ADHD and COVID-19
Frequently Asked Questions (FAQ)
9 April, 2020

The current COVID-19 pandemic has led to widespread closures of in-person health and medical centre clinics. Telehealth allows clinicians to continue to provide treatment to new and existing patients remotely but may require practice adaptations.

What does this mean for assessing and treating patients with ADHD?
Currently, virtual care is recommended for all non-urgent clinical encounters. Remember, it is important to balance the morbidity risk of not treating ADHD with the risk associated with COVID-19. CADDRA is providing answers to commonly asked questions regarding assessing and treating ADHD in the context of the COVID-19 pandemic. Additional information on assessment, diagnosis and follow-up can be found in the Canadian ADHD Practice Guidelines, 4.1. Edition (2020).

QUESTION 1: How can I virtually assess a patient for suspected ADHD?
ADHD Diagnosis and Treatment - Step 1: Initial Information gathering:
1. Use ADHD symptom questionnaires and functional assessments to gather information.
   - Establish a method of gathering information and conducting care that works for both you and your patient.
   - CADDRA fillable forms are available online, along with instructions on how to save and send the forms
   - Or, healthcare professionals can sign up to ADHD Rating Scales - a website that provides online ADHD screening and treatment monitoring forms. Clinicians need to sign-up and then their patients can complete the SNAP-IV or the ASRS online, along with optional supplementary clinical information. Clinicians are notified by email when the forms are completed and can either view the scale and report online, or download for their records.

QUESTION 2: How can I conduct an ADHD medical review when assessing a patient by telemedicine?
ADHD Diagnosis and Treatment - Step 2: Medical Review
1. Exclude any causes that can mimic ADHD, review nutrition and lifestyle habits, and evaluate potential contraindications to medication.
New Patients:
- Start by conducting an initial, virtual consultation, either by phone or using a teleconference setting as recommended by your regulatory boards.
- Document consent for the consultation (verbal or written). If needed, use a sample consent form, such as Canadian Medical Protective Association (CMPA) form.
- Consider sending instructions for the virtual session to patients in advance.
  - Use these telemedicine resources collected on the CADDRA website to create your own protocol.
  - Consider the issue of confidentiality in the home. Can others hear? If yes, how can this be managed?
  - Consider issues of safety and whether the client may be at risk of abuse in the home.
  - Send out assessment forms for completion in advance of the consultation (use the fillable CADDRA ADHD questionnaires currently available online or sign up for ADHD Rating Scales and ask patients to complete the relevant forms online.

If the clinician's office is still open:
- If the doctor’s office is still open, a physical exam should be conducted provided measures are taken to ensure proper safety of patients and staff, this may include the use of personal protective equipment (PPE).

If the clinician's office is closed:
- Many doctors' offices are currently closed to in-person visits. In this case consider:
  - Is there a recent (within the past six months) physical examination report that can be accessed and reviewed, in particular with regard to height, weight and blood pressure measurements?
  - Ask the patient / caregiver(s) to measure weight and height at home.
  - Ask whether the patient has a blood pressure monitor at home (e.g., on exercise equipment)? If not, can they borrow or purchase a blood pressure monitor or use in a pharmacy (with appropriate hygiene measures)?

Existing patients:
- As with new patients, conduct a virtual session and send out assessment forms and session protocol ahead of time.
- In most cases, it will not be necessary to conduct a physical exam in-person.
- Access any recent (within the past six months) physical examination reports that can be reviewed in particular with regard to height, weight and blood pressure measurements.
  - Ask the patient / caregiver(s) to continue measuring weight and height at home.
  - Ask the patient/ caregiver(s) if they have access to a blood pressure monitor at home (e.g., on exercise equipment)? If not, could they have access to a blood pressure monitor (borrowed or purchased)? Make sure that the proper cuff size is used, especially for very small or very big patients.
  - Another option is to measure blood pressure when visiting the pharmacy and advise patients to use proper cleaning protection (e.g., use wipes to sanitize the equipment and wash hands thoroughly and immediately after use).
QUESTION 3: How can patients conduct blood pressure monitoring at home?

