difference in the child's or adult's life, or why bother to test? We want this series to help our readers become the best intelligent testers they can be.

In Essentials of ADHD Assessment in Children and Adolescents, the authors provide a clear and informative road map for practitioners seeking to conduct state-of-the-art assessments for one of the most common disorders of childhood. Drawing upon years of experience in conducting diagnostic evaluations of ADHD following best-practice standards, they emphasize the importance of a comprehensive evaluation, incorporating data from multiple sources, using multiple methods, and interpreting findings within the appropriate developmental and cultural contexts. The major components of an ADHD evaluation (interviews,

rating scales, cognitive testing, observation, record review) are reviewed in detail. Expert guidance is provided for resolving the most common challenges in assessing ADHD, including differentiating symptoms from normal development, dealing with discrepant data, differential diagnosis, and considering comorbidity. The latest scholarly literature is integrated with the authors' practical recommendations to provide clinicians with the concepts and tools needed for effective and accurate assessment of ADHD.

Alan S. Kaufman, PhD, and Nadeen L. Kaufman, Ed.D, Series Editors Yale Child Study Center, Yale University School of Medicine

#### PREFACE

ttention-deficit/hyperactivity disorder (ADHD) is one of the most common childhood disorders in the United States (Merikangas et al., 2010), and one of the diagnoses parents worry about the most (Garbutt et al., 2012). As a result, clinicians frequently receive requests to evaluate children for possible ADHD. Although there are diagnostic criteria for ADHD (see Chapter 2) and several practice guidelines delineating appropriate assessment components (see Chapter 3), it can be difficult to bridge the gap between these aspirational guides and the nitty-gritty of actual clinical work. Even seasoned professionals can fall prey to the lure of drawing conclusions based on first impressions and incomplete data. Misdiagnosis, whether over- or under-identification, has serious consequences for children, including inappropriate or denied treatment, prolonged distress, misuse of resources (time, energy, money), and development of secondary problems. Unfortunately, there is no definitive assessment tool, no neurological signature, no blood test for ADHD. There are certainly measures that improve the accuracy of ADHD diagnosis, but none of these are sufficient in isolation.

We believe that ADHD is a widely misunderstood disorder, and that a careful and comprehensive evaluation is the *only* way to ensure that a child is accurately diagnosed so that she can receive appropriate services. As such, we have prepared this book as an expert guide for the assessment of ADHD. We blend diagnostic guidelines with research findings, and add clinical tips from our years of thinking about ADHD in individual evaluations, scientific studies, and rating scale development.

#### ORGANIZATION OF THE BOOK

Just as an evaluation often starts with a developmental history, this book begins with a brief history of ADHD to provide you with a context for understanding the disorder. Chapter 1 then describes the core diagnostic features of ADHD—inattention, hyperactivity, and impulsivity—as well as non-diagnostic features

associated with the disorder. Disorders that tend to co-occur with ADHD are summarized before the chapter concludes with discussions of etiology and epidemiology.

In Chapter 2, we introduce diagnostic criteria for ADHD, based on the *Diagnostic and Statistical Manual of Mental Disorders* (DSM). We provide information for clinicians familiar with the DSM-IV-TR (American Psychiatric Association, 2000) who are transitioning to using the DSM-5 (American Psychiatric Association, 2013). If one regards the DSM criteria as the "laws" for diagnosing ADHD, then Chapter 3 elaborates on the "spirit" of ADHD assessment, including the essential goals of inclusion and exclusion as well as a number of guiding principles. Chapter 4 examines the major components of a comprehensive evaluation for ADHD, including record review, interviews, clinical observations, rating scales, and cognitive testing. For each component, we discuss what information to obtain, whom to ask, and when to implement it. We provide examples of tests that represent each of these assessment components.

Chapter 5 has two aims: (1) to guide your integration of data obtained from the assessment, and (2) to help you apply the essential concepts discussed in this book. In addition to elaborating on key ways to discriminate what *is* ADHD from what is *not*, the chapter walks you through a number of diagnostic challenges likely to arise in your clinical work. Issues like overlapping symptoms, differential diagnosis, and comorbidity are addressed. For each of these challenges, we provide information about how to compare the possibilities and reach a diagnostic determination. We share advice on resolving the inevitable discrepancies that occur as part of a comprehensive assessment for ADHD. Chapter 5 closes with the reminder that assessment does not end once you assign a diagnosis (or diagnoses), and offers some suggestions for treatment planning and providing feedback. The book concludes in Chapter 6 with three case studies of children referred for evaluation of ADHD.

#### **FOCUS OF THE BOOK**

This book focuses on the assessment of ADHD in children and adolescents. Thus, with occasional exceptions, content pertaining to ADHD in adults, ADHD in preschoolers, interventions for ADHD, general clinical practice, and general child psychopathology is excluded. Additional resources are noted in the text and annotated bibliography for readers interested in learning more about these topics.

#### INTENDED AUDIENCE

Our intended audience is licensed clinicians as well as those still in training. Professionals who do not have a background in child psychopathology and

development will need additional information to responsibly apply the principles outlined in this book within a developmental framework. Researchers, educators, and the general public may find some of what we discuss informative; however, they are reminded that this book cannot substitute for clinical training and supervision. The book is intended to supplement (not replace) the DSM-5; indeed, we urge clinicians to review and consult the DSM on a regular basis.

#### STYLISTIC CONVENTIONS

Throughout the book, we strive to be clear and straightforward. When there are essential points, we emphasize them with "Don't Forget," "Caution," and "Rapid Reference" boxes. Special topics are discussed as they arise.

Out of necessity, we have adopted a few stylistic conventions used throughout the book:

- The terms child and children are used to describe school-aged children ages 6 through 18 years, rather than repeatedly specifying "children and adolescents." The decision to split "children" (16 years and younger) from "older adolescents and adults" (17 years and older) for DSM-5 diagnosis of ADHD varies from the typical division of children from adults at 18 years old. Thus, we remind you of the distinction when relevant.
- ADHD occurs in both boys and girls, so we alternate male and female pronouns with no intended bias (other than when discussing genderspecific information).
- The term parent represents any relevant parental or caretaking figure, and should not be read as exclusively meaning "biologic parent."
- Because the American Psychiatric Association and the American Psychological Association both use the acronym APA, we spell out the relevant organization name each time to avoid confusion.

#### SUMMARY

By gathering comprehensive data from multiple sources with multiple methods, you can establish the child's history of symptoms, current presentation, and levels of impairment. These data will support your hypothesis testing as you evaluate the presence of ADHD and consider other explanations for the child's difficulties. Although the core features of ADHD are behaviors that occur to some extent in most children, we believe that conducting the type of thorough assessment described here will enable you to successfully differentiate these normal variants from the symptoms of ADHD.

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