

Paediatric Attention Hyperactivity Deficit Hyperactivity Disorder (ADHD)

Collaborative Care Information, Redcliffe Hospital

Dear Doctor

Many paediatric patients with ADHD are suitable for monitoring and medication prescribing in primary care.¹ Eligibility for shared care of ADHD patients includes:²

- There is unlikely to be a significant change of management in the next 6 months
- The general practitioner is able to make minor or expected changes to management
- There is a pathway in place for the patient to be referred back to the paediatrician if required

Your patient fulfills the criteria for ADHD collaborative care between you and the Redcliffe Hospital Paediatric Department and this has been discussed with the patient. The Paediatric team will continue to review the patient on a 12 monthly basis, or sooner if you request it. The Redcliffe Paediatric team is also available for advice in between outpatient appointments.

Regulatory prescribing advice

GPs can prescribe stimulants to paediatric patients with diagnosed ADHD. Under the Medicines and Poisons (Medicines) Regulation 2021 (MPMR), **prescribing approval is not required** for a medical practitioner prescribing amfetamines or methylphenidate for attention deficit disorder of a child patient who is at least 4 years of age (4-17 years inclusive).³ Pharmaceutical Benefits Schedule (PBS) Authority is still required.

QScript

Medical practitioners are required to check QScript when prescribing a monitored medicine for a patient.⁴ This includes all amfetamines and methylphenidate.⁵

GP monitoring checklist

We suggest patients are reviewed in primary care to assess their ADHD **once every 6 months** (unless otherwise specified) for the following:

- Review ADHD symptoms^{6,7} (including feedback from teachers and carers)
 - Attention
 - Hyperactivity
 - Impulsivity
 - Academic progress
- Measure height and weight and plot on growth chart^{6,7}
- Heart rate^{6,7}
- Blood pressure^{6,7}
- Check if school documentation required
- Adverse effects (where appropriate)^{6,7}
 - Sleep initiation difficulties
 - Appetite
 - Mood
 - Anxiety
 - Headache
 - Emotional dysregulation on wearing off of short acting medication
- Comorbid conditions (may include mood, tics, anxiety, other conditions, substance abuse)^{6,7}
- Adherence and risk of stimulant diversion⁶

NOTE: [ADHD Medication Management – Child & Youth - HealthPathways](#) provides more detailed information including observation and growth charts)

If considering ceasing medications (including weekend and holiday breaks), methylphenidate and amfetamines can be stopped abruptly, however guanfacine (Intuniv) and atomoxetine (Strattera) require weaning to cease safely. Further information regarding drug holidays and cessation can be found in [HealthPathways](#).

Paediatric advice and request for earlier review

If you require advice between appointments regarding patient management and medications, a “[request for advice](#)” (RFA) can be sent to the Redcliffe Paediatric team through GP Smart Referrals (GPSR). A written response from a Paediatrician will be returned to you via GPSR within 5 business days.

If you feel the patient requires prompt paediatric review, please update the patient referral outlining your concerns and send to the paediatric department through GPSR (preferred) or the eReferral template.

Consider referral back to the Redcliffe Paediatrics service if:

- concerns about misuse or diversion of psychostimulants
- persistently elevated BP
- cardiovascular symptoms
- deterioration of symptoms (attention, hyperactivity, impulsivity, anxiety or irritability, sleep problems)²
- weight is dropping percentiles
- medication not well tolerated

NOTE: Please consider early referral to an adult psychiatrist once the patient has turned 17-years-old, acknowledging that wait times for adult services can be long.

[HealthPathways](#) also covers criteria for earlier review by the Paediatric team.

If you have any concerns regarding this care pathway please contact the Redcliffe Hospital Paediatric team via the RFA pathway, or update the referral for your patient with any concerns.

Kind regards,

The Redcliffe Hospital Paediatric team

Disclaimer:

This is general advice only and is not a substitute for personalised professional medical advice. This information is provided as a support resource only. If you have any concerns, please contact the Paediatric team as outlined above.

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References

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