- The Canadian Hypertension Association provides a list of recommended blood pressure monitors and instructions and a log for at-home monitoring.
- Another option is to measure blood pressure when visiting the pharmacy and advise patients to use proper cleaning protection (e.g., use wipes to sanitize the equipment and wash hands thoroughly and immediately after use).

QUESTION 4: How can I “observe” the patient in a phone consultation?

ADHD Diagnosis and Treatment - Step 3: ADHD Specific Interview
1. Observe the patient during the interview and review their strengths
2. Review the patient’s developmental history and obtain collateral information
3. Review assessment questionnaires
4. Consider other psychiatric, psychosocial factors or learning disorders.

- Phone consultation reduces the capacity to observe non-verbal cues. Speech structure and speed can help assess the level of self-modulation, as well as the impacts of surrounding stimuli. If available, a video consultation is better.

QUESTION 5: How can I provide adequate feedback and psychoeducation through telemedicine?

ADHD Diagnosis and Treatment - Step 4: Feedback and Treatment Recommendations
1. Provide diagnosis and psychoeducation
2. Start Treatment

- You can ask the patient if they have access to the web while you are talking, and if they do, direct them to resources they can refer to, such as the Centre for ADHD Awareness, Canada (CADDAC). If not, you can send them a list of web-based resources later.
- Sometimes, a patient may ask you to include other members of the family in the discussion during the consultation process. Make sure to note who they are and that they agree to this format of discussion and document it in the patient chart.
- If you are using a video conference platform, and the patient is willing, you may take the time to observe their environment and include in your consultation some organizational / adaptive tips.

QUESTION 6: How can I adjust doses and switch medications remotely?

- Adjusting dosing and switching medications, as well as prescribing certain medications (e.g., Intuniv XR) may need a different approach when carried out virtually.
- Recognize that some adjustments may be needed during this time period to achieve best practice and to meet patients’ needs.
- Start low, go slow and monitor carefully.
- Obtain consent for agreed on plans and procedures, as necessary.

QUESTION 7: Should ADHD medications be given if kids are not in school and symptoms cannot be evaluated, as per usual?

- Medications for ADHD have an important role to play in all domains of a person’s life: school, work AND family, social life. CADDRA recommends continuing medications during this period. Maintaining treatment may help to maintain a harmonious family life. Furthermore, many schools
have implemented virtual learning programs and ADHD treatment may be important to maintain focus on school related activities.

**QUESTION 8: How can I assess the impact of ADHD medications when kids are not in school and performance cannot be compared?**

- It may be challenging to assess ADHD treatment when patients are not in school or at work. Symptom monitoring relies on multiple sources of information including teachers. However, it is possible to rely on caregivers to provide assessment and to track symptoms over time. Ideally, the optimal measure of treatment response should rely on two settings.
- You can also ask the child’s caregiver(s) to set small experimental tasks to review medication efficacy. Caregiver(s) can set this up as a game, such as reading and doing a scavenger hunt. Have parents use the SNAP etc. more frequently.

**QUESTION 9: How can I assess the impact of ADHD medications in adults?**

- With adults, the ASRS is sensitive to change. Clinicians can ask Individuals with ADHD to conduct this assessment themselves, and/or have roommates and family members do so as well, every few weeks.

**QUESTION 10: If patients have to be referred to specialty care, is this currently possible?**

- Specialty medicine currently addresses urgent life threatening situations. If a patient is suicidal, or presents with violent thoughts, they should be referred to specialty care.

