



Blue Shield  
of California

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**AMERICAN ACADEMY OF PEDIATRICS:  
Clinical Practice Guideline: Diagnosis and Evaluation of the Child With Attention-Deficit/Hyperactivity Disorder**

**Committee on Quality Improvement and Subcommittee on Attention-Deficit/Hyperactivity Disorder**

This guideline offers recommendations for the diagnosis and evaluation of school-aged children with ADHD in primary care practice. The guideline emphasizes: 1) the use of explicit criteria for the diagnosis using *DSM-IV* criteria; 2) the importance of obtaining information regarding the child's symptoms in more than 1 setting and especially from schools; and 3) the search for coexisting conditions that may make the diagnosis more difficult or complicate treatment planning. The guideline further provides current evidence regarding various diagnostic tests for ADHD. It should help primary care providers in their assessment of a common child health problem

**RECOMMENDATION 1:** *In a child 6 to 12 years old who presents with inattention, hyperactivity, impulsivity, academic underachievement, or behavior problems, primary care clinicians should initiate an evaluation for ADHD (strength of evidence: good; strength of recommendation: strong).*

**RECOMMENDATION 2:** *The diagnosis of ADHD requires that a child meet DSM-IV criteria (strength of evidence: good; strength of recommendation: strong).*

**RECOMMENDATION 3:** *The assessment of ADHD requires evidence directly obtained from parents or caregivers regarding the core symptoms of ADHD in various settings, the age of onset, duration of symptoms, and degree of functional impairment (strength of evidence: good; strength of recommendation: strong).*

**RECOMMENDATION 4:** *The assessment of ADHD requires evidence directly obtained from the classroom teacher (or other school professional) regarding the core symptoms of ADHD, the duration of symptoms, the degree of functional impairment, and coexisting conditions. A physician should review any reports from a school-based multidisciplinary evaluation where they exist, which will include assessments from the teacher or other school-based professional (strength of evidence: good; strength of recommendation: strong).* **RECOMMENDATION 4A:** *Use of ADHD-specific questionnaires and rating scales is a clinical option when diagnosing children for ADHD (strength of evidence: strong; strength of recommendation: strong).*

**RECOMMENDATION 5:** *Evaluation of the child with ADHD should include assessment for coexisting conditions (strength of evidence: strong; strength of recommendation: strong).*

**RECOMMENDATION 6:** *Other diagnostic tests are not routinely indicated to establish the diagnosis of ADHD (strength of evidence: strong; strength of recommendation: strong).*

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