**QUESTION 11: What advice can I give to patients if they are experiencing difficulties obtaining medication renewals and/or adjustments?**

- Physicians can provide longer prescriptions for patients during this time (although pharmacists in some provinces are only dispensing 30 days at a time).
- Physicians can talk to pharmacists directly to adjust prescriptions for patients
- Pharmacists have been provided with more flexibility with regards to filling prescriptions during this time.
- Health Canada has issued the attached exemptions for prescriptions of controlled substances under the [Controlled Drugs and Substances Act (CDSA) and its Regulations](https):  
  - permit pharmacists to extend prescriptions;
  - permit pharmacists to transfer prescriptions to other pharmacists;
  - permit prescribers to issue verbal orders (i.e., over the phone) to extend or refill a prescription; and
  - permit pharmacy employees to deliver prescriptions of controlled substances to patient's homes or other locations where they may be (i.e self isolating).
- Also, refer to the Government of Canada, [Frequently Asked Questions](https):

**QUESTION 12: What should my patients do if they cannot afford the cost of their medications (e.g., due to unemployment/loss of insurance coverage)?**

- The clinician should look into whether there is a support program to apply for on behalf of the patient.
- Look into whether it is possible to call in a sample card number with a prescription.
QUESTION 13: How might the current situation with COVID-19 be affecting individuals with ADHD?

- Increased stress and anxiety
- Increased substance use and other risky behavior, particularly for adolescents experiencing less structure
- Isolation
- Increased relationship conflicts
- Stress around scheduling and organizing, particularly for parent(s) with children at home

Caregivers:

- Acknowledge that this is a stressful time for everyone.
- Remind them that no matter what other people’s lives may look like on social media, others are not doing as well as they say. Don't try to be the model family. It's okay to acknowledge this is hard and challenging.
- Keep parenting expectations realistic.
- Take breaks from parenting and monitoring. Schedule some completely fun time and time when you are not evaluating yourself as a parent or in regards to your child.

Adults:

- CADDRA recommends booking a telephone or video chat to initiate psychoeducation and to discuss psychosocial intervention options for ADHD.

QUESTION 14: What resources can I give caregiver(s) on how to balance studying and socializing online with limiting screen time?

- PREVNET Resource
- Canadian Pediatric Society (CPS) Resource

QUESTION 15: How can parents/individuals develop schedules, keep busy, entertained, healthy while under quarantine?

- Talk to patients/caregiver(s) about the importance of routines, schedules and staying active, particularly at this time.
- CADDRA has developed documents for children, adolescents and adults that can be provided to your patients.
- Provide a document with links to various videos and online materials depending on age of patient for patient/family to review. CADDRA has resources for patients here
- CADDAC has quarantine-related information here
- The ADDitude website is a great resource for patients with ADHD and their caregiver(s) that hosts information and webinars on managing ADHD-specific challenges during the COVID19 outbreak.
- Other useful parenting resources: https://www.ahaparenting.com/blog/your-magic-wand-to-ease-stress
  https://www.ahaparenting.com/blog/working-home-with-kids-coronavirus

QUESTION 16: How can I address a parent's concerns regarding their adolescent child who is engaging in riskier behavior, such as substance use, during this unstructured time?

- Provide psychoeducation on:
  - Creating a structured schedule
○ Focusing on connecting
○ Encouraging healthy behaviors and responses to stress
○ Monitoring online activities / peer-group and setting necessary limits
○ Helping children and teens deal with stressful public events (CPS resource)
○ Relying on trusted other supports. Aunts and uncles or family friends can take the place of caregivers and help to monitor the safety of children/adolescents.

- Provide psychoeducation on:
  ○ The developmental impact of substance use
  ○ The impact of combined substance use and COVID-19 risk (CPS resource)
  ○ Remember to emphasize positive management and coping strategies with caregiver(s). For example, suggest a mantra such as: “Everything is going to be okay and if not, I can call on my community for help.”

**QUESTION 17:** How can I virtually monitor ADHD symptoms in patients?

**ADHD Diagnosis and Treatment - Step 5: Follow-Up**
- Most important issue regarding follow-up is communication and connection. Have your patient connect with you even for a short period of time every few weeks. Alternatively, is it possible for other office staff to assist with checking in with patients, reassuring them that their doctor/clinician is being informed of their progress?
- Access past physical exam results (e.g., ECG), if needed.
- See question on measuring blood pressure for suggestions on how to do this outside of the office.
- Document informed consent/assent.
- CADDRA recommends a general follow-up note to accompany the initial intake note.

**QUESTION 18:** What do clinicians, caregivers and individuals with ADHD need to remember?
Find joy every day, laugh with friends / family, stay safe!